

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

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

FOR LINE NUMBER: PAGE 16 OF 374

(check only one)

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

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NAME OF COMMITTEE (In Full)

New Democrat Coalition Action Fund

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

A. French, James, A., ,

Mailing Address 7508 Glendale Rd.

City
Chevy Chase

State
MD

Zip Code
20815

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Thorsen French Advocacy

Occupation (for Individual)
Principal

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2019

Transaction ID : C11453389

Amount of Each Receipt this Period

500.00

☒ Memo Item

Earmarked for Brindisi For Congress

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

B. Frillman, Louis, , ,

Mailing Address 1661 Harbor Ave SW

City
Seattle

State
WA

Zip Code
98126

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Marquette Advisors

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
07 / 25 / 2019

Transaction ID : C11451596A

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

C. ActBlue

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. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

25264.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 01 / 2019

Transaction ID : C11451596AB

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

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

500.00