

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33157 OF 56295

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

DCCC

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

A. MILLER, DIANE, , ,

Mailing Address 69 BROMFIELD RD

City  
SOMERVILLEState  
MAZip Code  
02144-1311FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MILLER FINANCIAL PLANNINGOccupation (for Individual)  
CERT FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

691.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2018

Transaction ID : VT4C3ZRV741

Amount of Each Receipt this Period

100.00

☐ 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  
SOMERVILLEState  
MAZip Code  
02144-3132FEC 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 ▼

7708625.60

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		15		2018

Transaction ID : VT4C3ZRV741E

Amount of Each Receipt this Period

100.00

☒ Memo Item

NOTE: ABOVE CONTRIBUTION EARMARKED  
THROUGH THIS ORGANIZATION.

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

C. MILLER, DONALD, , ,

Mailing Address 1952 WILD OAK LN

City  
CHICOState  
CAZip Code  
95928-4000FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CSU CHICOOccupation (for Individual)  
EDUCATOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2018

Transaction ID : VT4C3ZH1B99

Amount of Each Receipt this Period

15.00

☐ Memo Item

\* EARMARKED CONTRIBUTION: SEE BELOW  
EARMARKED THROUGH ACTBLUE

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

115.00

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