

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)

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☒ 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. LUCAS, CATHARINE, , ,

Mailing Address **684 BENICIA DR**
APT 4

City
SANTA ROSA

State
CA

Zip Code
95409-3059

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 ▼

320.00

Date of Receipt

03 / 29 / 2020

Transaction ID : 29066442

Amount of Each Receipt this Period

15.00

☐ Memo Item

*** EARMARKED CONTRIBUTION THROUGH
 ACTBLUE PAC ON 03/29/2020**

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

B. LUCAS, ELIZABETH, C, ,

Mailing Address **40 W 115TH ST**
APT 14D

City
NEW YORK

State
NY

Zip Code
10026-3137

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

03 / 10 / 2020

Transaction ID : 28980600

Amount of Each Receipt this Period

225.00

☐ Memo Item

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

C. LUCAS, WALTER, , ,

Mailing Address **123 HENSHAW AVE**
SPC 104

City
CHICO

State
CA

Zip Code
95973-7220

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
INSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

03 / 09 / 2020

Transaction ID : 28989854

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

265.00