

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 321 OF 627

☒ 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)
Cory Gardner for Senate

A. Full Name (Last, First, Middle Initial)
WIENS, LEWIS, , ,
Mailing Address 148 LAKESHORE DR. W

City State Zip Code
LAKE QUIVIRA KS 66217-8694

FEC ID number of contributing
federal political committee.

C

Name of Employer
TRUE NORTH HOTELS

Occupation
HOTELIER

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

Election Cycle-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 01 2019

Transaction ID : SA11A.70221

Amount of Each Receipt this Period

1500.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILHELM, JOSEPH, , ,
Mailing Address 884 PEBBLEBROOK

City State Zip Code
EAST LANSING MI 48823-2164

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOEYECARE

Occupation
OPHTHALMOLOGIST

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

Election Cycle-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 30 2019

Transaction ID : SA11A.70996

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILHELM, JOSEPH, , ,
Mailing Address 884 PEBBLEBROOK

City State Zip Code
EAST LANSING MI 48823-2164

FEC ID number of contributing
federal political committee.

C

Name of Employer
LOEYECARE

Occupation
OPHTHALMOLOGIST

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

Election Cycle-to-Date ▼
375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 30 2019

Transaction ID : SA11A.73600

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

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

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

1550.00