

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

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

FOR LINE NUMBER: PAGE 61 OF 301

(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

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

A. Gutierrez, Amparo, , ,

Mailing Address 1939 General Pershing St

City  
New OrleansState  
LAZip Code  
70115-5433FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LsuhsOccupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 13 / 2019

Transaction ID : VR0BAMRPC19

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked through ACT Blue

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

B. Hakala, David, , ,

Mailing Address 8878 Michaels Ln

City  
Broadview HeightsState  
OHZip Code  
44147-1772FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
AclaraOccupation (for Individual)  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2019

Transaction ID : VR0BAMRE7P1

Amount of Each Receipt this Period

50.00

☐ Memo Item

Earmarked through ACT Blue

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

C. Hamilton, Cynthia, , ,

Mailing Address 1988 Casterbridge Dr

City  
RosevilleState  
CAZip Code  
95747-4908FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/AOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 11 / 2019

Transaction ID : VR0BAMRNEG5

Amount of Each Receipt this Period

25.00

☐ Memo Item

Earmarked through ACT Blue

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

100.00

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