

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	

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NAME OF COMMITTEE (In Full)
Marsha for Senate

A. Full Name (Last, First, Middle Initial)
BOWMAN, SUSAN, , ,

Mailing Address 8953 DOE TRAIL CV S

City
CORDOVAState
TNZip Code
38018-7605FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2018

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2018

Transaction ID : SA11A.59515

Amount of Each Receipt this Period

50.00

☐ Memo Item

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRANNEN, JAMES, E. , DR. ,

Mailing Address 1722 MEMORIAL DRIVE

City
CLARKSVILLEState
TNZip Code
37043-4542FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYEDOccupation
DENTIST

Receipt For: 2018

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		10		2018

Transaction ID : SA11A.59039

Amount of Each Receipt this Period

500.00

☐ Memo Item

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRAY, JEFFERY, , ,

Mailing Address 3555 WAGON WHEEL WAY

City
PARK CITYState
UTZip Code
84098-5339FEC ID number of contributing
federal political committee.

C

Name of Employer
MEDQUEST PHARMACYOccupation
CEO

Receipt For: 2018

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		11		2018

Transaction ID : SA11A.59674

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION

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

1550.00

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