

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

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

FOR LINE NUMBER: PAGE 37 OF 61  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**ConocoPhillips SPIRIT PAC**

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

**A. Huff, Michael, L, ,**

Mailing Address 3119 Montrose Dr

City  
Bartlesville

State  
OK

Zip Code  
74006-5850

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONOCOPHILLIPS COMPANY

Occupation (for Individual)  
IS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

**Transaction ID : 201910179135-152**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. Huff, Michael, L, ,**

Mailing Address 3119 Montrose Dr

City  
Bartlesville

State  
OK

Zip Code  
74006-5850

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONOCOPHILLIPS COMPANY

Occupation (for Individual)  
IS MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 31 / 2019

**Transaction ID : 201910319135-156**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**C. Hyde, Scott, A, , II**

Mailing Address 1216 Wirt Rd

City  
Houston

State  
TX

Zip Code  
77055-6853

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CONOCOPHILLIPS COMPANY

Occupation (for Individual)  
PRODUCTION ENGINEER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 10 / 31 / 2019

**Transaction ID : 201910319135-142**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

125.00