

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

FOR LINE NUMBER: PAGE 1725 OF 6380

(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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DCCC**

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

**A. GUTHEIL, THOMAS, , ,**

Mailing Address 6 WELLMAN ST

City  
BROOKLINEState  
MAZip Code  
02446-2831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1580.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	12	/	2020

**Transaction ID : 28729344**

Amount of Each Receipt this Period

50.00

☐ Memo Item\* EARMARKED CONTRIBUTION THROUGH  
ACTBLUE PAC ON 02/12/2020

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

**B. GUTHEIL, THOMAS, , ,**

Mailing Address 6 WELLMAN ST

City  
BROOKLINEState  
MAZip Code  
02446-2831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1580.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	12	/	2020

**Transaction ID : 28729345**

Amount of Each Receipt this Period

75.00

☐ Memo Item\* EARMARKED CONTRIBUTION THROUGH  
ACTBLUE PAC ON 02/12/2020

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

**C. GUTHEIL, THOMAS, , ,**

Mailing Address 6 WELLMAN ST

City  
BROOKLINEState  
MAZip Code  
02446-2831FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYEDOccupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1605.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	13	/	2020

**Transaction ID : 28681668**

Amount of Each Receipt this Period

25.00

☐ Memo Item\* EARMARKED CONTRIBUTION THROUGH  
ACTBLUE PAC ON 02/13/2020**SUBTOTAL** of Receipts This Page (optional)..... ►

150.00

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