

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 922

<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.

Full Name (Last, First, Middle Initial)

DANSE, ILENE, , ,**A.**

Mailing Address PO BOX 578

City
NOVATOState
CAZip Code
94948-0578FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2018

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.188058

Amount of Each Receipt this Period

100.00

☐ Memo ItemEARMARKED THROUGH SENATE CONSERVATIVES
FUND [SA11AI.186393]

Full Name (Last, First, Middle Initial)

DAVIDGE, NICHOLAS, , ,**B.**

Mailing Address PO BOX 330

City
FRANCONIAState
NHZip Code
03580FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIREDOccupation
RETIRED

Receipt For: 2018

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			05			2018			

Transaction ID : SA11AI.186146

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

DAVIS, WILLIAM, , ,**C.**

Mailing Address 264 BARTON SHORE DR

City
ANN ARBORState
MIZip Code
48105FEC ID number of contributing
federal political committee.

C

Name of Employer
ARBOR SPRINGS WATER COOccupation
ENTREPRENEUR

Receipt For: 2018

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			26			2018			

Transaction ID : SA11AI.184731

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

1100.00
