

# FEC FORM 3L

SECRETARY OF THE SENATE

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

12 MAY 18 PM 3:05

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

**DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE**

ADDRESS (number and street) 120 Maryland Ave. NE

Check if different than previously reported. (ACC)

Washington  20002

CITY STATE ZIP CODE

2. **FEC IDENTIFICATION NUMBER**

C C00042366

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

4. STATE DISTRICT

DC

For Candidates Only

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)  Runoff (12R)  Special (12S)  Convention (12C)

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

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

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

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

Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of

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

6. Covered Period(s)

(a) Quarterly/Monthly/Pre-/Post-Election Covered Period: This report covers M M M D D D / Y Y Y Y Y Y Y Y through M M M D D D / Y Y Y Y Y Y Y Y

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

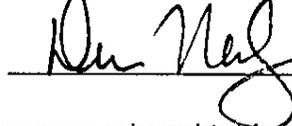
7. Total Reportable Bundled Contributions by Lobbyists/Registrants or Lobbyist/Registrant PACs

(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 M M M / D D D / Y Y Y Y Y Y Y Y

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

12020370001

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

**5-18-12**

HAND DELIVERED \_\_\_\_\_

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

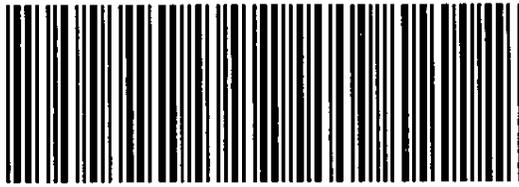
PREPARER

**DH**

DATE PREPARED

**5-18-12**

12020370002



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