

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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	

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)
Sinema for Arizona

A. Full Name (Last, First, Middle Initial)
Jenkins, Sandra, L., ,
Mailing Address 35 Red Blossom Cir

City Shepherdstown	State WV	Zip Code 25443
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FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired
 Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2018

Transaction ID : 11ai-000359882

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Hall, Mary, , ,
Mailing Address 15 Silverwood Ter

City South Hadley	State MA	Zip Code 01075
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FEC ID number of contributing
federal political committee.

C

Name of Employer
N/AOccupation
Retired
 Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2018

Transaction ID : 11ai-000359953

Amount of Each Receipt this Period

300.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Harris, William, , ,
Mailing Address 1010 Waltham St Apt 8

City Lexington	State MA	Zip Code 02421
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FEC ID number of contributing
federal political committee.

C

Name of Employer
Mass General HospitalOccupation
Physician
 Receipt For: 2024
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 05 / 2018

Transaction ID : 11ai-000360016

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

2300.00

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