

# **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)  
**NANCY MACE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RAVENEL, THOMAS, J, ,**

Mailing Address 1051 JOHNNIE DODDS BOULEVARD SUITE

City MOUNT PLEASANT	State SC	Zip Code 29464-3100
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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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  
12 / 09 / 2019

Transaction ID : AA92622DB82BD43BB8D7

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**BURNIKEL, BRIAN, , ,**

Mailing Address 11 DELLANY CT

City GREER	State SC	Zip Code 29651-6857
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FEC ID number of contributing federal political committee. **C**

Name of Employer PRISMA HEALTH	Occupation PHYSICIAN
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Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 13 / 2019

Transaction ID : A25CCA018F20443BAAF9

Amount of Each Receipt this Period

250.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**GLASSBURN, DONIVON, DEWITT, ,**

Mailing Address 1738 MIDDLE ST

City SULLIVANS ISLAND	State SC	Zip Code 29482-9728
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 18 / 2019

Transaction ID : A63235CC6BD16472C975

Amount of Each Receipt this Period

800.00

☐ Memo Item

1550.00

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

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