

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)
TEAM GRAHAM, INC.

A. Full Name (Last, First, Middle Initial)
KULLIJIAN, JOHN, , ,

Mailing Address 5803 BRIDLEWOOD DR

City RICHMOND	State TX	Zip Code 77469-7303
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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: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
805.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 13 / 2020

Transaction ID : A8E1489CE44E34BD0ABE

Amount of Each Receipt this Period

20.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
LEININGER, RONALD, , ,

Mailing Address 1413 SW 10TH ST

City FORT LAUDERDALE	State FL	Zip Code 33312
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF	Occupation AUTHOR
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
235.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2020

Transaction ID : AB4271DE79422462EA62

Amount of Each Receipt this Period

30.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
VERPLANCK, JAMES, S., ,

Mailing Address 3525 BRIDGEFIELD DR

City LAKELAND	State FL	Zip Code 33803-5912
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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: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 08 / 2020

Transaction ID : AC5F93BA0A9214263993

Amount of Each Receipt this Period

100.00

☐ Memo Item

150.00

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