

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

PAGE 3973 OF 9179

<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)
McSally For Senate Inc

A. Full Name (Last, First, Middle Initial)
NICKEL, KARL, A., MR.,

Mailing Address 24652 JUTEWOOD PL

City LAKE FOREST	State CA	Zip Code 92630-4466
---------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
NOT EMPLOYED

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		07		2020

Transaction ID : SA11A.814582

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NICKERSON, STUART, C., MR.,

Mailing Address 2503 HUTCHINSON CT

City BURLINGTON	State NC	Zip Code 27215-9831
--------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		10		2020

Transaction ID : SA11A.866736

Amount of Each Receipt this Period

200.00

☐ Memo Item

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NICOLAYSEN, ERIK, , MR.,

Mailing Address 77 S GREELEY AVE
108

City CHAPPAQUA	State NY	Zip Code 10514-3310
-------------------	-------------	------------------------

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
INSURANCE

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		13		2020

Transaction ID : SA11A.845083

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

1700.00

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

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