

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

PAGE 4859 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	

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NAME OF COMMITTEE (In Full)
McSally For Senate Inc

A. Full Name (Last, First, Middle Initial)
SCHADE, WILLIAM, H., MR.,

Mailing Address 287 AVENUE C

City NEW YORK	State NY	Zip Code 10009-2331
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 14 / 2020

Transaction ID : SA11A.823550

Amount of Each Receipt this Period

50.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCHAEFFER, HEIDI, , ,

Mailing Address 8273 SAVARA STREAMS LN

City BOYNTON BEACH	State FL	Zip Code 33473-7893
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation PHYSICIAN
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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
02 / 04 / 2020

Transaction ID : SA11A.810928

Amount of Each Receipt this Period

2800.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCHAERTEL, JOHN, C., MR.,

Mailing Address 4700 OAKHURST BLVD APT 218
APT 218

City HARRISBURG	State PA	Zip Code 17110-4007
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FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
376.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 13 / 2020

Transaction ID : SA11A.777538

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)..... ▶

2900.00
