

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

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

FOR LINE NUMBER: PAGE 125 OF 2658

(check only one)

☒ 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. Beaulieu, Andrew, J., ,

Mailing Address 13106 Lutes Dr

City  
Silver Spring

State  
MD

Zip Code  
20906-3230

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fda

Occupation (for Individual)  
Information Requested

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2019

Transaction ID : 33155762

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Beaulieu, Andrew, J., ,

Mailing Address 13106 Lutes Dr

City  
Silver Spring

State  
MD

Zip Code  
20906-3230

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Fda

Occupation (for Individual)  
Information Requested

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 07 / 2019

Transaction ID : 33203253

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Bechtel, David, , ,

Mailing Address 126 Carleton St

City  
Hamden

State  
CT

Zip Code  
06517-2702

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Cross Sector Consulting LLP

Occupation (for Individual)  
Consultant

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 05 / 2019

Transaction ID : 33186855

Amount of Each Receipt this Period

50.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

250.00