

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LEAH VICTORY FUND

A. Full Name (Last, First, Middle Initial)
Carrillo, Valerie, , ,

Mailing Address 912 Ethel Street

City Wausau	State WI	Zip Code 54403
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Volunteer
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Receipt For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.4390

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Choate, Arthur, , ,

Mailing Address 1390 Dixie Hwy Ste 2221

City Coral Gables	State FL	Zip Code 33146
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
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Receipt For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 25 / 2018

Transaction ID : SA11AI.4355

Amount of Each Receipt this Period

2700.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Farness, Knute, , ,

Mailing Address PO Box 650

City Minocqua	State WI	Zip Code 54548
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FEC ID number of contributing federal political committee. **C**

Name of Employer retired	Occupation retired
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Receipt For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 23 / 2018

Transaction ID : SA11AI.4388

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3200.00
