

**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)

Texans for Senator John Cornyn Inc

Full Name (Last, First, Middle Initial)

SHELTON, GEORGE, P., MR., III

Mailing Address 4124 KINGSFERRY

City  
ARLINGTONState  
TXZip Code  
76016-3636FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2020

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4075.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2020

Transaction ID : SA11A.233531

Amount of Each Receipt this Period

50.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

SHELTON, GEORGE, P., MR., III

Mailing Address 4124 KINGSFERRY

City  
ARLINGTONState  
TXZip Code  
76016-3636FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIREDOccupation  
RETIRED

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4075.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		21		2020

Transaction ID : SA11A.233531B

Amount of Each Receipt this Period

- 50.00

☒ Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1410373.39

Date of Receipt

M M	/	D D	/	Y Y Y Y
01		20		2020

Transaction ID : SA11C.2332183192

Amount of Each Receipt this Period

40.00

☒ Memo Item  
CONTRIBUTION
WINRED SEE BELOW FOR DONORS REQUIRING  
ITEMIZATION; SEE ATTRIBUTION BELOW FOR ALL  
DONORS ABOVE ITEMIZATION

0.00

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

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