

**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)

**LISA SONG SUTTON FOR CONGRESS**

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**

Name of Employer

Occupation

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

79873.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	2	0

**Transaction ID : AC509E374B9354470B4B**

Amount of Each Receipt this Period

250.00

☒ Memo Item  
 INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**B.**

Full Name (Last, First, Middle Initial)

**MALOOF, GAVIN, , ,**

Mailing Address 63 QUINTESSA CIRCLE

City

LAS VEGAS

State

NV

Zip Code

89141

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

Name of Employer

Occupation

SELF EMPLOYED

TEAM OWNER

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

**Transaction ID : ADAB611DE23574E26B47**

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
 EARMARKED (NON-DIRECTED) THROUGH WINRED
**C.**

Full Name (Last, First, Middle Initial)

**WINRED**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

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

Name of Employer

Occupation

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

79873.00

Date of Receipt

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

**Transaction ID : A3C644B71CEDE407CAD2**

Amount of Each Receipt this Period

1000.00

☒ Memo Item  
 INTERMEDIARY
TOTAL EARMARKED THROUGH CONDUIT. PAC  
LIMIT NOT AFFECTED.**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1000.00