

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

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

FOR LINE NUMBER: PAGE 8 OF 9
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
TELLURIAN INC PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. SANDERSON, LARRY, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 25 / 2019 Transaction ID : SA11AI.6076	
Mailing Address 1201 LOUISIANA STREET, SUITE 3100			Amount of Each Receipt this Period 192.30	
City HOUSTON	State TX	Zip Code 77002	<input type="checkbox"/> Memo Item PAYROLL DEDUCTION	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 384.60	
Name of Employer (for Individual) TELLURIAN INC			Occupation (for Individual) VP, MID OFFICE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. TEAGUE, KEITH, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 25 / 2019 Transaction ID : SA11AI.6082	
Mailing Address 1201 LOUISIANA STREET, SUITE 3100			Amount of Each Receipt this Period 192.30	
City HOUSTON	State TX	Zip Code 77002	<input type="checkbox"/> Memo Item PAYROLL DEDUCTION	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 384.60	
Name of Employer (for Individual) TELLURIAN INC			Occupation (for Individual) COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C.			Date of Receipt M M / D D / Y Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	<input type="checkbox"/> Memo Item	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼	
Name of Employer (for Individual)			Occupation (for Individual)	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
SUBTOTAL of Receipts This Page (optional).....			384.60	
TOTAL This Period (last page this line number only).....			1699.96	