

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)
McSally For Senate Inc

A. Full Name (Last, First, Middle Initial)
WADE, LARRY, , ,

Mailing Address P.O. BOX 1685

City State Zip Code
 TROUT CREEK MT 59874-1685

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 NONE RETIRED

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

Election Cycle-to-Date ▼
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 15 2019

Transaction ID : SA11A.650383

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WADLE, RONALD, W., DR.,

Mailing Address 4008 VENDOME DR.

City State Zip Code
 AUBURN HILLS MI 48326-1866

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF EMPLOYED PHYSICIAN

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

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 12 2019

Transaction ID : SA11A.625767

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WADLE, RONALD, W., DR.,

Mailing Address 4008 VENDOME DR.

City State Zip Code
 AUBURN HILLS MI 48326-1866

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 SELF EMPLOYED PHYSICIAN

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

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 14 2019

Transaction ID : SA11A.641422

Amount of Each Receipt this Period

100.00

☐ Memo Item
 CONTRIBUTION

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

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

250.00