

**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 105 OF 191

<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)

**SCOTT TAYLOR FOR SENATE**

Full Name (Last, First, Middle Initial)

**TUDEEN, MICHAEL, N., MR.,****A.** Mailing Address 9425 WEATHERLY DR.

City

BRENTWOOD

State

TN

Zip Code

37027-2612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
POP HEALTHCAREOccupation  
CEO - HEALTHCARE

Receipt For: 2020

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

5600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	5		2	0	1	9

Transaction ID : SA11A.12631

Amount of Each Receipt this Period

2800.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

**BRUTCHER, HELEN, L., MS.,****B.** Mailing Address 615 HICKORY CT

City

LOGANSPOUT

State

IN

Zip Code

46947-4155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HOMEMAKEROccupation  
HOMEMAKER

Receipt For: 2020

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

230.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	6		2	0	1	9

Transaction ID : SA11A.13269

Amount of Each Receipt this Period

60.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**CHALIFOUR, LEE, H., CMSGT, USAF RET.****C.** Mailing Address 131 COLONIAL ST SE

City

PORT CHARLOTTE

State

FL

Zip Code

33952-9106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2020

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	6		2	0	1	9

Transaction ID : SA11A.13243

Amount of Each Receipt this Period

100.00

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

160.00

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