

**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)

**McConnell Senate Committee**

Full Name (Last, First, Middle Initial)

**WINRED****A.**

Mailing Address PO BOX 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12533015.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	0

**Transaction ID : ACADDE253B648487CB33**

Amount of Each Receipt this Period

749262.36

☒ Memo Item

EM Trans Total

Earmark Directed

Full Name (Last, First, Middle Initial)

**Smith, Floyd, , ,****B.**

Mailing Address 4317 55th Avenue Northeast

City

Seattle

State

WA

Zip Code

98105-4949

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

The Polyclinic

Physician

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

282.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	7		2	0	2	0

**Transaction ID : A31E6EBAAA9CB40E2957**

Amount of Each Receipt this Period

29.75

☐ Memo Item

WinRed EM Rec 5/28/20

Full Name (Last, First, Middle Initial)

**WINRED****C.**

Mailing Address PO BOX 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.**C** C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12533015.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	2	0

**Transaction ID : AF821B2F7B5274AC2AA0**

Amount of Each Receipt this Period

749262.36

☒ Memo Item

EM Trans Total

Earmark Directed

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

29.75

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