

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

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

FOR LINE NUMBER: PAGE 3335 OF 7013

(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. Liguori, Chiara, , ,

Mailing Address 4439 Prestwick Xing

City
WestlakeState
OHZip Code
44145-5069FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Cleveland Clinic FoundationOccupation (for Individual)
Physician

Receipt For: 2019

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 19 / 2019

Transaction ID : 33933825

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. Likover, Rachel, , ,

Mailing Address 415 Gifford St

City
SpringfieldState
MAZip Code
01118-2418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ISO New England Inc.Occupation (for Individual)
market supervisor

Receipt For: 2019

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2019

Transaction ID : 33950460

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Likover, Rachel, , ,

Mailing Address 415 Gifford St

City
SpringfieldState
MAZip Code
01118-2418FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ISO New England Inc.Occupation (for Individual)
market supervisor

Receipt For: 2019

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2019

Transaction ID : 33987293

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1350.00