

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)

GALITA, DAN, , ,

A.

Mailing Address 9241 HIGHLAND DRIVE

City

BRECKSVILLE

State

OH

Zip Code

44141-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

CCMEO

Occupation

PHYSICIAN

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 16 2020

Transaction ID : SA11A.502374

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

B.

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4892376.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 22 2020

Transaction ID : SA11C.50155321696

Amount of Each Receipt this Period

100.00

☒ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

GALITA, DAN, , ,

C.

Mailing Address 9241 HIGHLAND DRIVE

City

BRECKSVILLE

State

OH

Zip Code

44141-2605

FEC ID number of contributing
federal political committee.

C

Name of Employer

CCMEO

Occupation

PHYSICIAN

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 16 2020

Transaction ID : SA11A.502375

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

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

200.00

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