

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 2902
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**DNC Services Corp./Dem. Nat'l Committee**

**A. Alec S Bash**  
Full Name (Last, First, Middle Initial)

Mailing Address 936 Church St

City San Francisco State CA Zip Code 94114-3029

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2015  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 03 / 2015**

**Transaction ID : C31441483**

Amount of Each Receipt this Period  
**100.00**

**B. Bruce W. Bastian**  
Full Name (Last, First, Middle Initial)

Mailing Address 1384 N. 450 E.

City Orem State UT Zip Code 84097-6238

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2015  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 06 / 2015**

**Transaction ID : C31447935**

Amount of Each Receipt this Period  
**1000.00**

**C. Herman Bastian**  
Full Name (Last, First, Middle Initial)

Mailing Address 4216 Bordeaux Drive

City Kenner State LA Zip Code 70065

FEC ID number of contributing federal political committee. **C**

Name of Employer Charitrs Insurance Compan Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 21 / 2015**

**Transaction ID : C31498282**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **1350.00**

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