

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

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

FOR LINE NUMBER: PAGE 7 OF 68

(check only one)

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

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NAME OF COMMITTEE (In Full)

**Team McHenry**

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

**A. BARTH, ANDREW, , ,**

Mailing Address 2200 CHAUCER ROAD

City  
SAN MARINO

State  
CA

Zip Code  
91108-1314

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAPITAL GROUP COMPANIES

Occupation (for Individual)  
INVESTMENT MANAGEMENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 / 07 / 2017

Transaction ID : SA11A.1271

Amount of Each Receipt this Period

2700.00

☐ Memo Item  
CONTRIBUTION

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

**B. BELK, JOHN, R., ,**

Mailing Address 2801 W. TYVOLA RD.

City  
CHARLOTTE

State  
NC

Zip Code  
28217-4525

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BELK INC.

Occupation (for Individual)  
PRESIDENT/COO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 27 / 2017

Transaction ID : SA11A.1412

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

**C. BOBINS, NORMAN, , ,**

Mailing Address 209 E LAKE SHORE DR.  
UNIT 10E

City  
CHICAGO

State  
IL

Zip Code  
60611-1307

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SELF

Occupation (for Individual)  
FINANCIAL CONSULTING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 31 / 2017

Transaction ID : SA11A.1359

Amount of Each Receipt this Period

500.00

☐ Memo Item  
CONTRIBUTION

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

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

3700.00