

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)

HUMPHREY, PATRICIA, , ,**A.**

Mailing Address P.O. BOX 1461

City

CONCORD

State

NH

Zip Code

03302-1461

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 ▼

4600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	0

Transaction ID : SA11A.602980

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION
EARMARKED FROM WINRED; SEE
REDESIGNATION

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
0	3		1	0		2	0	2	0

Transaction ID : SA11C.601367122343

Amount of Each Receipt this Period

250.00

☒ Memo Item
 CONTRIBUTION
SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

MCLEAN, SCOTT, , ,**C.**

Mailing Address 2061 S ROBB WAY

City

DENVER

State

CO

Zip Code

80227-1963

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

BUSINESS OWNER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	2	0

Transaction ID : SA11A.602981

Amount of Each Receipt this Period

250.00

☐ Memo Item
 CONTRIBUTION
EARMARKED FROM WINRED; SEE
REDESIGNATION**SUBTOTAL** of Receipts This Page (optional)..... ▶

500.00

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