

# **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)

PAGE 4600 OF 8028

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**DCCC**

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

**A. NORMAN, EARL, M, ,**

Mailing Address 5879 BLUE JAY DR

City  
KALAMAZOO

State  
MI

Zip Code  
49009-0800

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WMED

Occupation (for Individual)  
SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 28 / 2019

**Transaction ID : VT4C3113YW17**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. NORMAN, JOHN, , ,**

Mailing Address 3337 NW 170TH CT

City  
EDMOND

State  
OK

Zip Code  
73012-8421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2019

**Transaction ID : VT4C310ZSDE1**

Amount of Each Receipt this Period

250.00

☐ Memo Item

\* EARMARKED CONTRIBUTION: SEE BELOW  
EARMARKED THROUGH ACTBLUE

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

**C. ACTBLUE PAC**

Mailing Address 366 SUMMER ST

City  
SOMERVILLE

State  
MA

Zip Code  
02144-3132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
CONDUIT TOTAL LISTED IN AGG. FIE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3072725.97

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 18 / 2019

**Transaction ID : VT4C310ZSDE1E**

Amount of Each Receipt this Period

250.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED  
THROUGH THIS ORGANIZATION.

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

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

500.00