

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 65

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Democracy Summer Leadership PAC**

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

**A. Harkins, Katherine, , ,**

Mailing Address 1233 21st Ave E

City  
Seattle

State  
WA

Zip Code  
98112-3532

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-employed

Occupation (for Individual)

Reproductive Health Advocate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

06 / 17 / 2018

Transaction ID : VPFFRP1RT72

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* Earmarked Contribution through ACTBLUE on 06/17/2018

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

**B. Harris, David, , ,**

Mailing Address 25 Central Park W  
Apt 5Q

City

New York

State  
NY

Zip Code  
10023-7210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

06 / 12 / 2018

Transaction ID : VPFFRNYDXJ4

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

**C. Harris, William, , ,**

Mailing Address 25 Central Park W  
Apt 5Q

City

New York

State  
NY

Zip Code  
10023-7210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

06 / 12 / 2018

Transaction ID : VPFFRNYDXC6

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

6000.00