

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

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

FOR LINE NUMBER: PAGE 9 OF 217

(check only one)

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

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NAME OF COMMITTEE (In Full)

Democratic Party of South Carolina

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Scott, Bernice, G., ,

Mailing Address 328 Willow Wind Road

City  
HopkinsState  
SCZip Code  
29061FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Austin &amp; Rogers PA

Occupation (for Individual)

Director of Community Relations and P

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : 11ai-000092625

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Baxter, Peggy, B., ,

Mailing Address 450 Mountain Creek Church Road

City  
GreenvilleState  
SCZip Code  
29609FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 09 / 2020

Transaction ID : 11ai-000092626

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harrison, Jaime, R., ,

Mailing Address 2 Governors HI

City  
ColumbiaState  
SCZip Code  
29201-2757FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Democratic National Committee

Occupation (for Individual)

Associate Chair

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : 11ai-000093211

Amount of Each Receipt this Period

125.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

875.00

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