

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)

DCCC

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

A. AHMED, SABIHA, , ,

Mailing Address 838 KIEHL DR

City
LEMOYNE

State
PA

Zip Code
17043-1205

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

02 / **29** / **2020**

Transaction ID : 28797331

Amount of Each Receipt this Period

250.00

☐ Memo Item

* EARMARKED CONTRIBUTION THROUGH
ACTBLUE PAC ON 02/29/2020

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

B. AHRENS, WILLIAM, , ,

Mailing Address 16215 13TH AVE SW

City
BURIEN

State
WA

Zip Code
98166-2813

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / **16** / **2020**

Transaction ID : 28691807

Amount of Each Receipt this Period

100.00

☐ Memo Item

* EARMARKED CONTRIBUTION THROUGH
ACTBLUE PAC ON 02/16/2020

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

C. AIKEN, CHARLES, H., ,

Mailing Address PO BOX 99

City
CLEVELAND

State
GA

Zip Code
30528-0002

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/A

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / **29** / **2020**

Transaction ID : 28797459

Amount of Each Receipt this Period

100.00

☐ Memo Item

* EARMARKED CONTRIBUTION THROUGH
ACTBLUE PAC ON 02/29/2020

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

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

450.00