

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

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

FOR LINE NUMBER: PAGE 12 OF 29

(check only one)

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

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NAME OF COMMITTEE (In Full)

Team McHenry

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

A. PATRICK, JANICE, M., ,

Mailing Address PO BOX 1691

City  
KINGS MOUNTAIN

State  
NC

Zip Code  
28086-1691

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
PATRICK YARN MILLS

Occupation (for Individual)  
MANAGER

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 / 24 / 2017

Transaction ID : SA11A.1603

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

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

B. QUAYLE, BENJAMIN, , ,

Mailing Address 4026 E. ST. JOSEPH WAY

City  
PHOENIX

State  
AZ

Zip Code  
85018-1102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HHQVENTURES

Occupation (for Individual)  
PARTNER

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 / 27 / 2017

Transaction ID : SA11A.1604

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

C. REPLOGLE, STEPHEN, , ,

Mailing Address 1409 LAWRENCE ST. NE

City  
WASHINGTON

State  
DC

Zip Code  
20017-2912

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COVE STRATEGIES

Occupation (for Individual)  
CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 08 / 2017

Transaction ID : SA11A.1610

Amount of Each Receipt this Period

5000.00

☐ Memo Item  
CONTRIBUTION

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

6500.00

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