

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Mast for Congress**

Full Name (Last, First, Middle Initial)

**DAVIS, WILLIAM, H., MR.,****A.**

Mailing Address 21 WINDING WAY

City

VERONA

State

PA

Zip Code

15147-3888

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			18			2018			

Transaction ID : SA11A.232104

Amount of Each Receipt this Period

50.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DAY, MAX, W., LT. COL.,****B.**

Mailing Address 8210 KELSO DR.

City

PALM BEACH GARDENS

State

FL

Zip Code

33418-6018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

251.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2018			

Transaction ID : SA11A.236860

Amount of Each Receipt this Period

150.00

☐ Memo Item  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DE JONG, PETER, , ,****C.**

Mailing Address 100 HOLLAND GLN

City

ESCONDIDO

State

CA

Zip Code

92026-1354

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INFORMATION REQUESTED PER BEST EFF

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For: 2018

☐ Primary  
☐ Other (specify) ▼
☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2018			

Transaction ID : SA11A.232932

Amount of Each Receipt this Period

500.00

☐ Memo Item  
 CONTRIBUTION
**SUBTOTAL** of Receipts This Page (optional)..... ▶

700.00

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