

**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 31 OF 51
	<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)
PAUL GOSAR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James M. Wells DDS

Mailing Address 450 Wildwood River Ridge

City Newport State NC Zip Code 26570

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 12 / 2013

Transaction ID : SA11AI.16975

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Jeffrey J. Williamson

Mailing Address 2707 E Hillery Dr.

City Phoenix State AZ Zip Code 85032

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

Name of Employer Sundt Construction Occupation Senior VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2013

Transaction ID : SA11AI.16979

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Roger Winland

Mailing Address 715 W. Union

City Athens State OH Zip Code 45701

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

Name of Employer Self Occupation Dentist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 29 / 2013

Transaction ID : SA11AI.16980

Amount of Each Receipt this Period
 250.00

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

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

1000.00