

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 3080 OF 7309

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
SCALISE FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MITSCH, MARILYN, , ,

Mailing Address 4 CHARLEY LAKE CT.

City SAINT PAUL	State MN	Zip Code 55127-6219
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 15 2019

Transaction ID : SA11A.310600

Amount of Each Receipt this Period

25.00

☐ Memo Item
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MITSCH, MARILYN, , ,

Mailing Address 4 CHARLEY LAKE CT.

City SAINT PAUL	State MN	Zip Code 55127-6219
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 15 2019

Transaction ID : SA11A.311529

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MITSCH, MARILYN, , ,

Mailing Address 4 CHARLEY LAKE CT.

City SAINT PAUL	State MN	Zip Code 55127-6219
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FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 15 2019

Transaction ID : SA11A.311531

Amount of Each Receipt this Period

100.00

☐ Memo Item
CONTRIBUTION

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

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

225.00