

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

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

FOR LINE NUMBER: PAGE 2057 OF 8568

(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. DACEY, SARA, , ,**

Mailing Address 5008 IVANHOE PL NE

City  
SEATTLE

State  
WA

Zip Code  
98105-2833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GROUP HEALTH COOPERATIVE

Occupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

**07** / **24** / **2019**

**Transaction ID : VN874FRK257**

Amount of Each Receipt this Period

5.00

☐ 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 ▼

1743182.38

Date of Receipt

**07** / **25** / **2019**

**Transaction ID : VN874FRK257E**

Amount of Each Receipt this Period

5.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED  
THROUGH THIS ORGANIZATION.

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

**C. DACEY, SARA, , ,**

Mailing Address 5008 IVANHOE PL NE

City

SEATTLE

State

WA

Zip Code

98105-2833

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
GROUP HEALTH COOPERATIVE

Occupation (for Individual)  
MD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

280.00

Date of Receipt

**07** / **30** / **2019**

**Transaction ID : VN874FSF9A2**

Amount of Each Receipt this Period

10.00

☐ Memo Item

\* EARMARKED CONTRIBUTION: SEE BELOW

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

15.00