

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 192 OF 314	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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)  
**Josh Hawley for Senate**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>WRIGHT, KAREN, , ,</b>			Date of Receipt MM / DD / YYYY <b>12 / 30 / 2017</b>	
Mailing Address <b>1240 GAMBIER RD</b>			Transaction ID : <b>SA11A.1801</b>	
City <b>MOUNT VERNON</b>	State <b>OH</b>	Zip Code <b>43050-3842</b>	Amount of Each Receipt this Period _____ <b>2700.00</b>	
FEC ID number of contributing federal political committee. <b>C</b> _____		Memo Item CONTRIBUTION <input type="checkbox"/> Memo Item CONTRIBUTION SCF EARMARKED CONTRIBUTION		
Name of Employer <b>ARIEL CORP.</b>		Occupation <b>PRESIDENT AND CEO</b>		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ <b>5400.00</b>		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>WRIGHT, KAREN, , ,</b>			Date of Receipt MM / DD / YYYY <b>12 / 30 / 2017</b>	
Mailing Address <b>1240 GAMBIER RD</b>			Transaction ID : <b>SA11A.1802</b>	
City <b>MOUNT VERNON</b>	State <b>OH</b>	Zip Code <b>43050-3842</b>	Amount of Each Receipt this Period _____ <b>2700.00</b>	
FEC ID number of contributing federal political committee. <b>C</b> _____		Memo Item CONTRIBUTION <input type="checkbox"/> Memo Item CONTRIBUTION SCF EARMARKED CONTRIBUTION		
Name of Employer <b>ARIEL CORP.</b>		Occupation <b>PRESIDENT AND CEO</b>		
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ <b>5400.00</b>		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>SENATE CONSERVATIVES FUND</b>			Date of Receipt MM / DD / YYYY <b>12 / 31 / 2017</b>	
Mailing Address <b>PO BOX 388</b>			Transaction ID : <b>SA11C.1870</b>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22313-0388</b>	Amount of Each Receipt this Period _____ <b>2180.00</b>	
FEC ID number of contributing federal political committee. <b>C</b> <b>C00448696</b>		Memo Item CONTRIBUTION <input checked="" type="checkbox"/> Memo Item CONTRIBUTION SCF EARMARKED CONTRIBUTION; SEE ATTRIBUTION BELOW FOR DONORS REQUIRING TRANSPARENCY		
Name of Employer		Occupation		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ <b>43733.00</b>		
SUBTOTAL of Receipts This Page (optional).....			_____ <b>5400.00</b>	
TOTAL This Period (last page this line number only).....			_____ <b>5400.00</b>	