

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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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SCALISE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) COX, DUANE, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 11 2019	
Mailing Address 15597 CANYON RIDGE			Transaction ID : SA11A.377407	
City EDEN PRAIRIE	State MN	Zip Code 55347-1406	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 220.00		

B. Full Name (Last, First, Middle Initial) COX, KATHY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 11 2019	
Mailing Address P.O. BOX 239			Transaction ID : SA11A.377158	
City MORENO VALLEY	State CA	Zip Code 92556-0239	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 225.00		

C. Full Name (Last, First, Middle Initial) COZAD, RON, , ,			Date of Receipt M M / D D / Y Y Y Y Y 10 11 2019	
Mailing Address P.O. BOX 3274 17251 SPRING RIVER RD			Transaction ID : SA11A.377062	
City BEND	State OR	Zip Code 97707-0274	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 345.00		

SUBTOTAL of Receipts This Page (optional).....	105.00
TOTAL This Period (last page this line number only).....	