

# **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)  
**MEUSER FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HIRSCH, STEFANIE, , ,**  
Mailing Address 9105C OWENS DRIVE SUTIE 102

City State Zip Code  
MANASSAS PARK VA 20111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WHEELCHAIR AND SCOOTER REPAIR

Occupation  
DME

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 26 2019

Transaction ID : A733FE3E0D8884C8B935

Amount of Each Receipt this Period

1000.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**ACKERMAN, STEPHEN, T, ,**  
Mailing Address 7862 SOUTHDOWN RD

City State Zip Code  
ALEXANDRIA VA 22308-1342

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SPECTRUM MEDICAL

Occupation  
EXECUTIVE

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  
06 28 2019

Transaction ID : A879D21D1EFDB43A1B4A

Amount of Each Receipt this Period

500.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**COLEMAN, DOUGLAS, , ,**  
Mailing Address 6820 N COUNTY RD 13

City State Zip Code  
LOVELAND CO 80538

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAJOR MEDICAL

Occupation  
BUSINESS OWNBNER

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  
06 28 2019

Transaction ID : AE77B80DA9AC24D6BAE1

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

2000.00