

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 722 OF 11113

(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
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NAME OF COMMITTEE (In Full)

**DSCC**

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

**A. PERINI, VINCENT, W, ,**

Mailing Address 3526 WYCLIFF AVE

City  
DALLASState  
TXZip Code  
75219-2824FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NONEOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : VN874F07Q30**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. PERKINS, JAMES, , ,**

Mailing Address 6596 CHEROKEE TRL W

City

EDEN PRAIRIE

State

MN

Zip Code

55344-7817

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2018

**Transaction ID : VN874F094Q3**

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

**C. PERRIN, ANDREW, , ,**

Mailing Address 207 GLADE ST

City

CHAPEL HILL

State

NC

Zip Code

27516-4438

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNIVERSITY OF NORTH CAROLINAOccupation (for Individual)  
PROFESSOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2018

**Transaction ID : VN874F2E7X1**

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

800.00

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