

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

**SCHELLER FOR CONGRESS, INC.**

Full Name (Last, First, Middle Initial)

**SCHELLER, JOSEPH, B, ,****A.**

Mailing Address 1 N BREAKERS ROW APT 351

City

PALM BEACH

State

FL

Zip Code

33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

5600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	3		2	0	1	9

Transaction ID : SA11AI.4194

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**SCHELLER, MICHAEL, , ,****B.**

Mailing Address 240 MERIWETHER CIRCLE

City

ALTA

State

WY

Zip Code

83414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMMS ASSOCIATES

Occupation

PARTNER

Receipt For: 2020

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

5600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	1	9

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period

5600.00

☐ Memo ItemEARMARKED THROUGH WINRED[SA11AI.4156]:  
SEE REDESIGNATION

Full Name (Last, First, Middle Initial)

**SCHELLER, MICHAEL, , ,****C.**

Mailing Address 240 MERIWETHER CIRCLE

City

ALTA

State

WY

Zip Code

83414

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JAMMS ASSOCIATES

Occupation

PARTNER

Receipt For: 2020

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

2800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	7		2	0	1	9

Transaction ID : SA11AI.4372

Amount of Each Receipt this Period

- 2800.00

☒ Memo Item

REDESIGNATION TO GENERAL

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

8400.00

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