

# **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)

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

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NAME OF COMMITTEE (In Full)  
**TEAM GRAHAM, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**ISOLA, TOM, , ,**  
Mailing Address 5 DOVECOTE LANE

City State Zip Code  
MALVERN PA 19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

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  
01 23 2020

Transaction ID : A5468FDA06CA243E38D2

Amount of Each Receipt this Period

500.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**HOFFMAN, PAMELA, S., ,**  
Mailing Address 1440 LONGSPUR DR

City State Zip Code  
MOUNT PLEASANT SC 29466-9404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INFORMATION REQUESTED

Occupation  
INFORMATION REQUESTED

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 23 2020

Transaction ID : A35176B3ED4D2482586E

Amount of Each Receipt this Period

25.00

☐ Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**MAIZE, JOHN, , ,**  
Mailing Address 3861 COLONEL VANDERHORST CIR

City State Zip Code  
MOUNT PLEASANT SC 29466-8035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 07 2020

Transaction ID : A82B1C4420C2346FCB4F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

1525.00

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