

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)
FRIENDS OF TODD YOUNG, INC.

A. Full Name (Last, First, Middle Initial) MILES, MARK, D., MR.,			Date of Receipt MM / DD / YYYY 06 / 30 / 2018	
Mailing Address 8145 TRADERS POINT LANE			Transaction ID : SA11A.39913	
City INDIANAPOLIS	State IN	Zip Code 46278-1405	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer CICP	Occupation PRESIDENT & CEO			
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 1000.00			
B. Full Name (Last, First, Middle Initial) MILLER, DONALD, J., ,			Date of Receipt MM / DD / YYYY 06 / 11 / 2018	
Mailing Address P.O. BOX 217			Transaction ID : SA11A.39840	
City NORTH VERNON	State IN	Zip Code 47265-0217	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer NORTH VERNON BEVERAGE CO INC	Occupation SELF-EMPLOYED			
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 600.00			
C. Full Name (Last, First, Middle Initial) MILLER, DONALD, J., ,			Date of Receipt MM / DD / YYYY 06 / 30 / 2018	
Mailing Address P.O. BOX 217			Transaction ID : SA11A.39900	
City NORTH VERNON	State IN	Zip Code 47265-0217	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer NORTH VERNON BEVERAGE CO INC	Occupation SELF-EMPLOYED			
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date 600.00			
SUBTOTAL of Receipts This Page (optional).....			1400.00	
TOTAL This Period (last page this line number only).....				