

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)

PAGE 3019 OF 8278

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

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NAME OF COMMITTEE (In Full)
DSCC

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

A. GOLDSMITH, R JEFFREY

Mailing Address 521 MILTON ST

City
CINCINNATI

State
OH

Zip Code
45202-6824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPT OF VETERANS AFFAIRS

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1330.00

Date of Receipt

MM / DD / YYYY
08 / 13 / 2017

Transaction ID : VN874DYGZ19

Amount of Each Receipt this Period

150.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

B. ACTBLUE PAC

Mailing Address PO BOX 441146

City
WEST SOMERVILLE

State
MA

Zip Code
02144-0031

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1208631.36

Date of Receipt

MM / DD / YYYY
08 / 15 / 2017

Transaction ID : VN874DYGZ19E

Amount of Each Receipt this Period

150.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

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

C. GOLDSMITH, R JEFFREY, , ,

Mailing Address 521 MILTON ST

City
CINCINNATI

State
OH

Zip Code
45202-6824

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DEPT OF VETERANS AFFAIRS

Occupation (for Individual)
PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1330.00

Date of Receipt

MM / DD / YYYY
08 / 22 / 2017

Transaction ID : VN874DZ22K4

Amount of Each Receipt this Period

10.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

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

160.00