

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 OF 2668

(check only one)

<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)

Collins for Senator

Full Name (Last, First, Middle Initial)

WinRed

A.

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1591341.73

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		17		2020

Transaction ID : A914F590A47224601AE4

Amount of Each Receipt this Period

50.00

☒ Memo Item  
 Intermediary

Total Earmarked through conduit. PAC limit not affected.

B.

Full Name (Last, First, Middle Initial)

Thomson, Barbara, , ,

Mailing Address 40 Gladys St

City

San Francisco

State

CA

Zip Code

94110-5428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired z

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
02		05		2020

Transaction ID : AD80ED12F708746A39B6

Amount of Each Receipt this Period

100.00

☐ Memo Item  
 Earmarked (Non-Directed) through WinRed

C.

Full Name (Last, First, Middle Initial)

WinRed

Mailing Address PO Box 9891

City

Arlington

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1591341.73

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		05		2020

Transaction ID : A039E4767867D4F4B8C4

Amount of Each Receipt this Period

100.00

☒ Memo Item  
 Intermediary

Total Earmarked through conduit. PAC limit not affected.

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

100.00

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