

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 316 OF 2591

<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Texans for Senator John Cornyn Inc

Full Name (Last, First, Middle Initial)

A.

GLAUSER, CHAD, , MR.,

Mailing Address 101 S ASH ST

City

DENVER

State

CO

Zip Code

80246-1005

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALPINE

Occupation

PORTFOLIO MANAGER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	9

Transaction ID : SA11A.164480

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION
B.

Full Name (Last, First, Middle Initial)

GLEGHORN, CHARLES, , MR.,

Mailing Address 2022 OLD WELLS HILL RD.

City

FAYETTEVILLE

State

TN

Zip Code

37334-3724

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFFC

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	1	9

Transaction ID : SA11A.175381_B

Amount of Each Receipt this Period

1000.00

☒ Memo Item
 CONTRIBUTION

SEE ATTRIBUTION FROM BROOK HAVEN FARM

C.

Full Name (Last, First, Middle Initial)

GLINES, EVERETT, , MR.,

Mailing Address 300 WEST PARK DR. N

City

MCKINNEY

State

TX

Zip Code

75071-3532

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNITEDHEALTHCARE

Occupation

SALES AGENT

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	1	9

Transaction ID : SA11A.166996

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

600.00

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