

# **SCHEDULE A (FEC Form 3)** **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 ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**My Committee**

Full Name (Last, First, Middle Initial)

**A. All Janitorial Professional Services Inc**

Mailing Address PO Box 425

City

Allen

State

TX

Zip Code

76013

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 21 2019

Transaction ID : SA11AI.4216

Amount of Each Receipt this Period

500.00

☐ Memo Item  
donation

Full Name (Last, First, Middle Initial)

**B. Beacon Home Health Agency, LLC**

Mailing Address 13004 Murphy Road  
206

City

Stafford

State

TX

Zip Code

77477

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
11 12 2019

Transaction ID : SA11AI.4207

Amount of Each Receipt this Period

250.00

☐ Memo Item  
Campaign donations

Full Name (Last, First, Middle Initial)

**C. Cleveland, Shenita, , ,**

Mailing Address 2822 Martin Luther King Jr.

City

Dallas

State

TX

Zip Code

75215

FEC ID number of contributing  
federal political committee.

C H0TX30081

Name of Employer

Self employed

Occupation

self employed

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4025.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 30 2019

Transaction ID : SA11AI.4309

Amount of Each Receipt this Period

25.00

☐ Memo Item  
money order

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

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

775.00