

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 OF 57

(check only one)

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

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NAME OF COMMITTEE (In Full)

Tea Party PAC

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

A. Jacob, Kathleen, , ,

Mailing Address 1801 Millridge Ct

City  
AnnapolisState  
MDZip Code  
21409-5827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
memory systems consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2020

Transaction ID : A040C26E8D4CD46E6B52

Amount of Each Receipt this Period

140.00

☐ Memo Item

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

B. Jacob, Kathleen, , ,

Mailing Address 1801 Millridge Ct

City  
AnnapolisState  
MDZip Code  
21409-5827FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
selfOccupation (for Individual)  
memory systems consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 26 / 2020

Transaction ID : A2D36602A4CA04E469D9

Amount of Each Receipt this Period

140.00

☐ Memo Item

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

C. Judd, Wallace, , ,

Mailing Address 673 Potomac Station Dr NE  
No 810City  
LeesburgState  
VAZip Code  
20176-1819FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Authentic Testing Corp.Occupation (for Individual)  
Psychometrician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 20 / 2020

Transaction ID : AE1F74D88F9974EC0ADF

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

780.00

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