

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

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

FOR LINE NUMBER: PAGE 1090 OF 2556

(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. Levine, Joel, D., ,**

Mailing Address 3896 S Magnolia Way

City  
Denver

State  
CO

Zip Code  
80237-1222

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Denver Health

Occupation (for Individual)  
Physician

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

775.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 12 / 2019

**Transaction ID : 33291536**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**B. Levine, Linda, R., ,**

Mailing Address 318 N Sunnyside Ave

City

South Bend

State

IN

Zip Code

46617-2435

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 ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 02 / 2019

**Transaction ID : 33235514**

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

**C. Levine, Richard, A., ,**

Mailing Address 90 8th Ave

City

Brooklyn

State

NY

Zip Code

11215-1553

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self

Occupation (for Individual)  
Psychologist

Receipt For: 2019

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2019

**Transaction ID : 33337014**

Amount of Each Receipt this Period

100.00

☐ Memo Item

\* Earmarked Contribution: See Below

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

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

600.00