

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

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NAME OF COMMITTEE (In Full)
Cory Gardner for Senate

A. Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2020	
Mailing Address PO BOX 9891			Transaction ID : SA11C.12851221820	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C C00694323		Name of Employer Occupation		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2151491.86		
B. Full Name (Last, First, Middle Initial) HEARST, SUSAN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2020	
Mailing Address 4650 OLD MILLSAP RD			Transaction ID : SA11A.128672	
City MILLSAP	State TX	Zip Code 76066-2545	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. C		Name of Employer Occupation RETIRED RETIRED		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 550.00		
C. Full Name (Last, First, Middle Initial) WINRED			Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2020	
Mailing Address PO BOX 9891			Transaction ID : SA11C.12851221825	
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period _____ 25.00	
FEC ID number of contributing federal political committee. C C00694323		Name of Employer Occupation		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2151491.86		
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 50.00	
TOTAL This Period (last page this line number only)..... ▶			_____	