

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 4131 / 11366  
(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)  
Democratic Congressional Campaign Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Gail Knight</p> <p>Mailing Address 886 N Cofco Center Ct. #1126</p> <p>City State Zip Code Phoenix AZ 85008</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation America's Charities Western Regional Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">860.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 15 / 2010</p> <p><b>Transaction ID:</b> C7237150</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Gail Knight</p> <p>Mailing Address 886 N Cofco Center Ct. #1126</p> <p>City State Zip Code Phoenix AZ 85008</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation America's Charities Western Regional Manager</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">860.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 24 / 2010</p> <p><b>Transaction ID:</b> C7242246</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">50.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Karl W. Knight</p> <p>Mailing Address 204 S 7th St.</p> <p>City State Zip Code Saint Peter MN 56082</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Gustavus Adolphus College Professor</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">650.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 17 / 2010</p> <p><b>Transaction ID:</b> C7239313</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">175.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>