

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)
McSally For Senate Inc

A. Full Name (Last, First, Middle Initial)
HYDE, BARRY, , ,
Mailing Address 78417 KOSLOW COURT

City State Zip Code
INDIO CA 92203-8186

FEC ID number of contributing
federal political committee.

C

Name of Employer
CERTIFIED COMFORT SYSTEMS

Occupation
SERVICE MANAGER

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

Election Cycle-to-Date ▼
298.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 21 2020

Transaction ID : SA11A.779181

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HYDE, BARRY, , ,
Mailing Address 78417 KOSLOW COURT

City State Zip Code
INDIO CA 92203-8186

FEC ID number of contributing
federal political committee.

C

Name of Employer
CERTIFIED COMFORT SYSTEMS

Occupation
SERVICE MANAGER

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

Election Cycle-to-Date ▼
298.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 09 2020

Transaction ID : SA11A.845116

Amount of Each Receipt this Period

12.50

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
HYDE, BARRY, , ,
Mailing Address 78417 KOSLOW COURT

City State Zip Code
INDIO CA 92203-8186

FEC ID number of contributing
federal political committee.

C

Name of Employer
CERTIFIED COMFORT SYSTEMS

Occupation
SERVICE MANAGER

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

Election Cycle-to-Date ▼
298.75

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 09 2020

Transaction ID : SA11A.845117

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

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

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

87.50