

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 553

(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)

Democracy for America

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

A. Francik, Ellen, , ,

Mailing Address 471 Viking Dr

City

Pleasant Hill

State

CA

Zip Code

94523-1810

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Human Factors International

Occupation (for Individual)

Consultant

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2019

Transaction ID : VNW03H6YTG3

Amount of Each Receipt this Period

250.00

☐ Memo Item

* Earmarked Contribution: See Below

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

B. Act Blue

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

80550.14

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2019

Transaction ID : VNW03H6YTG3E

Amount of Each Receipt this Period

250.00

☒ Memo Item

Note: Above Contribution earmarked through this organization.

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

C. Franz, Julia, , ,

Mailing Address 440 20th St

City

Santa Monica

State

CA

Zip Code

90402-2434

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

TV Producer

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
12 / 14 / 2019

Transaction ID : VNW03H5V8Y0

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Earmarked Contribution: See Below

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

300.00

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