

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6132 OF 8278
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
DSCC

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1208631.36

Date of Receipt

MM / DD / YYYY
08 / 08 / 2017

Transaction ID : VN874DY2GA1E

Amount of Each Receipt this Period

100.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
ROPER, GARDENIA, , ,

Mailing Address 5 FDR WALK

City CINCINNATI State OH Zip Code 45218-1500

FEC ID number of contributing federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2520.00

Date of Receipt

MM / DD / YYYY
08 / 08 / 2017

Transaction ID : VN874DY9S12

Amount of Each Receipt this Period

15.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1208631.36

Date of Receipt

MM / DD / YYYY
08 / 10 / 2017

Transaction ID : VN874DY9S12E

Amount of Each Receipt this Period

15.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.

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

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

15.00