

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<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)

DSCC

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

A. GOFF, HARLEY, C, ,

Mailing Address 216 E Pleasant St

City
MankatoState
MNZip Code
56001-3826FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information RequestedOccupation (for Individual)
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M	D D	Y Y Y Y
08	21	2019

Transaction ID : VN874FT52N6

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. GOITEIN, BERNARD, J, ,

Mailing Address 1625 W Columbia Ter

City
PeoriaState
ILZip Code
61606-1004FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
bradley universityOccupation (for Individual)
professor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

427.86

Date of Receipt

M M	D D	Y Y Y Y
08	15	2019

Transaction ID : VN874FSZMV4

Amount of Each Receipt this Period

49.00

☐ Memo Item

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

C. GOKEL, RUTH, L, ,

Mailing Address 3539 Ottawa Ct

City
Las CrucesState
NMZip Code
88005-1154FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M	D D	Y Y Y Y
08	08	2019

Transaction ID : VN874FSTS87

Amount of Each Receipt this Period

400.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

549.00

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