

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JOHN JAMES FOR SENATE, INC.

A. Full Name (Last, First, Middle Initial) GATES, NORMAN, E, ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 25 / 2019		
Mailing Address 58727 TRAVIS RD			Transaction ID : SA11AI.11021		
City NEW HUDSON	State MI	Zip Code 48165	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		Memo Item			
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00			
B. Full Name (Last, First, Middle Initial) GAY, ROBERT, , ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 14 / 2019		
Mailing Address 8539 HALLET ST			Transaction ID : SA11AI.11036		
City LENEXA	State KS	Zip Code 66215-6004	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Memo Item EARMARKED THROUGH SCF [SA11AI.4105]			
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			
C. Full Name (Last, First, Middle Initial) GERSON, ELOISE, , ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 28 / 2019		
Mailing Address PO BOX 10696			Transaction ID : SA11AI.11138		
City CHICAGO	State IL	Zip Code 60611-0696	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Memo Item			
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			1550.00		
TOTAL This Period (last page this line number only)..... ▶					