

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

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

FOR LINE NUMBER: PAGE 902 OF 1459

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**HUCK PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Steele, James, F, ,**

Mailing Address PO Box 1235

City  
Blowing Rock

State  
NC

Zip Code  
28605

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Requested Per Best Efforts

Occupation (for Individual)  
Requested Per Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 09 / 2019

**Transaction ID : SA11AI.325093**

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Stegman, Ernestine, B, ,**

Mailing Address 6401 Ohio Dr Apt 5302

City  
Plano

State  
TX

Zip Code  
75024

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Requested Per Best Efforts

Occupation (for Individual)  
Requested Per Best Efforts

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

**Transaction ID : SA11AI.350916**

Amount of Each Receipt this Period

450.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Steinberger, John, C, ,**

Mailing Address 6212 Valeria Ln

City  
El Paso

State  
TX

Zip Code  
79912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self-Employed

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 04 / 2019

**Transaction ID : SA11AI.330897**

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

540.00

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