

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)

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

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NAME OF COMMITTEE (In Full)
DSCC

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

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼
1091299.43

Date of Receipt

MM / DD / YYYY
05 / 23 / 2017

Transaction ID : VN874DR4KB5E

Amount of Each Receipt this Period

40.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
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) Occupation (for Individual)
NONE NOT EMPLOYED

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼
488.00

Date of Receipt

MM / DD / YYYY
05 / 01 / 2017

Transaction ID : VN874DP9J60

Amount of Each Receipt this Period

5.00

☐ Memo Item

* EARMARKED CONTRIBUTION: SEE BELOW

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

Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼ Aggregate Year-to-Date ▼
1091299.43

Date of Receipt

MM / DD / YYYY
05 / 02 / 2017

Transaction ID : VN874DP9J60E

Amount of Each Receipt this Period

5.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED
THROUGH THIS ORGANIZATION.

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

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

5.00

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