

# **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 587 OF 7309

☒ 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)  
**SCALISE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**GALLAGHER, TRUDI, , ,**

Mailing Address 9 QUARTER MILE ROAD

City ARMONK	State NY	Zip Code 10504-1324
----------------	-------------	------------------------

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 ▼  
285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 08 2019

Transaction ID : SA11A.286048

Amount of Each Receipt this Period

25.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GILLIAM, MARK, , ,**

Mailing Address 400 TRAVIS STREET  
SUITE 1700

City SHREVEPORT	State LA	Zip Code 71101-3126
--------------------	-------------	------------------------

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

Name of Employer SELF	Occupation ATTORNEY
--------------------------	------------------------

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2165.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 08 2019

Transaction ID : SA11A.285802

Amount of Each Receipt this Period

5.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GILLIAM, MARK, , ,**

Mailing Address 400 TRAVIS STREET  
SUITE 1700

City SHREVEPORT	State LA	Zip Code 71101-3126
--------------------	-------------	------------------------

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

Name of Employer SELF	Occupation ATTORNEY
--------------------------	------------------------

Receipt For: 2020  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2165.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 08 2019

Transaction ID : SA11A.286179

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

280.00