

# **SCHEDULE A (FEC Form 3X)** **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 ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Troutman Sanders LLP Political Action Committee**

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

**A. Washburn, James, , ,**

Mailing Address 600 Peachtree St NE Ste 5200

City  
Atlanta

State  
GA

Zip Code  
30308-2231

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Troutman Sanders LLP

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

399.92

Date of Receipt

12 / 31 / 2019

**Transaction ID : PR131885145668**

Amount of Each Receipt this Period

200.04

☐ Memo Item

P/R Deduction (\$33.34 Monthly)

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

**B. Childers, Mike, , ,**

Mailing Address 600 Peachtree Street, NE, Suite 30

City  
Atlanta

State  
GA

Zip Code  
30308

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Troutman Sanders LLP

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 31 / 2019

**Transaction ID : PR133495445668**

Amount of Each Receipt this Period

360.00

☐ Memo Item

P/R Deduction (\$60.00 Monthly)

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

**C. Dailey, Anne, , ,**

Mailing Address 401 9th Street, NW, Suite 1000

City  
Washington

State  
DC

Zip Code  
20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Troutman Sanders LLP

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

750.00

Date of Receipt

12 / 31 / 2019

**Transaction ID : PR133495545668**

Amount of Each Receipt this Period

450.00

☐ Memo Item

P/R Deduction (\$75.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ►

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

1010.04