

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

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

FOR LINE NUMBER: PAGE 103 OF 8434

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

**DNC Services Corp./Dem. Nat'l Committee**

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

**A. Karp, Brad, S, ,**

Mailing Address 115 Central Park W

City  
New York

State  
NY

Zip Code  
10023-4198

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Paul, Weiss

Occupation (for Individual)

Attorney

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 11 / 2018

**Transaction ID : C35938090**

Amount of Each Receipt this Period

15000.00

☐ Memo Item

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

**B. Rokeach, Fraide, , ,**

Mailing Address 44 Lisa Ct

City  
Lakewood

State  
NJ

Zip Code  
08701-1560

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information Requested

Occupation (for Individual)  
Information Requested

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 11 / 2018

**Transaction ID : C35938170**

Amount of Each Receipt this Period

5000.00

☐ Memo Item

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

**C. Maue, Carolyn, , ,**

Mailing Address 922 Lotus Vista Dr  
Apt 302

City  
Altamonte Springs

State  
FL

Zip Code  
32714-4828

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
The Maue Center

Occupation (for Individual)  
Business Owner

Receipt For: 2018

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 07 / 2018

**Transaction ID : C35905240**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

20100.00