

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 5682 / 24193
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
DNC Services Corp./Dem. Nat'l Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Victor Emanuel		Date of Receipt
	Mailing Address 2525 Wallingwood Suite 1003		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 5 / 2 0 1 0
	City	State	Zip Code
	austin	TX	78746
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C24812122
Name of Employer Nature Tours		Occupation Ceo	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Randy Embertson		Date of Receipt
	Mailing Address 720 Locust Corner Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 1 8 / 2 0 1 0
	City	State	Zip Code
	Cincinnati	OH	45245-3110
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C24837517
Name of Employer self		Occupation industrial design	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 275.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) LESTER EMBREE		Date of Receipt
	Mailing Address 102 Dixie Blvd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 8 / 2 0 1 0
	City	State	Zip Code
	Delray Beach	FL	33444
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> C25012944
Name of Employer Florida Atlantic University		Occupation Professor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 685.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 600.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>