

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

FOR LINE NUMBER: PAGE 6898 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. Swystun, Madeline, , ,

Mailing Address 202 Boxwood Dr

City
FranklinState
TNZip Code
37069-6913FEC 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 ▼

212.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		26		2020

Transaction ID : 35129376

Amount of Each Receipt this Period

25.00

☐ 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		23		2020

Transaction ID : 35129376E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Tait, John, I, ,Mailing Address 1701 SW Capri St
Apt 245

City

Palm City

State

FL

Zip Code

34990-4540

FEC ID number of contributing
federal political committee.

C

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

Receipt For: 2020

☐ Primary ☒ General
☐ Other (specify)

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		23		2020

Transaction ID : 35131774

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

125.00

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