

# **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 1400 OF 1789

☒ 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)  
**Ted Cruz for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**SMITH, PATRICIA, M., ,**

Mailing Address 876 COUNTY ROAD 146

City BURNS	State WY	Zip Code 82053-9810
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BAR-S SERVICES, INC.	Occupation OWNER
--	---------------------

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 16 2019

Transaction ID : SA11A.2471661

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SMITH, PATRICIA, M., ,**

Mailing Address 876 COUNTY ROAD 146

City BURNS	State WY	Zip Code 82053-9810
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer BAR-S SERVICES, INC.	Occupation OWNER
--	---------------------

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 18 2019

Transaction ID : SA11A.2472127

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SMITH, REBECCA, , ,**

Mailing Address 444 BELLE POINTE DR

City MADISONVILLE	State LA	Zip Code 70447-3161
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 20 2019

Transaction ID : SA11A.2446739

Amount of Each Receipt this Period

50.00

☐ Memo Item  
CONTRIBUTION

250.00

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

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