

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 101

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Democratic State Central Committee of Maryland

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

A. Armstrong, Patrick, Michael, ,

Mailing Address 661 Sprite Way

City
Glen BurnieState
MDZip Code
21061-7600FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
State of MarylandOccupation (for Individual)
Analyst

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		14		2019

Transaction ID : 2162071

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ActBlue

Mailing Address PO Box 441146

City
West SomervilleState
MAZip Code
02144-0031FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

22711.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2019

Transaction ID : 2162071E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Bailey, Jean, Oyemade, ,

Mailing Address 517 Ellsworth Dr

City
Silver SpringState
MDZip Code
20910-4268FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Howard UniversityOccupation (for Individual)
Professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		11		2019

Transaction ID : 2159155

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

500.00

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