

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 OF 572
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
California Democratic Party

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Chiu, Peter, , ,		Date of Receipt
Mailing Address 58 Morton Way		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2020"/>
City Palo Alto	State CA	Zip Code 94303
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA462225
Name of Employer (for Individual) None		Amount of Each Receipt this Period <input type="text" value="60.00"/>
Occupation (for Individual) Retired		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1750.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Clegg, Sean, , ,		Date of Receipt
Mailing Address 826 Oxford St		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2020"/>
City Berkeley	State CA	Zip Code 94707
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA462795
Name of Employer (for Individual) SCRB Strategies		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual) Partner		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Cohen, Nancy, , ,		Date of Receipt
Mailing Address 1155 S Grand Ave Apt 1409		<input type="text" value="11"/> / <input type="text" value="11"/> / <input type="text" value="2020"/>
City Los Angeles	State CA	Zip Code 90015
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : INCA464216
Name of Employer (for Individual) Nancy Cohen		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
Occupation (for Individual) Writer		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="10060.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>