

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

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

FOR LINE NUMBER: PAGE 8 OF 31

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Calfee Fund For Good Government**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Blair, Mitchell, , ,

Mailing Address 1405 East Sixth Street

City  
Cleveland

State  
OH

Zip Code  
44114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 25 / 2019

Transaction ID : SA11AI.9813

Amount of Each Receipt this Period

1400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Bonner, Chet, , ,

Mailing Address 1405 East Sixth Street

City  
Cleveland

State  
OH

Zip Code  
44114-2688

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 25 / 2019

Transaction ID : SA11AI.9814

Amount of Each Receipt this Period

1400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bules, David, , ,

Mailing Address 255 East Fifth Street

City  
Cincinnati

State  
OH

Zip Code  
45202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Self Employed

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 25 / 2019

Transaction ID : SA11AI.9815

Amount of Each Receipt this Period

1400.00

☐ Memo Item

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

4200.00

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