

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

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

FOR LINE NUMBER: PAGE 227 OF 615

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

**Bill Cassidy for US Senate**

Full Name (Last, First, Middle Initial)

**GREMILLION, RICHARD, A., ,**

**A.**

Mailing Address 316 PLATER DR.

City

THIBODAUX

State

LA

Zip Code

70301-5612

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

EQUIPMENT RENTAL

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2020

Transaction ID : SA11A.61290

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WIN RED

Full Name (Last, First, Middle Initial)

**WIN RED**

**B.**

Mailing Address PO BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing  
federal political committee.

C

C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

421231.19

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2020

Transaction ID : SA11C.612332138

Amount of Each Receipt this Period

100.00

☒ Memo Item  
CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS  
ABOVE ITEMIZATION THRESHOLD

Full Name (Last, First, Middle Initial)

**MITCHELL, MATTHEW, C., DR.,**

**C.**

Mailing Address 805 FARMINGTON DRIVE

City

LAFAYETTE

State

LA

Zip Code

70503-8428

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ANESTHESIOLOGY AND PAIN CONSULTANT

Occupation

PHYSICIAN

Receipt For: 2020

☐ Primary ☐ General  
☒ Other (specify) ▼

RUNOFF

Election Cycle-to-Date ▼

6175.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 19 2020

Transaction ID : SA11A.61291

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

EARMARKED FROM WIN RED

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

125.00

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