

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 OF 877

(check only one)

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

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NAME OF COMMITTEE (In Full)

SENATE CONSERVATIVES FUND

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

A. CORRIGAN, PAUL, A., MR.,

Mailing Address 26980 CRESTWOOD DR

City
FRANKLINState
MIZip Code
48025-1378FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID : AA7609AEAB91A4006868

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

B. DECOURSEY, ROBERT, W., MR.,

Mailing Address 12261 ROUNDWOOD RD UNIT 1401

City
LUTHERVILLE TIMONIUMState
MDZip Code
21093-3822FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

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

Transaction ID : A6D01EA006C3A456080A

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

C. RAFFENSBERGER, VERN, E., MR.,

Mailing Address 214 GLEN ROCK RD

City
GLEN ROCKState
PAZip Code
17327-8300FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
INFORMATION REQUESTEDOccupation (for Individual)
INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID : A734A0059AFD04559ACE

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

700.00

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