

# **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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>WINRED</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 19 / 2020		
Mailing Address PO BOX 9891			<b>Transaction ID : SA11C.55195871155</b>		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period _____ 5.00		
FEC ID number of contributing federal political committee. <b>C</b> C00694323		Name of Employer Occupation			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 4892376.13			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>FEASELMAN, CHARLES, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 13 / 2020		
Mailing Address 9740 EPHEUS CH RD			<b>Transaction ID : SA11A.551992</b>		
City VILLA RICA	State GA	Zip Code 30180-4139	Amount of Each Receipt this Period _____ 5.00		
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Occupation RETIRED RETIRED			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 960.00			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>WINRED</b>			Date of Receipt M M / D D / Y Y Y Y Y 02 / 19 / 2020		
Mailing Address PO BOX 9891			<b>Transaction ID : SA11C.55195871156</b>		
City ARLINGTON	State VA	Zip Code 22219-1891	Amount of Each Receipt this Period _____ 5.00		
FEC ID number of contributing federal political committee. <b>C</b> C00694323		Name of Employer Occupation			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 4892376.13			
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			_____ 5.00		
<b>TOTAL</b> This Period (last page this line number only)..... ▶			_____		