

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 8 OF 73

| | | | | |
|------------------------------|------------------------------|------------------------------|---|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input checked="" 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)

KATHALEEN WALL FOR CONGRESS

| | | | |
|--|--|--|--|
| A. Full Name (Last, First, Middle Initial) Wall, Kathaleen, , , Mailing Address 602 Pinehaven City Houston State TX Zip Code 77024 FEC ID number of contributing federal political committee. C H8TX02141 Name of Employer retired Occupation retired Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6019732.49 | | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2018 Transaction ID : SA11D.5344 Amount of Each Receipt this Period 100000.00 <input type="checkbox"/> Memo Item Candidate Contribution |
| B. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ | | | Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period <input type="checkbox"/> Memo Item |
| C. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ | | | Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period <input type="checkbox"/> Memo Item |
| SUBTOTAL of Receipts This Page (optional)..... ▶ | | | 100000.00 |
| TOTAL This Period (last page this line number only)..... ▶ | | | 100000.00 |