

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

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

FOR LINE NUMBER: PAGE 37 OF 46

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

BHFS-E, PC PAC (Brownstein Hyatt Farber Schreck Political Action Committee)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Whonder, Carmencita, N., ,

Mailing Address 1155 F St NW
Ste 1200

City
Washington

State
DC

Zip Code
20004-1329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brownstein Hyatt Farber Schreck

Occupation (for Individual)

Policy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : 2020022711575-48

Amount of Each Receipt this Period

225.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Wild, Brian, , ,

Mailing Address 1155 F St NW
Ste 1200

City
Washington

State
DC

Zip Code
20004-1329

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Brownstein Hyatt Farber Schreck

Occupation (for Individual)

Policy Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 28 / 2020

Transaction ID : 2020022711575-101

Amount of Each Receipt this Period

325.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

550.00

28590.44