

# **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 5017 OF 5824

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

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NAME OF COMMITTEE (In Full)

**DNC Services Corp./Dem. Nat'l Committee**

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

**A. Vane, Dennis, , ,**

Mailing Address 1340 Polly Point Rd

City

Wadmalaw Island

State

SC

Zip Code

29487-7098

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information Requested

Receipt For: 2019

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

07 / 31 / 2019

**Transaction ID : 33671759**

Amount of Each Receipt this Period

500.00

☐ 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

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For: 2019

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1231147.29

Date of Receipt

07 / 30 / 2019

**Transaction ID : 33671759E**

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**C. Vangilder, John, , ,**

Mailing Address 135 E Willow Dr

City

Zanesville

State

OH

Zip Code

43701-1248

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Physician

Receipt For: 2019

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

07 / 08 / 2019

**Transaction ID : 33592773**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1000.00