

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

|   |   |                  |
|---|---|------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 575 OF 6665 |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 <input type="checkbox"/> 11c<br><input type="checkbox"/> 15 <input type="checkbox"/> 12<br><input type="checkbox"/> 16 <input type="checkbox"/> 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)  
**DSCC**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. JEFF A PRITCHARD</b>   |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 22 / 2015 |
| Mailing Address 508 BROWN ST SE   |   | Transaction ID : VN874C07J85                        |
| City<br>ORTING  | State<br>WA                                 | Zip Code<br>98360-9436                              |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>50.00 |   |
| Name of Employer<br>ST JOSEPH HOSPITAL  | Occupation<br>CURRIER                       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>302.16          |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. ROSEMARY PRITZKER</b>  |  | Date of Receipt<br>MM / DD / YYYY<br>09 / 30 / 2015 |
| Mailing Address 147 WAVERLY PL<br>APT 5W  |  | Transaction ID : VN874C1GR99                        |
| City<br>NEW YORK  | State<br>NY                                  | Zip Code<br>10014-3811                              |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>570.16 |   |
| Name of Employer<br>INFORMATION REQUESTED   | Occupation<br>INFORMATION REQUESTED          |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>570.16           |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. WILLIAM C PROBSTING</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>09 / 14 / 2015 |
| Mailing Address 209 HOWARD ST   |   | Transaction ID : VN874BZQ3E3                        |
| City<br>RIVERTON  | State<br>NJ                                 | Zip Code<br>08077-1235                              |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period<br>75.00 |   |
| Name of Employer<br>INFORMATION REQUESTED   | Occupation<br>INFORMATION REQUESTED         |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>375.00          |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....         | 695.16 |
| <b>TOTAL</b> This Period (last page this line number only)... |        |

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