

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

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

FOR LINE NUMBER: PAGE 42 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

LOUIE GOHMERT FOR CONGRESS COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Shirley Rowold

Mailing Address P. O. Box 513

City

Tyler

State

TX

Zip Code

75710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Landman

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 3 / 2 0 1 1

Transaction ID: SA11AI.30794

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Shirley Rowold

Mailing Address P. O. Box 513

City

Tyler

State

TX

Zip Code

75710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Landman

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.31130

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Dr. Michael E. Russell, II

Mailing Address 831 Blenheim Pl.

City

Tyler

State

TX

Zip Code

75703

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Azalea Orthopedic & Sports  
Medicine CL

Occupation  
Physician

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 2 / 2 0 1 1

Transaction ID: SA11AI.31120

Amount of Each Receipt this Period

2500.00

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

3500.00

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