

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

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

FOR LINE NUMBER: PAGE 25 OF 55

(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)

**Team McHenry**

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

**A. NEWCOMB, CHARLES, , ,**

Mailing Address 311 WEST 50TH STREET  
APT. 7F

City  
NEW YORK

State  
NY

Zip Code  
10019-8418

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SIGNATURE BANK

Occupation (for Individual)

BANKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2019

Transaction ID : SA11A.24239

Amount of Each Receipt this Period

2000.00

☐ Memo Item  
CONTRIBUTION

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

**B. OSBORNE, JOSEPH, DARREN, ,**

Mailing Address 431 6TH ST NW

City  
HICKORY

State  
NC

Zip Code  
28601-3501

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SELF

Occupation (for Individual)

ENTREPRENEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 04 / 2019

Transaction ID : SA11A.24581

Amount of Each Receipt this Period

5400.00

☐ Memo Item  
CONTRIBUTION

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

**C. PALACIOS, LAURA, , ,**

Mailing Address 108 EAST NECK ROAD

City  
HUNTINGTON

State  
NY

Zip Code  
11743-1513

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

SIGNATURE BANK

Occupation (for Individual)

GROUP DIRECTOR

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  
10 / 08 / 2019

Transaction ID : SA11A.24216

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

7900.00