

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

ActBlue

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

**A. SAMPLES, ANTHONY, , ,**

Mailing Address 8905 LAIT DRIVE

City  
EL PASOState  
TXZip Code  
79925FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DNV GLOccupation (for Individual)  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
05		31		2017

Transaction ID : SA11AI\_82855374

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 Earmark

Earmarked for BETO FOR TEXAS ()

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

**B. SAMPLES, BENJAMIN, , ,**

Mailing Address 338 HIGHLAND AVE

City  
DOWNTOWNState  
PAZip Code  
19335FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RUBY TUESDAYOccupation (for Individual)  
KITCHEN MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
05		28		2017

Transaction ID : SA11AI\_82501150

Amount of Each Receipt this Period

5.00

☐ Memo Item  
 Earmark

Earmarked for COMMITTEE TO ELECT ALAN GRAYSON (C00424713)

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

**C. SAMPLES, CATHRYN, , ,**

Mailing Address 37 SLOCUM ROAD

City  
JAMAICA PLAINState  
MAZip Code  
02130FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOSTON CHILDREN'S HOSPITALOccupation (for Individual)  
PEDIATRICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

94.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y
05		13		2017

Transaction ID : SA11AI\_81109317

Amount of Each Receipt this Period

25.00

☐ Memo Item  
 Earmark

Earmarked for DCCC (C00000935)

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

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

530.00