

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8709 OF 10229

(check only one)

☒ 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. SULLIVAN, BARBARA, ,			Date of Receipt MM / DD / YYYY 07 / 29 / 2018	
Mailing Address 6170 PALMERO CIR			Transaction ID : VN874ESC2Q6	
City CAMERON PARK	State CA	Zip Code 95682-7437	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer (for Individual) NONE		Occupation (for Individual) NOT EMPLOYED		* EARMARKED CONTRIBUTION: SEE BELOW
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 840.00		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. ACTBLUE PAC			Date of Receipt MM / DD / YYYY 07 / 31 / 2018	
Mailing Address PO BOX 441146			Transaction ID : VN874ESC2Q6E	
City WEST SOMERVILLE	State MA	Zip Code 02144-0031	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C C00401224		Memo Item <input checked="" type="checkbox"/>		
Name of Employer (for Individual)		Occupation (for Individual) CONDUIT TOTAL LISTED IN AGG. FI		NOTE: ABOVE CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1997345.62		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. SULLIVAN, BARBARA, ,			Date of Receipt MM / DD / YYYY 07 / 31 / 2018	
Mailing Address 6170 PALMERO CIR			Transaction ID : VN874ESMVN6	
City CAMERON PARK	State CA	Zip Code 95682-7437	Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer (for Individual) NONE		Occupation (for Individual) NOT EMPLOYED		* EARMARKED CONTRIBUTION: SEE BELOW
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 840.00		

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

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

195.00

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