

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

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

FOR LINE NUMBER: PAGE 12 OF 96

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Kansas Democratic Party**

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

**A. Kinch, Lee, L., ,**

Mailing Address 345 Riverview Ste 730, PO Box 4719

City  
Wichita

State  
KS

Zip Code  
67021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 05 / 2019

**Transaction ID : 11ai-000066819**

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**B. Ruiz, Susan, , ,**

Mailing Address 7306 Bond Street

City

Shawnee

State

KS

Zip Code

66203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

State of Kansas

Occupation (for Individual)

State Representative

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 06 / 2019

**Transaction ID : 11ai-000066807**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

**C. Mitchell, Deann, , ,**

Mailing Address 15985 S Clairborne Street

City

Olathe

State

KS

Zip Code

66062

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Frontier Wealth Management

Occupation (for Individual)

Wealth Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 06 / 2019

**Transaction ID : 11ai-000066813**

Amount of Each Receipt this Period

15.00

☐ Memo Item

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

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

130.00