

# **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)

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

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

## **A. 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 ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1213846.09

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2019

**Transaction ID : 33984810E**

Amount of Each Receipt this Period

515.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

## **B. Harris, Richard, , ,**

Mailing Address 201 Alexander Dr

City  
Lebanon

State  
TN

Zip Code  
37087-5508

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 ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 26 / 2019

**Transaction ID : 33960588**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

## **C. Harris, Ronald M, , ,**

Mailing Address 1406 Dunning Dr

City  
Laguna Beach

State  
CA

Zip Code  
92651-2825

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
University of California

Occupation (for Individual)  
physician/professor

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 20 / 2019

**Transaction ID : 33937374**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

75.00