

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

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

FOR LINE NUMBER: PAGE 221 OF 415

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Giffords PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Lilley, Cynthia, , ,

Mailing Address 3011 Cunningham Dr

City  
AlexandriaState  
VAZip Code  
22309-2206FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NoneOccupation (for Individual)  
Not Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : 1557985

Amount of Each Receipt this Period

50.00

☐ Memo Item

| Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Lincoln, Gregory, , ,

Mailing Address 2585 Temple Hills Dr

City  
Laguna BeachState  
CAZip Code  
92651-2658FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Self EmployedOccupation (for Individual)  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			2	6			2	0	2	0		

Transaction ID : 1565008

Amount of Each Receipt this Period

250.00

☐ Memo Item

| Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Lionetti, Denise, , ,

Mailing Address 607 Paradise Ct

City  
GaithersburgState  
MDZip Code  
20877-1234FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PATHOccupation (for Individual)  
International Public Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	5			0	7			2	0	2	0		

Transaction ID : 1558375

Amount of Each Receipt this Period

500.00

☐ Memo Item

| Non-Contribution Account

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

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

800.00