

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

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

FOR LINE NUMBER: PAGE 18 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

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

A. SMITH, THOMAS, S., ,

Mailing Address 5619 BORDLEY DR

City  
HOUSTON

State  
TX

Zip Code  
77056-2329

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 23 / 2018

Transaction ID : SA11A.3230

Amount of Each Receipt this Period

12500.00

☐ Memo Item  
CONTRIBUTION

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

B. SHERMAN, JEAN OUTLAW, , ,

Mailing Address 254 COLLEGE LANE

City  
MOBILE

State  
AL

Zip Code  
36608-1421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HOMEMAKER

Occupation (for Individual)  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 24 / 2018

Transaction ID : SA11A.3231

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

C. FRALIN, W. HEYWOOD, , ,

Mailing Address P O BOX 29600

City  
ROANOKE

State  
VA

Zip Code  
24018-0796

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEDICAL FACILITIES OF AMERICA, INC.

Occupation (for Individual)  
CHAIRMAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 29 / 2018

Transaction ID : SA11A.3240

Amount of Each Receipt this Period

25000.00

☐ Memo Item  
CONTRIBUTION

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

42500.00

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