

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6729 / 24193
	<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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NAME OF COMMITTEE (In Full)
DNC Services Corp./Dem. Nat'l Committee

A.	Full Name (Last, First, Middle Initial) Barbara Fukushima		Date of Receipt
	Mailing Address 1088 Bishop Street # 1117		<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 7 / 2 0 1 0
	City	State	Zip Code
	Honolulu	HI	96813
	FEC ID number of contributing federal political committee. C		Transaction ID: C24825877
Name of Employer Information Requested		Occupation Information Requested	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"/> 100.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) Mack Fulbright		Date of Receipt
	Mailing Address 4370 Thomas Gln		<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 1 / 2 0 1 0
	City	State	Zip Code
	Beaumont	TX	77706-7720
	FEC ID number of contributing federal political committee. C		Transaction ID: C24905438
Name of Employer Homemaker		Occupation Homemaker	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"/> 100.00
		<input type="text"/> 225.00	

C.	Full Name (Last, First, Middle Initial) Richard L Fulbright		Date of Receipt
	Mailing Address 4516 Mandrake Ct.		<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 7 / 2 0 1 0
	City	State	Zip Code
	Plano	TX	75093
	FEC ID number of contributing federal political committee. C		Transaction ID: C24994619
Name of Employer Self		Occupation Neuropsychologist	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"/> 20.00
		<input type="text"/> 243.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 220.00
TOTAL This Period (last page this line number only)	<input type="text"/>