

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

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

FOR LINE NUMBER: PAGE 67 OF 805

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Giffords PAC

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

A. Schultz, Debra, , ,

Mailing Address 4079 Cumberland Ct

City

Commerce Township

State

MI

Zip Code

48390-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Westin Book Cadillac Hotel

Occupation (for Individual)

Hotel General Manager

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 1102120

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Non-Contribution Account; Earmarked Contribution:
See Below

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

B. ACT BLUE

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer (for Individual)

Occupation (for Individual)

Conduit total listed in Agg. field

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

367172.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2018

Transaction ID : 1102120E

Amount of Each Receipt this Period

50.00

☒ Memo Item

Note: Above Contribution earmarked through this
organization.

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

C. Wilson, Kendrick, , ,

Mailing Address 1 N 5Th Ave
Apt 616

City

Tucson

State

AZ

Zip Code

85701-1822

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Pascua Yaqui Tribe

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary☐ General☐ Other (specify)

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		22		2018

Transaction ID : 1103020

Amount of Each Receipt this Period

50.00

☐ Memo Item

* Non-Contribution Account; Earmarked Contribution:
See Below

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

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

100.00