

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

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

FOR LINE NUMBER: PAGE 228 OF 1403

(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. Berman, Frances, T., ,

Mailing Address 16716 Monte Hermoso Dr

City

Pacific Plsds

State

CA

Zip Code

90272-1908

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Homemaker

Occupation (for Individual)

Homemaker

Receipt For: 2019

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 14 / 2019

Transaction ID : C36434443

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

B. Graff, Kathleen, C., ,

Mailing Address PO Box 633

City

Waverly

State

PA

Zip Code

18471-0633

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Graff Consultants

Occupation (for Individual)

Consultant

Receipt For: 2019

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 04 / 2019

Transaction ID : C36406223

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Mamet, Noah, B., ,

Mailing Address 10866 Wilshire Blvd  
FI 10

City

Los Angeles

State

CA

Zip Code

90024-4300

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NMA Consulting Partners LLC

Occupation (for Individual)

Consultant

Receipt For: 2019

☐ Primary  
☐ Other (specify) ▼
☒ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2019

Transaction ID : C36477453

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1550.00

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