

# **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)

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

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NAME OF COMMITTEE (In Full)

**DNC Services Corp./Dem. Nat'l Committee**

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

**A. marsh, robert, , ,**

Mailing Address Po Box 702

City  
Capitola

State  
CA

Zip Code  
95010-0702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Sales rep

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 25 / 2018

**Transaction ID : C35555942**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

**B. Donnell, William, W, ,**

Mailing Address 101 W 79th St

City  
New York

State  
NY

Zip Code  
10024-6474

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
retired

Occupation (for Individual)  
retired

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 05 / 2018

**Transaction ID : C35475442**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**C. Sirois, Colette, , ,**

Mailing Address 3 Labonte Ave W

City  
Saco

State  
ME

Zip Code  
04072-2511

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DUNSTAN DENTAL CENTER

Occupation (for Individual)  
DENTIST

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 20 / 2018

**Transaction ID : C35529112**

Amount of Each Receipt this Period

45.00

☐ Memo Item

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

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

1070.00