

# **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)

PAGE 13 OF 72

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

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)  
Latta for Congress

A. Full Name (Last, First, Middle Initial)  
Hess, Douglas, S., Mr., M.D.  
Mailing Address 1362 Conneaut Avenue

City State Zip Code  
Bowling Green OH 43402-2126

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Retired Physician

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 01 2019

Transaction ID : A58D001AD757248B5B9D

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)  
Iott, Christine, , Mrs.,  
Mailing Address 5245 Keener Road

City State Zip Code  
Monclova OH 43542-9453

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
NA Homemaker

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 01 2019

Transaction ID : AD1DC0B1C23394D7D839

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)  
Iott, Richard Bradley, B, Mr.,  
Mailing Address 5245 Keener Rd.

City State Zip Code  
Monclova OH 43542-9453

FEC ID number of contributing  
federal political committee.

C

Name of Employer Occupation  
Self Investor

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 01 2019

Transaction ID : ADF3E32FB834D41F2AB5

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

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

1100.00