

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)		PAGE 18 OF 74	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Glenn Grothman for Congress

A. Full Name (Last, First, Middle Initial)
KRESS, DONALD, , ,

Mailing Address PO BOX 11564

City GREEN BAY	State WI	Zip Code 54307-1564
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2021

Transaction ID : SA11A.24621

Amount of Each Receipt this Period
- 2900.00

Memo Item
CONTRIBUTION
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
KRESS, DONALD, , ,

Mailing Address PO BOX 11564

City GREEN BAY	State WI	Zip Code 54307-1564
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2021

Transaction ID : SA11A.24622

Amount of Each Receipt this Period
2900.00

Memo Item
CONTRIBUTION
REDESIGNATION FROM PRIMARY

C. Full Name (Last, First, Middle Initial)
KUECHLER, MICHAEL, , ,

Mailing Address 893 COUNTRY CLUB LANE

City FOND DU LAC	State WI	Zip Code 54935-8715
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FEC ID number of contributing federal political committee. **C**

Name of Employer JSV	Occupation CPA
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Receipt For: 2022
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 09 / 2021

Transaction ID : SA11A.24115

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶	500.00
TOTAL This Period (last page this line number only)..... ▶	