

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

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

FOR LINE NUMBER:

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(check only one)

<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	

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NAME OF COMMITTEE (In Full)

SHERIFF SCOTT JONES FOR CONGRESS

Full Name (Last, First, Middle Initial)

Steve Gidaro

A.

Mailing Address 401 Watt Ave. Ste.4

City

Sacramento

State

CA

Zip Code

95864

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Self Employed

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2015

Transaction ID : INCA92

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Carl C. Hsu

B.

Mailing Address 1995 Zinfandel Dr., #105

City

Rancho Cordova

State

CA

Zip Code

95670

FEC ID number of contributing
federal political committee.

C

Name of Employer

Gold River Pediatric Group

Occupation

Physician

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2015

Transaction ID : INCA90

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Luanne Ikeuchi

C.

Mailing Address P.O. Box 2221

City

CARMICHAEL

State

CA

Zip Code

95609

FEC ID number of contributing
federal political committee.

C

Name of Employer

n/a

Occupation

Not employed

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
12		11		2015

Transaction ID : INCA93

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

1800.00