

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

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

FOR LINE NUMBER: PAGE 918 OF 9179

(check only one)

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

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)
McSally For Senate Inc

A. Full Name (Last, First, Middle Initial)
CASTELLI, MICHAEL, G., MR.,
Mailing Address P.O. BOX 3176

City
MANHATTAN BEACH

State
CA

Zip Code
90266-1176

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 26 2020

Transaction ID : SA11A.841351

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CASTELLON, NOEL, , MR.,
Mailing Address 25014 RIVERVIEW LN

City
MURRIETA

State
CA

Zip Code
92562-8958

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUALITY FOAM PACKAGING INC.

Occupation
PRESIDENT

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 02 2020

Transaction ID : SA11A.844030

Amount of Each Receipt this Period

1400.00

☐ Memo Item
CONTRIBUTION

SEE REATTRIBUTION

C. Full Name (Last, First, Middle Initial)
CASTELLON, NOEL, , MR.,
Mailing Address 25014 RIVERVIEW LN

City
MURRIETA

State
CA

Zip Code
92562-8958

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUALITY FOAM PACKAGING INC.

Occupation
PRESIDENT

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 02 2020

Transaction ID : SA11A.844901

Amount of Each Receipt this Period

- 600.00

☒ Memo Item
CONTRIBUTION

REATTRIBUTION TO SPOUSE; REATTRIBUTION /
REDESIGNATION REQUESTED

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

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

1500.00