

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

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

FOR LINE NUMBER: PAGE 6 OF 356

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Congressional Leadership Fund**

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

**A. SCRIVNER, DOUGLAS, G., MR.,**

Mailing Address 25461 WEST FREMONT ROAD

City  
LOS ALTOS HILLS

State  
CA

Zip Code  
94022-3538

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 01 / 2018

Transaction ID : SA11A.3772

Amount of Each Receipt this Period

15000.00

☐ Memo Item  
CONTRIBUTION

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

**B. TAYLOR, MICHAEL, , ,**

Mailing Address 2251 BLOUNT ROAD

City  
POMPANO BEACH

State  
FL

Zip Code  
33069-5114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CURRENT BUILDERS

Occupation (for Individual)  
CONSTRUCTION

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 / 01 / 2018

Transaction ID : SA11A.3500

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

**C. GONZALEZ, RICHARD, , ,**

Mailing Address 738 WEST SCHUBERT AVENUE

City  
CHICAGO

State  
IL

Zip Code  
60614-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOYOLA UNIVERSITY MEDICAL CENTER

Occupation (for Individual)  
SURGEON

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 02 / 2018

Transaction ID : SA11A.3510

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

16500.00