

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 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. KNOX, RONALD, F., ,**

Mailing Address 108 WHEATFIELD CIR APT E327

City  
BRENTWOOD

State  
TN

Zip Code  
37027-3053

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INFORMATION REQUESTED

Occupation (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  
04 / 10 / 2020

Transaction ID : A1F0D9F6522094EEFACF

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

**B. CAPUTO, MICHAEL, F., MR.,**

Mailing Address 24956 LETCHWORTH RD

City  
BEACHWOOD

State  
OH

Zip Code  
44122-4151

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : A260CE987250947B99D9

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

**C. FERRI, GIULIO, C., MR.,**

Mailing Address 1651 152ND ST S

City  
SPANAWAY

State  
WA

Zip Code  
98387-8802

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RETIRED

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

55.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 10 / 2020

Transaction ID : A78C353C857E04A32BE9

Amount of Each Receipt this Period

20.00

☐ Memo Item

NOTE:EM/LUMMIS/TRANS20200416

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

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

170.00