

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 2188 OF 10551

(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)

DNC Services Corp./Dem. Nat'l Committee

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

A. Denley, Walter, E, ,

Mailing Address 2546 Oakwood Trce SE

City
SmyrnaState
GAZip Code
30080-8291FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For: 2019

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	11	/	2019

Transaction ID : 34335730

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

B. Denlinger, Laura, , ,Mailing Address 6660 Rock Island Rd
Apt 404City
SpringfieldState
VAZip Code
22150-1984FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Battelle Memorial In

Occupation (for Individual)

Consultant Student

Receipt For: 2019

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	18	/	2019

Transaction ID : 34358676

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

C. Denman, Cathryn, E., ,

Mailing Address 500 Hutton St

City
Green RiverState
WYZip Code
82935-4966FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

OCI Wyoming LP

Occupation (for Individual)

RETIRED

Receipt For: 2019

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2019

Transaction ID : 34370515

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).....▶