

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

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

FOR LINE NUMBER:
(check only one)

PAGE 786 OF 5561

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TEAM GRAHAM, INC.

A. Full Name (Last, First, Middle Initial) OHEERON, PETE, , , Mailing Address 17006 EVERGREEN ELM WAY <div> <div>City</div> <div>State</div> <div>Zip Code</div> </div> <div> <div>HOUSTON</div> <div>TX</div> <div>77059</div> </div> <div> <div>FEC ID number of contributing federal political committee.</div> <div>C</div> </div> <div> <div>Name of Employer</div> <div>FIBROGENESIS</div> <div>Occupation</div> <div>CEO</div> </div> <div> <div>Receipt For: 2020</div> <div> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>Election Cycle-to-Date ▼</div> <div></div> </div>			<div> <div>Date of Receipt</div> <div> <div>M M / D D / Y Y Y Y Y</div> <div>04 / 29 / 2020</div> </div> </div> <div>Transaction ID : AADFE66F5B1994BD6AEC</div> <div> <div>Amount of Each Receipt this Period</div> <div></div> <div>1000.00</div> </div> <div> <input type="checkbox"/> Memo Item </div>	
B. Full Name (Last, First, Middle Initial) GARLITZ, LOISANN, , , Mailing Address PO BOX 102 <div> <div>City</div> <div>State</div> <div>Zip Code</div> </div> <div> <div>COKEVILLE</div> <div>WY</div> <div>83114-0102</div> </div> <div> <div>FEC ID number of contributing federal political committee.</div> <div>C</div> </div> <div> <div>Name of Employer</div> <div>RETIRED</div> <div>Occupation</div> <div>RETIRED</div> </div> <div> <div>Receipt For: 2020</div> <div> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>Election Cycle-to-Date ▼</div> <div></div> </div>			<div> <div>Date of Receipt</div> <div> <div>M M / D D / Y Y Y Y Y</div> <div>04 / 08 / 2020</div> </div> </div> <div>Transaction ID : A215090D82C1E4C5EA49</div> <div> <div>Amount of Each Receipt this Period</div> <div></div> <div>15.65</div> </div> <div> <input type="checkbox"/> Memo Item </div>	
C. Full Name (Last, First, Middle Initial) LOFTON, MARY, , , Mailing Address 2257 WORLD PARKWAY BLVD W APT 51 <div> <div>City</div> <div>State</div> <div>Zip Code</div> </div> <div> <div>CLEARWATER</div> <div>FL</div> <div>33763-2833</div> </div> <div> <div>FEC ID number of contributing federal political committee.</div> <div>C</div> </div> <div> <div>Name of Employer</div> <div>RETIRED</div> <div>Occupation</div> <div>RETIRED</div> </div> <div> <div>Receipt For: 2020</div> <div> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div> <div> <div>Election Cycle-to-Date ▼</div> <div></div> </div>			<div> <div>Date of Receipt</div> <div> <div>M M / D D / Y Y Y Y Y</div> <div>05 / 08 / 2020</div> </div> </div> <div>Transaction ID : A7661FF3339114343BD3</div> <div> <div>Amount of Each Receipt this Period</div> <div></div> <div>100.00</div> </div> <div> <input type="checkbox"/> Memo Item </div>	
<div> <div>SUBTOTAL of Receipts This Page (optional).....▶</div> </div>			<div> <div></div> <div>1115.65</div> </div>	
<div> <div>TOTAL This Period (last page this line number only).....▶</div> </div>			<div> <div></div> </div>	