

**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)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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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)  
**Ted Cruz for Senate**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>DAVIS, INA, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 04 / 2018	
Mailing Address 93 STONE CLIFF CIR			Transaction ID : SA11A.2030375	
City GOLDEN	State CO	Zip Code 80403-9406	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>DAVISON, JAMES, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2018	
Mailing Address 4897HWY97E			Transaction ID : SA11A.2034549	
City GONZALES	State TX	Zip Code 78629-	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer SELF EMPLOYED		Occupation RANCHER		
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1100.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>DAVIS, JAMES, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2018	
Mailing Address 3312 N UNIVERSITY DRIVE SUITE J			Transaction ID : SA11A.2051676	
City NACOGDOCHES	State TX	Zip Code 75965-2636	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Memo Item CONTRIBUTION		
Name of Employer INTERVENTIONAL PAIN MANAGEMENT, PA		Occupation DOCTOR OF MEDICINE		
Receipt For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date 1200.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			450.00	
<b>TOTAL</b> This Period (last page this line number only) .....				

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