

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 80

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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)  
**MCMURTRY FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ATKINS, THOMAS, , ,**

Mailing Address 1201 EDGECLIFF PLACE  
APT 1061

City CINCINNATI	State OH	Zip Code 45206
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2020

Transaction ID : SA11AI.4368

Amount of Each Receipt this Period

1500.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BARNES, MARY, , ,**

Mailing Address 4240 MARY INGLES HIGHWAY

City HIGHLAND HEIGHTS	State KY	Zip Code 41076
--------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ST. ELIZABETH HEALTHCARE	Occupation PHYSICIAN
--	-------------------------

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 / 16 / 2020

Transaction ID : SA11AI.4177

Amount of Each Receipt this Period

2800.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BEIL, NANCY, , ,**

Mailing Address 1111 RIVER HILL RD

City COVINGTON	State KY	Zip Code 41011
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2020

Transaction ID : SA11AI.4364

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

4800.00