

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 2676 OF 13096

<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)
SCALISE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRAWFORD, DANA, , ,

Mailing Address 5704 IMPERIAL COURT

City PLANO	State TX	Zip Code 75093-2914
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2019

Transaction ID : SA11A.387090

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CRIST, DAVID, , ,

Mailing Address 1016 W. MONROE ST.

City ALEXANDRIA	State IN	Zip Code 46001-8116
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2019

Transaction ID : SA11A.386705

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CUSTER, ORAL M., , DR.,

Mailing Address 577 WEST MARLETTE ST

City IONE	State CA	Zip Code 95640-9797
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FEC ID number of contributing federal political committee. **C**

Name of Employer CASTLE CITY CONSULTANTS	Occupation EDUCATIONAL CONSULTANT
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 24 / 2019

Transaction ID : SA11A.386612

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION
SUBTOTAL of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

150.00
