

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

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

FOR LINE NUMBER: PAGE 7327 OF 13096

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SCALISE FOR CONGRESS

A. Full Name (Last, First, Middle Initial) HOPPER, DIANA, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2019		
Mailing Address 2 NORMAN LN NW			Transaction ID : SA11A.432986		
City ROME	State GA	Zip Code 30165-9610	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C		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 ▼ _____ 685.00			
B. Full Name (Last, First, Middle Initial) HOPPER, DIANA, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2019		
Mailing Address 2 NORMAN LN NW			Transaction ID : SA11A.433505		
City ROME	State GA	Zip Code 30165-9610	Amount of Each Receipt this Period _____ 5.00		
FEC ID number of contributing federal political committee. C		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 ▼ _____ 685.00			
C. Full Name (Last, First, Middle Initial) HORA, CYNTHIA, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2019		
Mailing Address 4995 MEADOWCREST LANE			Transaction ID : SA11A.432626		
City NEW PARIS	State OH	Zip Code 45347-1561	Amount of Each Receipt this Period _____ 35.00		
FEC ID number of contributing federal political committee. C		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 ▼ _____ 335.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 65.00		
TOTAL This Period (last page this line number only)..... ▶			_____		