

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 6 OF 44	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Capito For West Virginia

Full Name (Last, First, Middle Initial) A. Jernigan, William, Henry, Mr., Jr			Date of Receipt MM / DD / YYYY 05 / 28 / 2017	
Mailing Address 163 Dogwood Ct.			Transaction ID : SA11Ai-CN51666	
City Daniels	State WV	Zip Code 25832	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Dinsmore & Shohl LLP		Occupation Attorney		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. Jernigan, William, Henry, Mr., Jr			Date of Receipt MM / DD / YYYY 06 / 28 / 2017	
Mailing Address 163 Dogwood Ct.			Transaction ID : SA11Ai-CN51680	
City Daniels	State WV	Zip Code 25832	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Dinsmore & Shohl LLP		Occupation Attorney		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 750.00		

Full Name (Last, First, Middle Initial) C. Johnson, Travis, M, Mr.,			Date of Receipt MM / DD / YYYY 05 / 30 / 2017	
Mailing Address 5640 19th St N			Transaction ID : SA11Ai-CN51653	
City Arlington	State VA	Zip Code 22205	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>		
Name of Employer Requested		Occupation Requested		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		

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

1000.00

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