

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 127 OF 480

(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Party of Virginia

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

A. Papa, Joseph, , ,

Mailing Address 301 Granite Ave

City  
Richmond

State  
VA

Zip Code  
23226-2143

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Equality Virginia

Occupation (for Individual)  
Communications Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 24 / 2018

Transaction ID : VSGYHH4W8K8

Amount of Each Receipt this Period

70.00

☐ Memo Item

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

B. Paparatto, Gregory P, , ,

Mailing Address 175 Adams St

City  
Brooklyn

State  
NY

Zip Code  
11201-1850

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Animator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 18 / 2018

Transaction ID : VSGYHH4VWZ8

Amount of Each Receipt this Period

5000.00

☐ Memo Item

\* In-Kind: In-Kind Design Consulting

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

C. Park, Elaine, , ,

Mailing Address 463 W 43rd St  
Apt 5E

City  
New York

State  
NY

Zip Code  
10036-5300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Animator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2018

Transaction ID : VSGYHH73K83

Amount of Each Receipt this Period

1000.00

☐ Memo Item

\* In-Kind: In-Kind Design Consulting

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

6070.00

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