

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

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

FOR LINE NUMBER: PAGE 7 OF 128

(check only one)

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

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NAME OF COMMITTEE (In Full)

The Guardian Fund

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

A. Aleshire, Susan, , Ms.,

Mailing Address 4930 SW 198th Ter

City

Southwest Ranches

State

FL

Zip Code

33332-1130

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

DelAir Heating & Air

Occupation (for Individual)

Owner

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : AE03CA83902AF4DF4A9E

Amount of Each Receipt this Period

1500.00

☐ Memo Item

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

B. Allen, C. Alfred, K., Mr.,

Mailing Address PO Box 186

City

Hinsdale

State

MT

Zip Code

59241-0186

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Retired

Occupation (for Individual)

Retired

Receipt For:

☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 24 / 2020

Transaction ID : A1B19E6B705EA458FAF4

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

C. Anderson, Philip, L., Mr.,

Mailing Address 2034 Keese Sagebiel Rd

City

Fredericksburg

State

TX

Zip Code

78624-7730

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Information Requested

Occupation (for Individual)

Information Requested

Receipt For:

☐
☐

Primary

General

Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 / 10 / 2020

Transaction ID : ADF686719B9154DC5902

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

2000.00

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