

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

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

FOR LINE NUMBER: PAGE 28 OF 82

(check only one)

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

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NAME OF COMMITTEE (In Full)

Montana Democratic Party

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

**A. 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  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

6837.31

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 16 / 2019

Transaction ID : VR0THMKHCQ9E

Amount of Each Receipt this Period

500.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

**B. Morrison, Sean, , ,**Mailing Address 2480 16Th St NW  
Apt 713

City

Washington

State

DC

Zip Code

20009-6745

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Student

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2019

Transaction ID : VR0THMKFSD3

Amount of Each Receipt this Period

420.00

☐ Memo Item

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

**C. Novak, Margaret, M., ,**

Mailing Address 242 West Harrison

City

Chester

State

MT

Zip Code

59522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SelfOccupation (for Individual)  
Business Owner

Receipt For:

☐ Primary  
☐ Other (specify)
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2019

Transaction ID : VR0THMKFRX7

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

920.00

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