

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

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

FOR LINE NUMBER: PAGE 58 OF 1642

(check only one)

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

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NAME OF COMMITTEE (In Full)

DSCC

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

A. HARNESS, JAY, K, , MD

Mailing Address PO BOX 5545

City

STATELINE

State

NV

Zip Code

89449-5545

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

MM / DD / YYYY  
01 / 31 / 2018

Transaction ID : VN874EBC576

Amount of Each Receipt this Period

334.00

☐ Memo Item

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

B. HARRIS, DAVID, B., ,

Mailing Address 32 W 88TH ST

City

NEW YORK

State

NY

Zip Code

10024-2502

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHILDREN'S RESEARCH & EDUCATION INSTIT

Occupation (for Individual)  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33900.00

Date of Receipt

MM / DD / YYYY  
01 / 10 / 2018

Transaction ID : VN874E9E8G0

Amount of Each Receipt this Period

33900.00

☐ Memo Item

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

C. HARRIS, WILLIAM, H., ,

Mailing Address 25 CENTRAL PARK W  
APT 5Q

City

NEW YORK

State

NY

Zip Code

10023-7210

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MASS HOSPITAL

Occupation (for Individual)  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

33900.00

Date of Receipt

MM / DD / YYYY  
01 / 10 / 2018

Transaction ID : VN874E9E8H7

Amount of Each Receipt this Period

33900.00

☐ Memo Item

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

68134.00

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