

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 56 OF 68

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

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)

GRADEL FOR CONGRESS

Full Name (Last, First, Middle Initial)

RATTAY, RICK, V, MR.,

A.

Mailing Address 6143 SWEETGUM DR

City

MONCLOVA

State

OH

Zip Code

43542-8686

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE RATTAY MARKETING GROUP

Occupation

SALES

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 25 2019

Transaction ID : A35FA560F7E074C2EBCB

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

SCHOLL, ROBERT, , ,

B.

Mailing Address 2331 MODAFF RD

City

NAPERVILLE

State

IL

Zip Code

60565-3196

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELITE DENTAL PARTNERS

Occupation

EXECUTIVE

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 23 2019

Transaction ID : AB7113B0137834B00920

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BURKEY, CATHERINE, C., ,

C.

Mailing Address 719 GALAXY DR

City

GRAND JUNCTION

State

CO

Zip Code

81506-1847

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 06 2019

Transaction ID : A1678756093704276BD7

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

3800.00