

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 322 OF 3114

☒ 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)

Devin Nunes Campaign Committee

Full Name (Last, First, Middle Initial)

A. Brophy, Mary, Ellen, ,

Mailing Address 1100 beach road

City

Vero Beach

State

FL

Zip Code

32963-3455

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 ▼

550.00

Date of Receipt

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

Transaction ID : AC30A3DAAD08B4F9CBDA

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Broselow, Robert, J., Dr.,

Mailing Address 299 County Road 130

City

Southland

State

TX

Zip Code

79364-0489

FEC ID number of contributing
federal political committee.

C

Name of Employer

WellPath

Occupation

Physician

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 31 2019

Transaction ID : AE0945E1C06B74058A36

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. Broselow, Robert, J., Dr.,

Mailing Address 299 County Road 130

City

Southland

State

TX

Zip Code

79364-0489

FEC ID number of contributing
federal political committee.

C

Name of Employer

WellPath

Occupation

Physician

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 29 2019

Transaction ID : AF4F248958EA9410E99A

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

200.00

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