

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 527 OF 8568  
(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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NAME OF COMMITTEE (In Full)

**DSCC**

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

**A. SHIVAPRASAD, HULLUKUNTE, SHIVAPRASAD, ,**

Mailing Address 1046 ENID DR

City

WHEELERSBURG

State

OH

Zip Code

45694-9370

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

KENTUCKY HEART INSTITUTE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	03	/	2019

**Transaction ID : VN874FPH3H3**

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

**B. SHOAFF, JOHN, H., ,**

Mailing Address 3604 S WASHINGTON RD

City

FORT WAYNE

State

IN

Zip Code

46802-4919

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHN H. SHOAFF AIA, ARCHITECT

Occupation (for Individual)

ARCHITECT

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	16	/	2019

**Transaction ID : VN874FPW238**

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

**C. SHREVE, GEORGINA, , ,**

Mailing Address 11855 ROCOSO RD

City

LAKESIDE

State

CA

Zip Code

92040-1035

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

NONE

Occupation (for Individual)

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07	/	26	/	2019

**Transaction ID : VN874FPZBD7**

Amount of Each Receipt this Period

150.00

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

800.00

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