

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

Texans for Senator John Cornyn Inc

Full Name (Last, First, Middle Initial)

WINRED

A.

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1049256.87

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		16		2019

Transaction ID : SA11C.21991022536

Amount of Each Receipt this Period

250.00

☒ Memo Item
CONTRIBUTION
WIN; SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

B.

Full Name (Last, First, Middle Initial)

COSBY, DON, E., MR.,

Mailing Address 8101 BOAT CLUB RD
SUITE 301

City

FORT WORTH

State

TX

Zip Code

76179-3633

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FIRST CAPITAL BANK

BANKER

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		12		2019

Transaction ID : SA11A.219989

Amount of Each Receipt this Period

250.00

☐ Memo Item
CONTRIBUTION

EARMARKED FROM WINRED

C.

Full Name (Last, First, Middle Initial)

WINRED

Mailing Address P.O. BOX 9891

City

ARLINGTON

State

VA

Zip Code

22219-1891

FEC ID number of contributing
federal political committee.

C C00694323

Name of Employer

Occupation

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1049256.87

Date of Receipt

M M	/	D D	/	Y Y Y Y
12		16		2019

Transaction ID : SA11C.21991022553

Amount of Each Receipt this Period

25.00

☒ Memo Item
CONTRIBUTION
WIN; SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

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

250.00

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