

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

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

FOR LINE NUMBER: PAGE 80 OF 155

(check only one)

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

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NAME OF COMMITTEE (In Full)

Renacci for Ohio Victory Fund

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

A. SMUCKER, JENNIFER, , ,

Mailing Address 5350 DEERFIELD AVENUE NW

City  
NORTH LAWRENCE

State  
OH

Zip Code  
44666-9617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2018

Transaction ID : SA11A.33954

Amount of Each Receipt this Period

17500.00

☐ Memo Item  
CONTRIBUTION

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

B. SMUCKER, TIM, , ,

Mailing Address 5350 DEERFIELD AVENUE NW

City  
NORTH LAWRENCE

State  
OH

Zip Code  
44666-9617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JM SMUCKERS CO.

Occupation (for Individual)  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2018

Transaction ID : SA11A.33953

Amount of Each Receipt this Period

17500.00

☐ Memo Item  
CONTRIBUTION

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

C. SULLIVAN, BARBARA, , ,

Mailing Address 27320 LAKE ROAD

City  
BAY VILLAGE

State  
OH

Zip Code  
44140-2070

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOT EMPLOYED

Occupation (for Individual)  
NOT EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 04 / 2018

Transaction ID : SA11A.33968

Amount of Each Receipt this Period

10000.00

☐ Memo Item  
CONTRIBUTION

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

45000.00

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