

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 3905 OF 6330

☒ 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)
TEAM GRAHAM, INC.

A. Full Name (Last, First, Middle Initial)
RASMUSSEN, ROSEMARY, B., ,

Mailing Address 62-3610 LOLII WAY
APT D2

City
KAMUELA

State
HI

Zip Code
96743-8765

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
03 10 2020

Transaction ID : A87C3122982B94077A69

Amount of Each Receipt this Period

500.00

☒ Memo Item

PARTNERSHIP: SURVIVORS TRUST UNDER
RASMUSSEN

B. Full Name (Last, First, Middle Initial)
LINDA C MORLOCK TRUST

Mailing Address 40 PLANTERS WOOD DR APT 2524

City
HILTON HEAD ISLAND

State
SC

Zip Code
29928-4421

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
02 18 2020

Transaction ID : A68AD546ED91C4E4CA11

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
MORLOCK, LINDA, C., ,

Mailing Address 40 PLANTERS WOOD DR. APT 2524

City
HILTON HEAD ISLAND

State
SC

Zip Code
29928-4421

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
02 18 2020

Transaction ID : AFC94210626054F20BB8

Amount of Each Receipt this Period

100.00

☒ Memo Item

PARTNERSHIP: LINDA C MORLOCK TRUST

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

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

100.00