

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

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

FOR LINE NUMBER: PAGE 6026 OF 6430

(check only one)

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

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NAME OF COMMITTEE (In Full)

DSCC

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

A. ZALLEN, MARGOT, , ,

Mailing Address PO BOX 18289

City
GOLDEN

State
CO

Zip Code
80402-6038

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 27 / 2019

Transaction ID : VN874FK4078

Amount of Each Receipt this Period

50.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

B. 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. FII

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1474445.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 28 / 2019

Transaction ID : VN874FK4078E

Amount of Each Receipt this Period

50.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.

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

C. ZANDER, KAREN, , ,

Mailing Address 65 STONY BRAE RD

City

NEWTON HIGHLANDS

State

MA

Zip Code

02461-1728

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CENTE FOR CASE MAAGEENT INC.

Occupation (for Individual)

RN CONSULANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 22 / 2019

Transaction ID : VN874FJS0M6

Amount of Each Receipt this Period

50.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

100.00

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