

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

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

FOR LINE NUMBER: PAGE 3677 OF 6380

(check only one)

☒ 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. ROSE, FRED, , ,

Mailing Address 3230 SUNNYBROOK DR

City
CHARLOTTE

State
NC

Zip Code
28210-3229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MEADOWLAKE PRESBYTERIAN CHURCH

Occupation (for Individual)
PASTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

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

Transaction ID : 28841046

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

B. ROSE, FRED, , ,

Mailing Address 3230 SUNNYBROOK DR

City
CHARLOTTE

State
NC

Zip Code
28210-3229

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MEADOWLAKE PRESBYTERIAN CHURCH

Occupation (for Individual)
PASTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

254.00

Date of Receipt

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

Transaction ID : 28841060

Amount of Each Receipt this Period

1.00

☐ Memo Item

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

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

C. ROSE, GAYLE, K, ,

Mailing Address 311 SUNSET DR

City
SALINA

State
KS

Zip Code
67401-5438

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SALINA REGIONAL HEALTH CTR

Occupation (for Individual)
VOLUNTEER DIRECTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

450.00

Date of Receipt

02 / **18** / **2020**

Transaction ID : 28767068

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

52.00