

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

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

FOR LINE NUMBER: PAGE 1544 OF 10436

(check only one)

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

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NAME OF COMMITTEE (In Full)

House Majority PAC

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

A. Young, Adrienne, Adrienne, ,

Mailing Address 465 Leet Rd

City
SewickleyState
PAZip Code
15143-1019FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SelfOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 26 / 2017

Transaction ID : VN8FNG2W7F1

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

B. ACTBLUE

Mailing Address PO Box 382110

City
CambridgeState
MAZip Code
02238-2110FEC 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 ▼

1138208.74

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 28 / 2017

Transaction ID : VN8FNG2W7F1E

Amount of Each Receipt this Period

25.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Black, Perry, , ,

Mailing Address 22 Summit St

City
PhiladelphiaState
PAZip Code
19118-2833FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Drexel University College of MedicineOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

6500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
08 / 27 / 2017

Transaction ID : VN8FNG2WCF1

Amount of Each Receipt this Period

500.00

☐ Memo Item

* Earmarked Contribution: See Below

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

525.00

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