

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6098 OF 135722

(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. BARKER, CHERYL, , ,

Mailing Address 435 WOODLAWN CIR

City
BEREAState
OHZip Code
44017-1231FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NEUNDORFER, INCOccupation (for Individual)
LEADERSHIP CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2018

Transaction ID : VT4C310BZ407

Amount of Each Receipt this Period

25.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW
EARMARKED THROUGH ACTBLUE

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

B. ACTBLUE PAC

Mailing Address 366 SUMMER ST

City

SOMERVILLE

State

MA

Zip Code

02144-3132

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)
CONDUIT TOTAL LISTED IN AGG. FII

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13923367.02

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 18 / 2018

Transaction ID : VT4C310BZ407E

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. BARKER, DAVID, E, ,

Mailing Address 1910 N MILLER RD

City

SAGINAW

State

MI

Zip Code

48609-9218

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
N/AOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2018

Transaction ID : VT4C3106H394

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

75.00

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