

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)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Steve Chabot for Congress

A. Full Name (Last, First, Middle Initial) Atkins, Thomas, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 08 / 2019	
Mailing Address 1201 Edgecliff Place Apt. 1061			Transaction ID : A528A29ECD40940E7A3F	
City Cincinnati	State OH	Zip Code 45206-2898	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer self		Occupation retired		
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5400.00		

B. Full Name (Last, First, Middle Initial) Williams, Thomas, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2019	
Mailing Address 212 East Third Street Suite 300			Transaction ID : A65D8498178CF460AA6A	
City Cincinnati	State OH	Zip Code 45202-5500	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer North American Properties, Inc		Occupation developer		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

C. Full Name (Last, First, Middle Initial) Clark, Stephen, , ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2019	
Mailing Address 9273 Lerwick Dr			Transaction ID : A50C5D109A1904E4380C	
City Dublin	State OH	Zip Code 43017-9492	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer CGCN		Occupation Partner		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

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

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