

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

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<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	

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

**A.** Full Name (Last, First, Middle Initial)  
**MASDEN, CATHERINE, , ,**

Mailing Address 1028 CHEROKEE RD

City	State	Zip Code
LOUISVILLE	KY	40204

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 ▼

225.00

Date of Receipt

M M	D D	Y Y Y Y
03	03	2020

Transaction ID : A5074274EF2DC471E8B2

Amount of Each Receipt this Period

25.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH WINRED  
PAC

**B.** Full Name (Last, First, Middle Initial)  
**WINRED PAC**

Mailing Address PO BOX 9891

City	State	Zip Code
ARLINGTON	VA	22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1390949.99

Date of Receipt

M M	D D	Y Y Y Y
03	03	2020

Transaction ID : A9246F9B2640D4C4C890

Amount of Each Receipt this Period

25.00

☒ Memo Item

INTERMEDIARY

TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.

**C.** Full Name (Last, First, Middle Initial)  
**RAUSCH, KIM, , ,**

Mailing Address 11 IRONGATE DR

City	State	Zip Code
BEAUFORT	SC	29906-8522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BEAUFORT MEMORIAL HOSPITALOccupation  
CUSTOMER SERVICE

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

562.50

Date of Receipt

M M	D D	Y Y Y Y
03	26	2020

Transaction ID : AD693CD4190C446A5B0A

Amount of Each Receipt this Period

35.00

☐ Memo ItemEARMARKED (NON-DIRECTED) THROUGH WINRED  
PAC**SUBTOTAL** of Receipts This Page (optional)..... ▶

60.00

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