

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1392 OF 4871	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
DSCC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. DEVLIN, ROSEMARY, , ,		Date of Receipt MM / DD / YYYY 04 / 14 / 2017
Mailing Address 18 DAWN CRES		Transaction ID : VN874DN4707
City CENTRAL ISLIP	State NY	Zip Code 11722-4906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual) NONE	Occupation (for Individual) NOT EMPLOYED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 380.00	* EARMARKED CONTRIBUTION: SEE BELOW

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ACTBLUE PAC		Date of Receipt MM / DD / YYYY 04 / 18 / 2017
Mailing Address PO BOX 441146		Transaction ID : VN874DN4707E
City WEST SOMERVILLE	State MA	Zip Code 02144-0031
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 5.00
Name of Employer (for Individual)	Occupation (for Individual) CONDUIT TOTAL LISTED IN AGG. FII	<input checked="" type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 996612.14	NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. DEVLIN, ROSEMARY, , ,		Date of Receipt MM / DD / YYYY 04 / 24 / 2017
Mailing Address 18 DAWN CRES		Transaction ID : VN874DNHHX1
City CENTRAL ISLIP	State NY	Zip Code 11722-4906
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer (for Individual) NONE	Occupation (for Individual) NOT EMPLOYED	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 380.00	* EARMARKED CONTRIBUTION: SEE BELOW

SUBTOTAL of Receipts This Page (optional).....	15.00
TOTAL This Period (last page this line number only)....	

201705190200151046