

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse 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)

JOHN JAMES FOR SENATE, INC.

Full Name (Last, First, Middle Initial)

MILLS, WILLIAM, , ,**A.**

Mailing Address 3890 MEDITERRANEAN CT

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

389.48

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 09 / 2020D D / Y Y Y Y Y
09 / 2020Y Y Y Y Y
2020

Transaction ID : SA11AI.196825

Amount of Each Receipt this Period

70.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.16848]

Full Name (Last, First, Middle Initial)

MILLS, WILLIAM, , ,**B.**

Mailing Address 3890 MEDITERRANEAN CT

City

JACKSONVILLE

State

FL

Zip Code

32223

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

459.48

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 09 / 2020D D / Y Y Y Y Y
09 / 2020Y Y Y Y Y
2020

Transaction ID : SA11AI.230301

Amount of Each Receipt this Period

70.00

☐ Memo Item

EARMARKED THROUGH WINRED [SA11AI.164874]

Full Name (Last, First, Middle Initial)

MINAIDES, MICHAEL, , ,**C.**

Mailing Address 272 SHORT HILLS DR

City

BRIDGEWATER

State

NJ

Zip Code

08807-1530

FEC ID number of contributing
federal political committee.

C

Name of Employer

AT&T

Occupation

LAWYER

Receipt For: 2020

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

834.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 18 / 2020D D / Y Y Y Y Y
18 / 2020Y Y Y Y Y
2020

Transaction ID : SA11AI.243504

Amount of Each Receipt this Period

500.00

☐ Memo Item

EARMARKED THROUGH SCF [SA11AI.164885]

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

640.00

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