

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 2443 OF 9723

☒ 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 ▼

724.00

Date of Receipt

MM / DD / YYYY
09 / 01 / 2017

Transaction ID : VN874E0DQ22

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 ▼

1409887.61

Date of Receipt

MM / DD / YYYY
09 / 05 / 2017

Transaction ID : VN874E0DQ22E

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 ▼

729.00

Date of Receipt

MM / DD / YYYY
09 / 09 / 2017

Transaction ID : VN874E0KX14

Amount of Each Receipt this Period

5.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

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

10.00