

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

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

FOR LINE NUMBER: PAGE 31 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

WY Democratic State Central Committee

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

A. Masterson, Mike, , ,

Mailing Address 500 Hutton St

City
Green River

State
WY

Zip Code
82935-4966

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
Not Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2019

Transaction ID : 4853251

Amount of Each Receipt this Period

810.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ActBlue

Mailing Address PO Box 382110

City
Somerville

State
MA

Zip Code
02144

FEC 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 ▼

6063.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 22 / 2019

Transaction ID : 4853251E

Amount of Each Receipt this Period

810.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Miller, Theresa, , ,

Mailing Address 1204 W 5Th Ave

City
Gillette

State
WY

Zip Code
82716-2609

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self-Employed

Occupation (for Individual)
Business Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 10 / 2019

Transaction ID : 4614464

Amount of Each Receipt this Period

20.00

☐ Memo Item

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

830.00

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