

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

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

FOR LINE NUMBER: PAGE 149 OF 290

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Taylor Morrison Inc. Building Strong Business PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Longenecker, Cammie L., , ,

Mailing Address 4900 N. Scottsdale Road

City  
ScottsdaleState  
AZZip Code  
85251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Taylor Morrison Inc.Occupation (for Individual)  
Division President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 07 / 2019

Transaction ID : A2019-1183761

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Longenecker, Cammie L., , ,

Mailing Address 4900 N. Scottsdale Road

City  
ScottsdaleState  
AZZip Code  
85251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Taylor Morrison Inc.Occupation (for Individual)  
Division President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 21 / 2019

Transaction ID : A2019-1367213

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lucas, John H., , ,

Mailing Address 4900 N. Scottsdale Road

City  
ScottsdaleState  
AZZip Code  
85251FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Taylor Morrison Inc.Occupation (for Individual)  
VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2019

Transaction ID : A2019-368038

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

100.00

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