

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

PAGE 2335 OF 6330

|   |                              |                              |                              |                             |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)  
**TEAM GRAHAM, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**HUGHES, CHARLES, , ,**

Mailing Address 201 E GRANT AVE

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| MORTON | TX    | 79346    |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COCHRAN MEMORIAL HOSPITALOccupation  
PHYSICIAN

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 21  |   | 2020    |

Transaction ID : AD12A78B14D5A4843A35

Amount of Each Receipt this Period

100.00

☐ Memo Item

**B.** Full Name (Last, First, Middle Initial)  
**CASON, EDGAR, , ,**

Mailing Address 419 SHOP RD

|           |       |            |
|-----------|-------|------------|
| City      | State | Zip Code   |
| COUSHATTA | LA    | 71019-9635 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
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 |
| 03  |   | 23  |   | 2020    |

Transaction ID : AAD0A23117808482D8AB

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

Mailing Address 17513 COUNTY ROAD 311

|        |       |            |
|--------|-------|------------|
| City   | State | Zip Code   |
| HARROD | OH    | 45850-9509 |

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

Date of Receipt

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 02  |   | 26  |   | 2020    |

Transaction ID : A72DFE6099ED24738AA2

Amount of Each Receipt this Period

15.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

615.00

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