

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 OF 1401
(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)
DSCC

A. BAGLEY, ELIZABETH, F.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1539 29TH ST NW
City WASHINGTON State DC Zip Code 20007-3061
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) U.S. DEPARTMENT OF STATE Occupation (for Individual) SR ADV TO SECRETARY KERRY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 15000.00

Date of Receipt: 01 / 31 / 2017
Transaction ID: VN874DF5ZM2
Amount of Each Receipt this Period: 15000.00
 Memo Item

B. BAILEY, JOHN, P.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 110 MONETA OVERLOOK
City TROY State NY Zip Code 12182-3408
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 300.00

Date of Receipt: 01 / 24 / 2017
Transaction ID: VN874DEV1M9
Amount of Each Receipt this Period: 300.00
 Memo Item

C. BAIRD, CHERYL, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3923 OLIVER ST
City CHEVY CHASE State MD Zip Code 20815-3434
FEC ID number of contributing federal political committee. C
Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 500.00

Date of Receipt: 01 / 30 / 2017
Transaction ID: VN874DF56E2
Amount of Each Receipt this Period: 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional) 15800.00
TOTAL This Period (last page this line number only).....

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