

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 856 OF 2267

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TEAM GRAHAM, INC.

A. Full Name (Last, First, Middle Initial)
MORRISON, JOSEPH, , ,
Mailing Address 7747 TWIN FIR LN S

City State Zip Code
SALEM OR 97306-9417

FEC ID number of contributing
federal political committee.

C

Name of Employer
FOOTHILLS MEDICAL SUPPLY

Occupation
SELF EMPLOYED

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 15 2019

Transaction ID : A51B089A4663D41C3AA9

Amount of Each Receipt this Period

25.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
COTY, LES, , ,
Mailing Address 27810 80TH AVE E

City State Zip Code
GRAHAM WA 98338-9331

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 14 2019

Transaction ID : A0170A4F050694F3FA80

Amount of Each Receipt this Period

5.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
MULLENIX, JULIE, R., ,
Mailing Address 501 WOODLANE
SUITE 105

City State Zip Code
LITTLE ROCK AR 72201-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 27 2019

Transaction ID : AB5F74087F46B4C7CA35

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

1030.00