

**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)

Devin Nunes Campaign Committee

Full Name (Last, First, Middle Initial)

Dwyer, Linda, , ,

Mailing Address 2279 Springfield Center Rd

City

Akron

State

OH

Zip Code

44312-1961

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2020D D / Y Y Y Y Y  
28 / 2020Y Y Y Y Y  
2020

Transaction ID : AF054560AEF2341F8B30

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dyckman, Michael, , ,

Mailing Address 4 majestic court

4 majestic court

City

Huntington Station

State

NY

Zip Code

11746-4864

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

ATTORNEY

Receipt For: 2020

☒ Primary☐ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 20 / 2020D D / Y Y Y Y Y  
20 / 2020Y Y Y Y Y  
2020

Transaction ID : AF406786AB23448DD9C2

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Dyckman, Michael, , ,

Mailing Address 4 majestic court

4 majestic court

City

Huntington Station

State

NY

Zip Code

11746-4864

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

ATTORNEY

Receipt For: 2020

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 05 / 2020D D / Y Y Y Y Y  
05 / 2020Y Y Y Y Y  
2020

Transaction ID : A10F861C6AEA5476ABE8

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

150.00

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