

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

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

FOR LINE NUMBER: PAGE 1651 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. Robinson, Barbara, S., ,

Mailing Address 2 Bratenahl Pl  
 Apt 15BC

City  
 Bratenahl

State  
 OH

Zip Code  
 44108-1172

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2019

Transaction ID : 33172612

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

B. Robinson, Barbara, S., ,

Mailing Address 2 Bratenahl Pl  
 Apt 15BC

City  
 Bratenahl

State  
 OH

Zip Code  
 44108-1172

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Retired

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2019

Transaction ID : 33145530

Amount of Each Receipt this Period

700.00

☐ Memo Item

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

C. Robinson, Dale, , ,

Mailing Address 1205 Georgetown Ave

City  
 San Leandro

State  
 CA

Zip Code  
 94579-1129

FEC ID number of contributing  
 federal political committee.

C

Name of Employer (for Individual)  
 Retired

Occupation (for Individual)  
 Teacher

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 03 / 15 / 2019

Transaction ID : 33205461

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

2900.00

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