

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

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

FOR LINE NUMBER: PAGE 4354 OF 13528

(check only one)

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

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NAME OF COMMITTEE (In Full)

**DCCC**

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

## **A. 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 ▼

3381628.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 04 / 2019

**Transaction ID : VT4C3113HVX4E**

Amount of Each Receipt this Period

50.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED  
THROUGH THIS ORGANIZATION.

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

## **B. GUTHEIL, THOMAS, , ,**

Mailing Address 6 WELLMAN ST

City  
BROOKLINE

State  
MA

Zip Code  
02446-2831

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF-EMPLOYED

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2019

**Transaction ID : VT4C31147PH2**

Amount of Each Receipt this Period

75.00

☐ 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 ▼

3381628.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 06 / 2019

**Transaction ID : VT4C31147PH2E**

Amount of Each Receipt this Period

75.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED  
THROUGH THIS ORGANIZATION.

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

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

75.00