

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
JASON LEWIS FOR CONGRESS, INC.

A. Full Name (Last, First, Middle Initial) BYELICK, STEPHEN, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2018		
Mailing Address 864 BASSWOOD LANE			Transaction ID : SA11AI.30314		
City SAINT PAUL	State MN	Zip Code 55123	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer ALLIANCE BANK		Occupation CFO			
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1399.54			
B. Full Name (Last, First, Middle Initial) CAMERON, RONALD, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2018		
Mailing Address P. O. BOX 21440			Transaction ID : SA11AI.28905		
City LITTLE ROCK	State AR	Zip Code 72221	Amount of Each Receipt this Period _____ 2700.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer MOUNTAIRE CORPORATION		Occupation CHAIRMAN			
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 5400.00			
C. Full Name (Last, First, Middle Initial) CARLSON, KEITH, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 13 / 2018		
Mailing Address 1299 WILDERNESS LANE			Transaction ID : SA11AI.28754		
City SAINT PAUL	State MN	Zip Code 55123	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer CLARIS		Occupation HEALTH			
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 2900.00		
TOTAL This Period (last page this line number only)..... ▶			_____		