

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

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

FOR LINE NUMBER: PAGE 3003 OF 7144

(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. Chiriboga, Carlos, , ,

Mailing Address 630 S Royal St

City
Alexandria

State
VA

Zip Code
22314-4142

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MedstarHospital

Occupation (for Individual)
physician

Receipt For: 2017

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 11 / 2017

Transaction ID : C34665187

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Brooke-Davidson, Carrick, , ,

Mailing Address 8155 FM 3237

City
Driftwood

State
TX

Zip Code
78619-9417

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Guida Slavich Flores

Occupation (for Individual)
Attorney

Receipt For: 2017

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

647.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 15 / 2017

Transaction ID : C34689547

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Davis, William, , ,

Mailing Address 740 Gladstone Rd NW

City
Atlanta

State
GA

Zip Code
30318-1712

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Information Requested

Occupation (for Individual)
physician

Receipt For: 2017

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 02 / 2017

Transaction ID : C34643727

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

100.00

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