

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 1489 OF 3248

☒ 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) LONG, PATRICIA, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 16 / 2019		
Mailing Address 644-34 FAIRINGTON OVAL			Transaction ID : AA5D6ADBEEAC54373940		
City AURORA	State OH	Zip Code 44202	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00			
B. Full Name (Last, First, Middle Initial) MOURAD, ANTHONY, E., MR.,			Date of Receipt M M / D D / Y Y Y Y Y 12 / 02 / 2019		
Mailing Address 1355 S PORTOFINO DR APT 101			Transaction ID : A7A2E484FA7B044B48BA		
City SARASOTA	State FL	Zip Code 34242	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer SELF-EMPLOYED		Occupation INSURANCE AGENT			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 350.00			
C. Full Name (Last, First, Middle Initial) PIERCE, GILBERT, C., ,			Date of Receipt M M / D D / Y Y Y Y Y 12 / 16 / 2019		
Mailing Address 11970 HEATHER WOODS CT			Transaction ID : AF582E5B6C8F14C49AC0		
City NAPLES	State FL	Zip Code 34120	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 800.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 200.00		
TOTAL This Period (last page this line number only)..... ▶			_____		