

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)

PAGE 13974 OF 34345

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

DCCC

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

A. IZZARD, EDDIE, , ,

Mailing Address 1801 CENTURY PARK E
STE 1250

City
LOS ANGELES

State
CA

Zip Code
90067-2341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF-EMPLOYED

Occupation (for Individual)
ACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

10 / 30 / 2017

Transaction ID : VT4C3WBKK75

Amount of Each Receipt this Period

100.00

☐ 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

SOMERVILLE

State

MA

Zip Code

21443132

FEC 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 ▼

2933568.55

Date of Receipt

10 / 30 / 2017

Transaction ID : VT4C3WBKK75E

Amount of Each Receipt this Period

100.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

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

C. IZZO, JOSEPH, A., ,

Mailing Address 4102 10TH ST NE
STNE

City

WASHINGTON

State

DC

Zip Code

20017-1805

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
WHITMAN WALKER CLINIC

Occupation (for Individual)
PSYCHOTHERAPIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

10 / 26 / 2017

Transaction ID : VT4C3W9YEP6

Amount of Each Receipt this Period

25.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW
EARMARKED THROUGH ACTBLUE

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

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

125.00