

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

**DEVIN NUNES CAMPAIGN COMMITTEE**

Full Name (Last, First, Middle Initial)

**RADLEY, JAMES, A., ,****A.**

Mailing Address 10719 E RIMROCK DR

City

SCOTTSDALE

State

AZ

Zip Code

85255-7184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 28 / 2019D D / Y Y Y Y Y  
28 / 2019Y Y Y Y Y  
2019

Transaction ID : AED1D1D3DA32042C8814

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**RADLEY, JAMES, A., ,****B.**

Mailing Address 10719 E RIMROCK DR

City

SCOTTSDALE

State

AZ

Zip Code

85255-7184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 28 / 2019D D / Y Y Y Y Y  
28 / 2019Y Y Y Y Y  
2019

Transaction ID : AD29B906B0AD84295A9E

Amount of Each Receipt this Period

2800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**RAFF, GAROLD, , , JR.****C.**

Mailing Address 16095 SAINT CROIX CIR

City

HUNTINGTON BEACH

State

CA

Zip Code

92649-2047

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2020

☒ Primary  
☐ Other (specify) ▼
☐ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 28 / 2019D D / Y Y Y Y Y  
28 / 2019Y Y Y Y Y  
2019

Transaction ID : AB520689A58134B82AD9

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

4050.00

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