

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

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

FOR LINE NUMBER: PAGE 9 OF 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Kentucky State Democratic Central Executive Committee

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

A. Allen, Melvin, , ,

Mailing Address 571 Pearman Ave

City  
RadcliffState  
KYZip Code  
40160-1832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 22 / 2019

Transaction ID : VVBFTQ32XW8

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Andrews, Dianne, E., ,

Mailing Address 1211 Anderson City Rd

City

Lawrenceburg

State

KY

Zip Code

40342-9569

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Kaco

Occupation (for Individual)

Legislative Assistant

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  
10 / 15 / 2019

Transaction ID : VVBFTQ17WF9

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

C. Aprile, Frances, , ,

Mailing Address 15404 Taylorsville Rd  
15404 Taylorsville Rd.

City

Fisherville

State

KY

Zip Code

40023-8753

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Littledove Farm

Occupation (for Individual)

Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5050.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 29 / 2019

Transaction ID : VVBFTQ6KKG2

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

350.00

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