

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

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

FOR LINE NUMBER: PAGE 29 OF 176

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PERDUE VICTORY INC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CHASTAIN, RICKY, H, ,**

Mailing Address **PO BOX 1908**

City  
**ATHENS**

State  
**GA**

Zip Code  
**30603**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**CHASTAIN AND ASSOCIATES**

Occupation (for Individual)  
**INSURANCE AGENT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**09 / 20 / 2019**

**Transaction ID : SA11Al.11560**

Amount of Each Receipt this Period

**1000.00**

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. CHEEK, MICHAEL, V, ,**

Mailing Address **2875 CASA DEL RIO TER**

City

**JACKSONVILLE**

State

**FL**

Zip Code

**32257**

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 ▼

**250.00**

Date of Receipt

**09 / 30 / 2019**

**Transaction ID : SA11Al.11696**

Amount of Each Receipt this Period

**250.00**

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. CHESTER, DAVID, BRADLEY, MR.,**

Mailing Address **3891 ALEXANDRIA DR.**  
**P.O. BOX 111**

City

**GAINESVILLE**

State

**GA**

Zip Code

**30506**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)  
**WILHEIT PACKAGING**

Occupation (for Individual)  
**OWNER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**08 / 20 / 2019**

**Transaction ID : SA11Al.11299**

Amount of Each Receipt this Period

**500.00**

☐ Memo Item

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

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

**1750.00**