

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
BRINSON FOR SENATE

Full Name (Last, First, Middle Initial)

BRINSON, R RANDOLPH RANDY MD, , ,

Mailing Address PO BOX 241351

City

MONTGOMERY

State

AL

Zip Code

36124

FEC ID number of contributing
federal political committee.

C S8AL00316

Name of Employer

Digestive Disease Assoc PC

Occupation

Physician, Businessman, President

Receipt For: 2017

☐

Primary

☐

General

☒

Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

238745.32

Date of Receipt

MM / DD / YYYY
11 / 09 / 2017

Transaction ID : SA11D.4615

Amount of Each Receipt this Period

10000.00

☐ Memo Item

Note:Debt Retirement

Full Name (Last, First, Middle Initial)

BRINSON, R RANDOLPH RANDY MD, , ,

Mailing Address PO BOX 241351

City

MONTGOMERY

State

AL

Zip Code

36124

FEC ID number of contributing
federal political committee.

C S8AL00316

Name of Employer

Digestive Disease Assoc PC

Occupation

Physician, Businessman, President

Receipt For: 2017

☐

Primary

☐

General

☒

Other (specify) ▼

Special-Primary

Election Cycle-to-Date ▼

15000.00

Date of Receipt

MM / DD / YYYY
12 / 18 / 2017

Transaction ID : SA11D.4603

Amount of Each Receipt this Period

15000.00

☐ Memo Item

Note:Debt Retirement

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

MM / DD / YYYY

Amount of Each Receipt this Period

☐ Memo Item

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

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

25000.00

25000.00