

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 227
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Donovan for Congress

A. Full Name (Last, First, Middle Initial)
Bruce L. Poliquin

Mailing Address 123 Snow Pond Road

City State Zip Code
Oakland ME 04963-4732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Federal Government U.S. Congressman

Receipt For: 2015
 Primary General
 Other (specify) Special General

Election Cycle-to-Date
1000

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 19 / 2015

Transaction ID : A-CF275

Amount of Each Receipt this Period
1000

B. Full Name (Last, First, Middle Initial)
Frank Scafuri, III, DO PC

Mailing Address 682 Forest Avenue

City State Zip Code
Staten Island NY 10310-2507

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2015
 Primary General
 Other (specify) Special General

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2015

Transaction ID : A-CF333

Amount of Each Receipt this Period
500

See Memo: Verified Non-Corporate

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

C. Full Name (Last, First, Middle Initial)
Frank Scafuri III

Mailing Address 682 Forest Avenue

City State Zip Code
Staten Island NY 10310

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Frank Scafuri, III, DO PC Physician

Receipt For: 2015
 Primary General
 Other (specify) Special General

Election Cycle-to-Date
500

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 20 / 2015

Transaction ID : A-PIP2

Amount of Each Receipt this Period
500

See Memo: Verified Non-Corporate

[MEMO ITEM]
Partnership Itemization Memo

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

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

1500.00