

**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 9 OF 86	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Shelby for U.S. Senate

A. Full Name (Last, First, Middle Initial) Anne C. Canfield		Date of Receipt M M D D Y Y Y 03 18 2015
Mailing Address 823 Oronoco Street		Transaction ID : 50414.C20783
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Canfield & Associates		Receipt , , 1000.00
Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	Receipt , , 1000.00

B. Full Name (Last, First, Middle Initial) Anne C. Canfield		Date of Receipt M M D D Y Y Y 03 18 2015
Mailing Address 823 Oronoco Street		Transaction ID : 50414.C20784
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Canfield & Associates		Receipt , , 1000.00
Occupation Owner		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	Receipt , , 2000.00

C. Full Name (Last, First, Middle Initial) William Russell Carothers II		Date of Receipt M M D D Y Y Y 03 02 2015
Mailing Address Post Office Box 550		Transaction ID : 50414.C20708
City Winfield	State AL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer The Citizens Bank		Receipt , , 1000.00
Occupation Chairman and President & CEO		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	Receipt , , 4400.00

SUBTOTAL of Receipts This Page (optional).....	, , 3000.00
TOTAL This Period (last page this line number only).....	, , .

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