

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

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

FOR LINE NUMBER: PAGE 838 / 1123

(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Senatorial Campaign Committee

Full Name (Last, First, Middle Initial) A. Ms Sharon Emek		Date of Receipt MM / DD / YYYY 06 / 30 / 2004
Mailing Address 44 Clifton Terrace		Transaction ID: 198EM0914-4
City Weehawken	State NJ	Zip Code 07086
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period 250.00
Name of Employer CBS Coverage Group	Occupation Insurance Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Aggregate Year-to-Date▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mr. Owen Tallman		Date of Receipt MM / DD / YYYY 06 / 30 / 2004
Mailing Address 852 Massachusetts Ave.		Transaction ID: 198TA6629-5
City Lunenburg	State MA	Zip Code 01482
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Software Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Aggregate Year-to-Date▼ 250.00	

Full Name (Last, First, Middle Initial) C. Ms. Catherine W. Herman		Date of Receipt MM / DD / YYYY 06 / 30 / 2004
Mailing Address 4900 Seminary Road		Transaction ID: 199HE3396-7
City Alexandria	State VA	Zip Code 22311
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period 400.00
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)▼	Aggregate Year-to-Date▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)	