

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

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

FOR LINE NUMBER: PAGE 230 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. Manley, Kathryn, , ,

Mailing Address 151 Lake Dr S

City  
West IslipState  
NYZip Code  
11795-3832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information RequestedOccupation (for Individual)  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 18    | / | 2020        |

Transaction ID : 1561672

Amount of Each Receipt this Period

100.00

☐ Memo Item

| Non-Contribution Account

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

B. Manley, Kathryn, , ,

Mailing Address 151 Lake Dr S

City  
West IslipState  
NYZip Code  
11795-3832FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Information RequestedOccupation (for Individual)  
Information Requested

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 |
| 05    | / | 21    | / | 2020        |

Transaction ID : 1562712

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

C. Mann, John, , ,

Mailing Address 230 Nottingham HI

City  
AnnapolisState  
MDZip Code  
21405-2006FEC 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 ▼

500.00

Date of Receipt

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 05    | / | 22    | / | 2020        |

Transaction ID : 1570788

Amount of Each Receipt this Period

500.00

☐ Memo Item\* Non-Contribution Account; Earmarked Contribution:  
See Below

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

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

650.00