

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

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

FOR LINE NUMBER: PAGE 1501 OF 2433

(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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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) <b>A. John E. Pepper Jr.</b>			Date of Receipt MM / DD / YYYY 12 / 20 / 2011		
Mailing Address 233 Oliver Rd			Transaction ID : C6307442		
City Cincinnati	State OH	Zip Code 45215-2638	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Disney		Occupation Board Member			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00			

Full Name (Last, First, Middle Initial) <b>B. Linda Pepper</b>			Date of Receipt MM / DD / YYYY 12 / 30 / 2011		
Mailing Address 7205 Brennon Ln			Transaction ID : C6324282		
City Chevy Chase	State MD	Zip Code 20815-4065	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C					
Name of Employer Self-Employed		Occupation Artist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) <b>C. Theckla D Perera</b>			Date of Receipt MM / DD / YYYY 12 / 20 / 2011		
Mailing Address 13447 Chrystal Ct			Transaction ID : C6313668		
City Fontana	State CA	Zip Code 92336-3417	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C					
Name of Employer City Of Hope Medical		Occupation Registered Nurse			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

SUBTOTAL of Receipts This Page (optional).....	2080.00
TOTAL This Period (last page this line number only).....	

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