

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

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

FOR LINE NUMBER: PAGE 324 OF 2158

(check only one)

<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	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JOHN JAMES FOR SENATE, INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>COOPER, SUZANNE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 18 / 2019	
Mailing Address 1555 BELLAIRE DR			<b>Transaction ID : SA11AI.118882</b>	
City CASPER	State WY	Zip Code 82604	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer SELF-EMPLOYED		Occupation FARM	<input type="checkbox"/> Memo Item	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 350.00	<input type="checkbox"/> Memo Item	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>COOPER, SUZANNE, , ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2019	
Mailing Address 1555 BELLAIRE DR			<b>Transaction ID : SA11AI.108251</b>	
City CASPER	State WY	Zip Code 82604	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer SELF-EMPLOYED		Occupation FARM	<input type="checkbox"/> Memo Item	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 450.00	<input type="checkbox"/> Memo Item	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>COOTS, OVA, M, ,</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 07 / 2019	
Mailing Address 237 MONFORD RD			<b>Transaction ID : SA11AI.117421</b>	
City MORGANTOWN	State KY	Zip Code 42261	Amount of Each Receipt this Period _____ 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item	
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED	<input type="checkbox"/> Memo Item	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 250.00	<input type="checkbox"/> Memo Item	
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			_____ 300.00	
<b>TOTAL</b> This Period (last page this line number only)..... ▶			_____	