

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

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

FOR LINE NUMBER: PAGE 635 / 1018

(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 |

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)
Democratic Senatorial Campaign Committee

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Nancy Aita | | Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2007 |
| Mailing Address 3626 Thorne Rd. | | Transaction ID: C4011656 |
| City Sebastopol | State CA | Zip Code 95472 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer Self-Employed | Occupation Employee Benefits Consultant | Aggregate Year-to-Date ▼ 400.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Hayward R. Alker, Jr. | | Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2007 |
| Mailing Address 1746 Sunset Ave | | Transaction ID: C4009851 |
| City Santa Monica | State CA | Zip Code 90405-5920 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 1000.00 | |
| Name of Employer University of Southern California | Occupation Professor | Aggregate Year-to-Date ▼ 1000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Jenny Ewing Allen | | Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2007 |
| Mailing Address PO Box 2006 | | Transaction ID: C4011719 |
| City Shepherdstown | State WV | Zip Code 25443 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 250.00 | |
| Name of Employer N/A | Occupation Non-Profit Development | Aggregate Year-to-Date ▼ 350.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1500.00 |
| TOTAL This Period (last page this line number only) | |

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