

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

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

FOR LINE NUMBER: PAGE 2458 OF 3609

(check only one)

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

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NAME OF COMMITTEE (In Full)

National Democratic Training Committee PAC

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 ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

864202.47

Date of Receipt

02 / **18** / **2020**

Transaction ID : VSGVDK64X39E

Amount of Each Receipt this Period

12.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

B. Phillips, Todd S, ,

Mailing Address PO Box 1414

City
Middleburg

State
VA

Zip Code
20118-1414

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Perkins Eastman

Occupation (for Individual)
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.50

Date of Receipt

02 / **18** / **2020**

Transaction ID : VSGVDK650H6

Amount of Each Receipt this Period

- 15.00

☐ Memo Item

Insufficient Funds

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

C. Phillips, Todd S, ,

Mailing Address PO Box 1414

City
Middleburg

State
VA

Zip Code
20118-1414

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Perkins Eastman

Occupation (for Individual)
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

478.50

Date of Receipt

02 / **18** / **2020**

Transaction ID : VSGVDK650W1

Amount of Each Receipt this Period

- 6.00

☐ Memo Item

Insufficient Funds

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

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

- 21.00