

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 876 OF 10951

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DNC Services Corp / Democratic National Committee

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

A. Christopher, Samuel, , ,

Mailing Address 92 Howard Ct

City
FrederickState
MDZip Code
21702-6103FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2020

Transaction ID : 34959533

Amount of Each Receipt this Period

100.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. ActBlue

Mailing Address PO Box 441146

City

West Somerville

State

MA

Zip Code

02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)
Conduit total listed in Agg. field

Receipt For: 2020

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6734189.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2020

Transaction ID : 34959533E

Amount of Each Receipt this Period

100.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Cohen, Anne Parker, H, ,

Mailing Address 52 Bailey Dr

City

Wshngtn Xing

State

PA

Zip Code

18977-1010

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Shir Ami Early Learning CenterOccupation (for Individual)
Preschool Music Teacher

Receipt For: 2020

☐ Primary ☒ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		12		2020

Transaction ID : 34959540

Amount of Each Receipt this Period

10.00

☐ Memo Item

* Earmarked Contribution: See Below

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

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

110.00