

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

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<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)
Friends of Dave Brat Inc.

A. Full Name (Last, First, Middle Initial)
Busby, Louis, , Mr.,

Mailing Address 7828 Belmont Rd

City Spotsylvania	State VA	Zip Code 22551
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FEC ID number of contributing federal political committee. C

Name of Employer Retired	Occupation Retired
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Receipt For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2018

Transaction ID : SA11Ai-CN39063

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Busby, Louis, , Mr.,

Mailing Address 7828 Belmont Rd

City Spotsylvania	State VA	Zip Code 22551
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FEC ID number of contributing federal political committee. C

Name of Employer Retired	Occupation Retired
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Receipt For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2018

Transaction ID : SA11Ai-CN41510

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Busch, August, A, Mr., III

Mailing Address One Mid Rivers Mall Dr

City Saint Peters	State MO	Zip Code 63376
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FEC ID number of contributing federal political committee. C

Name of Employer None	Occupation Retired
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Receipt For: 2018
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 28 / 2018

Transaction ID : SA11Ai-CN45053

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1350.00
