

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 549 OF 2024  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 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. HICKMAN, SHELIA, , MRS.,**

Mailing Address 11140 MONMOUTH

City  
SAN ANTONIOState  
TXZip Code  
78239-3142FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

115.00

Date of Receipt

M M	D D	Y Y Y Y
09	19	2019

**Transaction ID : A7C04264131E84C3282D**

Amount of Each Receipt this Period

20.00

☐ Memo Item

NOTE:EM/BOLDUC/TRANS20190925

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

**B. ROBERTS, COURTNEY, , MR.,**

Mailing Address 5433 GUILDBROOK RD

City  
CHARLOTTEState  
NCZip Code  
28226-5809FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIREDOccupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M	D D	Y Y Y Y
09	19	2019

**Transaction ID : A7C570477214047DB8A9**

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/BOLDUC/TRANS20190925

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

**C. IRWIN, JAY, , ,**

Mailing Address 569 WAYWARD DR

City  
ANNAPOLISState  
MDZip Code  
21401-6747FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTEDOccupation (for Individual)  
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	D D	Y Y Y Y
09	14	2019

**Transaction ID : A7C58C6CB54A6430B9FC**

Amount of Each Receipt this Period

50.00

☐ Memo Item

NOTE:EM/JAMES/TRANS20190917

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

120.00

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