

**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 22 OF 240              |
|   | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d | <input type="checkbox"/> 15 |
|   | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14  |                             |

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)  
**ALEXANDER FOR SENATE 2014 INC**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Stan M. Dickerson**

Mailing Address **2508 Shangrila Trail**

City **Columbia** State **TN** Zip Code **38401-5801**

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

Name of Employer **Self Employed** Occupation **Optometrist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 27 / 2014**

Transaction ID : **A9548AF23026448E09D0**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Alice Baker**

Mailing Address **3333 E. Speedway**

City **Tucson** State **AZ** Zip Code **85716-3935**

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

Name of Employer **Self** Occupation **Fundraising consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **A749FD034E3144E35AC4**

Amount of Each Receipt this Period  
**2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Ron Fincher**

Mailing Address **9129 Brentmeade Blvd.**

City **Brentwood** State **TN** Zip Code **37027-8525**

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

Name of Employer **Psychiatric Solutions, Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 27 / 2014**

Transaction ID : **AE71178678A9F468D818**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3750.00**

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