

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

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

FOR LINE NUMBER: PAGE 5 OF 22
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
PAUL GOSAR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David Anderson

Mailing Address 5288 Dawes Ave.

City State Zip Code
Alexandria VA 22311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Dentist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11AI.19059

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Frederick Bruening

Mailing Address 17091 Kings Fairway Lane

City State Zip Code
Grand Blac MI 48439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Physician

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11AI.18921

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dr. Regina Cobb

Mailing Address 921 Crestwood Ln

City State Zip Code
Kingman AZ 86409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Riata Valley Dental Dentist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 21 / 2015

Transaction ID : SA11AI.18901

Amount of Each Receipt this Period
500.00

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

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

1750.00