

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

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

FOR LINE NUMBER: PAGE 45723 OF 63846

(check only one)

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

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NAME OF COMMITTEE (In Full)

DCCC

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

A. RICHARDSON, DAWN, M., ,

Mailing Address 1121 RUSTIC RIDGE RD

City  
AUBURNState  
ALZip Code  
36830-3327FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AUBURN UNIVERSITYOccupation (for Individual)  
GOV AFFAIRS SPEC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.34

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2016

Transaction ID : VT4C3S0NPD7

Amount of Each Receipt this Period

15.00

☐ Memo Item

\* EARMARKED CONTRIBUTION: SEE BELOW  
EARMARKED THROUGH ACTBLUE

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

B. ACTBLUE PAC

Mailing Address 366 SUMMER ST

City  
SOMERVILLEState  
MAZip Code  
02144-3132FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
CONDUIT TOTAL LISTED IN AGG. FII

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8199504.53

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 25 / 2016

Transaction ID : VT4C3S0NPD7E

Amount of Each Receipt this Period

15.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED  
THROUGH THIS ORGANIZATION.

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

C. RICHARDSON, DOLORES, C., ,

Mailing Address 4428 SE 55TH AVE

City  
PORTLANDState  
ORZip Code  
97206-3935FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 13 / 2016

Transaction ID : VT4C3RZ0D15

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

40.00

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