

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)

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☒ 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. 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. FIE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

996612.14

Date of Receipt

MM / DD / YYYY
04 / 25 / 2017

Transaction ID : VN874DNHHX1E

Amount of Each Receipt this Period

10.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

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

B. DEVLIN, ROSEMARY, . .

Mailing Address 18 DAWN CRES

City
CENTRAL ISLIP

State
NY

Zip Code
11722-4906

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 ▼

380.00

Date of Receipt

MM / DD / YYYY
04 / 24 / 2017

Transaction ID : VN874DNHS74

Amount of Each Receipt this Period

25.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

C. 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. FIE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

996612.14

Date of Receipt

MM / DD / YYYY
04 / 25 / 2017

Transaction ID : VN874DNHS74E

Amount of Each Receipt this Period

25.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

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

25.00

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