

# **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 35

(check only one)

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

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NAME OF COMMITTEE (In Full)

ABRAHAM LINCOLN PAC

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

**A. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2022

☐ Primary ☐ General  
☒ Other (specify) ▼  
ANNUAL

Aggregate Year-to-Date ▼

13500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 25 / 2022

Transaction ID : ACE546B4CB9074BF0A79

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

**B. EASTMAN, SAGE, , ,**

Mailing Address 3643 TRINITY DR

City  
ALEXANDRIAState  
VAZip Code  
22304-1840FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MEHLMAN CASTAGNETTI ROSEN THOMASOccupation (for Individual)  
LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 12 / 2022

Transaction ID : A4E6D76DF0BE24B3DAD4

Amount of Each Receipt this Period

1000.00

☐ Memo Item

EARMARKED (NON-DIRECTED) THROUGH WINRED

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

**C. WINRED**

Mailing Address PO BOX 9891

City  
ARLINGTONState  
VAZip Code  
22219-1891FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2022

☐ Primary ☐ General  
☒ Other (specify)  
ANNUAL

Aggregate Year-to-Date ▼

13500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 18 / 2022

Transaction ID : AE17B2795F4524D4F8BC

Amount of Each Receipt this Period

1000.00

☒ Memo Item

CONDUIT MEMO TOTAL

EARMARK NON-DIRECTED

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

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

1000.00