

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Coxe, Henry, M., ,

Mailing Address 101 E Adams St

City
Jacksonville

State
FL

Zip Code
32202-3303

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 06 / 2019

Transaction ID : VR0BAMM4XN2

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Davis, Carol, H., ,

Mailing Address 8837 Lakeside Cir

City
Vero Beach

State
FL

Zip Code
32963-4082

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2019

Transaction ID : VR0BAMM67E8

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked through ACT Blue

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Dehaven, Sally, , ,

Mailing Address PO Box 1652

City
Key West

State
FL

Zip Code
33041-1652

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Retired

Occupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 30 / 2019

Transaction ID : VR0BAMMDF90

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked through ACT Blue

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00