

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

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

FOR LINE NUMBER: PAGE 168 OF 3678

(check only one)

☒ 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. BARTSCH, THOMAS, , ,

Mailing Address 73340 CRESCENT RD

City

SAINT CLAIRSVILLE

State

OH

Zip Code

43950-9397

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

UNEMPLOYED

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2019

Transaction ID : VT4C310V51F6

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

B. 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. FII

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3740006.67

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 30 / 2019

Transaction ID : VT4C310V51F6E

Amount of Each Receipt this Period

75.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED  
THROUGH THIS ORGANIZATION.

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

C. BARUS, MAXWELL, , ,

Mailing Address 360 NORTH RD

City

LEEDS

State

ME

Zip Code

04263-3211

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

RUSSELL MEDICAL CENTER

Occupation (for Individual)

PHYSICIAN

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

438.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
01 / 06 / 2019

Transaction ID : VT4C310N3S19

Amount of Each Receipt this Period

188.00

☐ Memo Item

\* EARMARKED CONTRIBUTION: SEE BELOW  
EARMARKED THROUGH ACTBLUE

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

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

263.00