

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 389 OF 1789

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

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NAME OF COMMITTEE (In Full)
Ted Cruz for Senate

| | | | | |
|---|-------------|------------------------------------|--|--|
| A. Full Name (Last, First, Middle Initial) DIAZ, MARIA, C., MRS., | | | Date of Receipt M M / D D / Y Y Y Y Y 10 15 2019 | |
| Mailing Address 4911 MCKINNEY STREET | | | Transaction ID : SA11A.2445418 | |
| City HOUSTON | State TX | Zip Code 77023-1327 | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | | Memo Item CONTRIBUTION | | |
| Name of Employer METHODIST HOSPITAL | | Occupation HOUSEKEEPER | | |
| Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 300.00 | | |
| B. Full Name (Last, First, Middle Initial) DIAZ, MARIA, C., MRS., | | | Date of Receipt M M / D D / Y Y Y Y Y 11 15 2019 | |
| Mailing Address 4911 MCKINNEY STREET | | | Transaction ID : SA11A.2460572 | |
| City HOUSTON | State TX | Zip Code 77023-1327 | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | | Memo Item CONTRIBUTION | | |
| Name of Employer METHODIST HOSPITAL | | Occupation HOUSEKEEPER | | |
| Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 300.00 | | |
| C. Full Name (Last, First, Middle Initial) DIAZ, MARIA, C., MRS., | | | Date of Receipt M M / D D / Y Y Y Y Y 12 16 2019 | |
| Mailing Address 4911 MCKINNEY STREET | | | Transaction ID : SA11A.2471571 | |
| City HOUSTON | State TX | Zip Code 77023-1327 | Amount of Each Receipt this Period 50.00 | |
| FEC ID number of contributing federal political committee. C | | Memo Item CONTRIBUTION | | |
| Name of Employer METHODIST HOSPITAL | | Occupation HOUSEKEEPER | | |
| Receipt For: 2024 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 300.00 | | |
| SUBTOTAL of Receipts This Page (optional)..... | | | 150.00 | |
| TOTAL This Period (last page this line number only)..... | | | | |