

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 OF 281

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Americans for Responsible Solutions-PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Duganz, Steven, , ,

Mailing Address 4156 Laredo Pl

City
BillingsState
MTZip Code
59106-1380FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NoneOccupation (for Individual)
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		11		2017

Transaction ID : C10768876

Amount of Each Receipt this Period

75.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Roby, Daniel, , ,

Mailing Address 6145 NW Ponderosa Ave

City
CorvallisState
ORZip Code
97330-3156FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
USDIOccupation (for Individual)
Wildlife Biologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		04		2017

Transaction ID : C10759696

Amount of Each Receipt this Period

10.00

☐ Memo Item

Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Harris, Robert, , ,

Mailing Address 201 E Washington St
Unit 1002City
Iowa CityState
IAZip Code
52240-3997FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
UIHCOccupation (for Individual)
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		03		2017

Transaction ID : C10759867

Amount of Each Receipt this Period

25.00

☐ Memo Item

Non-Contribution Account

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

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

110.00