

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2011 OF 7732

(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. 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 ▼

563.00

Date of Receipt

06 / 14 / 2017

Transaction ID : VN874DSVJ92

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 ▼

1190000.42

Date of Receipt

06 / 15 / 2017

Transaction ID : VN874DSVJ92E

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. 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 ▼

563.00

Date of Receipt

06 / 24 / 2017

Transaction ID : VN874DTAZA6

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