

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

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

FOR LINE NUMBER: PAGE 17 OF 80  
(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**ALASKANS FOR DAN SULLIVAN**

A. Full Name (Last, First, Middle Initial) <b>FAULHABER, JOSEPH, N., ,</b>			Date of Receipt MM / DD / YYYY <b>05 / 23 / 2018</b>	
Mailing Address <b>345 PAY STREAK DR</b>			Transaction ID : <b>AD90C6F30639D421691F</b>	
City <b>FAIRBANKS</b>	State <b>AK</b>	Zip Code <b>99712-2231</b>	Amount of Each Receipt this Period _____ <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>REALTY, INC.</b>		Occupation <b>BROKER/OWNER</b>		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ <b>1000.00</b>		

B. Full Name (Last, First, Middle Initial) <b>GARNER, JOHN, N., ,</b>			Date of Receipt MM / DD / YYYY <b>06 / 30 / 2018</b>	
Mailing Address <b>9006 FAUNTLEROY WAY SW</b>			Transaction ID : <b>AA91CE4B8770A45548B1</b>	
City <b>SEATTLE</b>	State <b>WA</b>	Zip Code <b>98136-2445</b>	Amount of Each Receipt this Period _____ <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>NORTH PACIFIC SEAFOODS, INC.</b>		Occupation <b>CONSULTANT</b>		
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ <b>4500.00</b>		

C. Full Name (Last, First, Middle Initial) <b>GILIBERT, JOSE, E., ,</b>			Date of Receipt MM / DD / YYYY <b>04 / 17 / 2018</b>	
Mailing Address <b>9999 COLLINS AVE</b> <b>APT 19D</b>			Transaction ID : <b>AE1D0D27EA96D4ADA981</b>	
City <b>BAL HARBOUR</b>	State <b>FL</b>	Zip Code <b>33154-1847</b>	Amount of Each Receipt this Period _____ <b>2700.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>SELF EMPLOYED</b>		Occupation <b>PHYSICIAN</b>		
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ <b>2700.00</b>		

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

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

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