

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 22

(check only one)

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

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NAME OF COMMITTEE (In Full)

Saltchuk Resources, Inc. PAC

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

A. Nolan, Tim, , ,

Mailing Address 10550 Deerwood Park Blvd

City
Jacksonville

State
FL

Zip Code
32256-0596

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TOTE Maritime Puerto Rico, LLC

Occupation (for Individual)
President / CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 06 / 2019

Transaction ID : A7163053CDE704532881

Amount of Each Receipt this Period

125.00

☐ Memo Item

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

B. Nelson, Timothy, , ,

Mailing Address 1474 Tama Ran Pl

City
Saint Johns

State
FL

Zip Code
32259-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Shoreside Logistics, Inc

Occupation (for Individual)
President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2019

Transaction ID : AAC651E6B927B462C914

Amount of Each Receipt this Period

65.00

☐ Memo Item

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

C. Wagstaff, Jim, , ,

Mailing Address 4279 Live Oak Ln
Ste 509

City
Macclenny

State
FL

Zip Code
32063-7362

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
TOTE Maritime Puerto Rico, LLC

Occupation (for Individual)
Vice President, Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2019

Transaction ID : A3249BBFD4A1F411982A

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

250.00

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