

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

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

FOR LINE NUMBER: PAGE 547 OF 2024

(check only one)

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

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NAME OF COMMITTEE (In Full)

SENATE CONSERVATIVES FUND

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

A. CROSBY, SCOTT, , MR.,

Mailing Address 209 SHADECREST DR

City
MAULDIN

State
SC

Zip Code
29662-1741

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CITY OF MAULDIN

Occupation (for Individual)
CITY COUNCILMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 24 / 2019

Transaction ID : A7B16CAE69967499C93E

Amount of Each Receipt this Period

25.00

☐ Memo Item

NOTE:EM/JAMES/TRANS20190930

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

B. HALL, CAROLYN, , MS.,

Mailing Address 4408 W PRICE AVE

City
TAMPA

State
FL

Zip Code
33611-3341

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
RETIRED

Occupation (for Individual)
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2019

Transaction ID : A7B3C59FDF9204180A51

Amount of Each Receipt this Period

10.00

☐ Memo Item

NOTE:EM/BOLDUC/TRANS20190930

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

C. FACHON-KALWEIT, SUZANNE, , ,

Mailing Address 632 WILLOW RD

City
SPRINGFIELD

State
OH

Zip Code
45502-9590

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTED

Occupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2019

Transaction ID : A7B715E57A5DA4D75B67

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/MOONEY/TRANS20190930

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

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

85.00