

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

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

FOR LINE NUMBER: PAGE 13 OF 92

(check only one)

☒ 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)

Democratic Party of Wisconsin

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

A. Houdek, Nathan, , ,

Mailing Address 1835 Winnebago St. #204

City  
MadisonState  
WIZip Code  
53704FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

State of Wisconsin

Occupation (for Individual)

Deputy Insurance Commissioner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2019

Transaction ID : 11ai-000641919

Amount of Each Receipt this Period

300.00

☐ Memo Item

Earmarked through ACT Blue

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

B. Bell, Oral, , ,

Mailing Address 6610 Montclair Ln

City  
MadisonState  
WIZip Code  
53711-3109FEC 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 ▼

900.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 26 / 2019

Transaction ID : 11ai-000641780

Amount of Each Receipt this Period

600.00

☐ Memo Item

Earmarked through ACT Blue

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

C. Petering, David, , ,

Mailing Address 7229 N Santa Monica Blvd

City  
Fox PointState  
WIZip Code  
53217FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Uw-Milwaukee

Occupation (for Individual)

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 27 / 2019

Transaction ID : 11ai-000641808

Amount of Each Receipt this Period

250.00

☐ Memo Item

Earmarked through ACT Blue

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

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

1150.00