

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

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

FOR LINE NUMBER: PAGE 11 OF 33319

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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)

**SCALISE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**BASKIN, DIAN, , ,**

**A.** Mailing Address 665 TRICKHAMBRIDGE ROAD

City  
BRANDON

State  
MS

Zip Code  
39042-9225

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 ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 01 2020

Transaction ID : SA11A.479814

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BECKWITH, ART, , ,**

**B.** Mailing Address P.O. BOX 1029

City  
PROGRESO

State  
TX

Zip Code  
78579-1029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
FARMER

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 01 2020

Transaction ID : SA11A.480302

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)

**BENNETT, PATRICIA, , ,**

**C.** Mailing Address 219 MAYLUTH RD

City  
JOHNSTOWN

State  
PA

Zip Code  
15904-2634

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CONEMAUGH MEMORIAL HOSPITAL

Occupation  
OCCUPATIONAL THERAPY ASSISTANT

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
01 01 2020

Transaction ID : SA11A.479906

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

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

150.00

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