

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

FOR LINE NUMBER: PAGE 6737 OF 11721

(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			

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NAME OF COMMITTEE (In Full)

DCCC

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

A. MURNAGHAN, GEORGE, , ,

Mailing Address 34 WACHUSETT DR

City
LEXINGTONState
MAZip Code
02421-6913FEC ID number of contributing
federal political committee.

C

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

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		19		2020

Transaction ID : 29285984

Amount of Each Receipt this Period

250.00

☐ Memo Item* EARMARKED CONTRIBUTION THROUGH
ACTBLUE PAC ON 04/19/2020

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

B. MURPHY, BRIAN, , ,

Mailing Address 4729 TIPTON DR

City
TROYState
MIZip Code
48098-4466FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HENRY FORD HEALTH SYSTEMOccupation (for Individual)
INFORMATION TECHNOLOGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		29		2020

Transaction ID : 29408393

Amount of Each Receipt this Period

200.00

☐ Memo Item* EARMARKED CONTRIBUTION THROUGH
ACTBLUE PAC ON 04/29/2020

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

C. MURPHY, CAROLE, L, ,

Mailing Address 9137 HAAS DR

City
PORT RICHEYState
FLZip Code
34669-1849FEC 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 ▼

865.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2020

Transaction ID : 29306728

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional).....▶

485.00

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