

# **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**

A. Full Name (Last, First, Middle Initial)  
**AJALA, JOACHIM, , ,**  
Mailing Address 561 SUNBURY LANE

City State Zip Code  
PROSPER TX 75078-0678

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HEARTLAND DENTAL

Occupation  
DENTIST

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 26 2020

Transaction ID : SA11A.580534

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

B. Full Name (Last, First, Middle Initial)  
**WINRED**  
Mailing Address PO BOX 9891

City State Zip Code  
ARLINGTON VA 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  
03 03 2020

Transaction ID : SA11C.57875399889

Amount of Each Receipt this Period

35.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

C. Full Name (Last, First, Middle Initial)  
**TESTANI, JOSEPH, , ,**  
Mailing Address 90 BAY ST LANDING  
81

City State Zip Code  
STATEN ISLAND NY 10301-2664

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DOWNSTATE MEDICAL CENTER

Occupation  
HEALTHCARE ADMINISTRATION

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 26 2020

Transaction ID : SA11A.580540

Amount of Each Receipt this Period

35.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WINRED

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

70.00

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