

FEC FORM 3L

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

**REPORT OF CONTRIBUTIONS BUNDLED BY LOBBYISTS/REGISTRANTS
AND LOBBYIST/REGISTRANT PACs**

11 AUG 19 PM 4:31

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

ADDRESS (number and street) 120 Maryland Ave. NE

Check if different than previously reported. (ACC)

Washington DC 20002

CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER** C00042366

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. STATE DC DISTRICT

5. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2) and/or Semi-annual Report

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE) and/or Semi-annual Report

July 31 Mid-Year Report (Non-election Year - PAC/Party) (MY) and/or Semi-annual Report

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) and/or Semi-annual Report Oct 20 (M10) Jan 31 (YE) and/or Semi-annual Report

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Run off (12R)

Special (12S) Convention (12C)

Election on in the State of

This report also covers the semi-annual period See Line 6(b)

(c) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on in the State of

This report also covers the semi-annual period See Line 6(b)

6. Covering Period(s)

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period 07 01 2011 through 07 31 2011 and/or

(b) Semi-annual Covered Period January 1 - June 30 July 1 - December 31

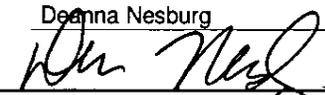
7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period 0.00

(b) Semi-annual Covered Period

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Deanna Nesburg

Signature of Treasurer  Date 08 19 2011

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only									
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