

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

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

FOR LINE NUMBER: PAGE 38 OF 178

(check only one)

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

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)

PERDUE VICTORY INC

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

A. DORMAN, DAVID, WYATT, MR.,

Mailing Address 423 BRAZILIAN AVE

City
PALM BEACH

State
FL

Zip Code
33480

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CVS HEALTH

Occupation (for Individual)
CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.11037

Amount of Each Receipt this Period

7900.00

☐ Memo Item

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

B. DORMAN, SUSAN, P, MRS.,

Mailing Address 423 BRAZILIAN AVE

City
PALM BEACH

State
FL

Zip Code
33480

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 ▼

9500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 30 / 2019

Transaction ID : SA11AI.11038

Amount of Each Receipt this Period

9500.00

☐ Memo Item

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

C. DOWLING, W, HAMPTON, ,

Mailing Address 961 PARK PLACE

City
MACON

State
GA

Zip Code
31201

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
EAGLE GUN RANGE

Occupation (for Individual)
OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2019

Transaction ID : SA11AI.10633

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

17900.00

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