

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

SCALISE FOR CONGRESS

Full Name (Last, First, Middle Initial)

GILLIGAN, RYAN, , ,

Mailing Address 4009 ALBERTA AVE

City

PASADENA

State

MD

Zip Code

21122-2222

FEC ID number of contributing
federal political committee.

C

Name of Employer

B4HEALTH

Occupation

SOFTWARE ENGINEER

Receipt For: 2020

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	0

Transaction ID : SA11A.522217

Amount of Each Receipt this Period

100.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name (Last, First, Middle Initial)

WINRED

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
0	2		0	3		2	0	2	0

Transaction ID : SA11C.52136941751

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)

PAYNE, CHARLES, , ,

Mailing Address 7226 RAWLINS LANE

City

FRISCO

State

TX

Zip Code

75036-4441

FEC ID number of contributing
federal political committee.

C

Name of Employer

INTERX TECHNOLOGIES

Occupation

VP MEDICAL DEVICE DEVELOPMENT MFG

Receipt For: 2020

☒

Primary

☐

General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	9		2	0	2	0

Transaction ID : SA11A.522218

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)..... ▶