

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)

Connecticut Democratic State Central Committee

Full Name (Last, First, Middle Initial)

A. David B Krauss

Mailing Address 4 Nursery Lane

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 20 / 2013

Transaction ID : C20309341

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. David B Krauss

Mailing Address 4 Nursery Lane

City

Westport

State

CT

Zip Code

06880

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Attorney

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

710.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 21 / 2013

Transaction ID : C20309540

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

C. Conrad J Kronholm Jr.

Mailing Address 101 Lyme St

City

Old Lyme

State

CT

Zip Code

06371-1463

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Insurance Agent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 18 / 2013

Transaction ID : C20307699

Amount of Each Receipt this Period

1500.00

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

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

2200.00