

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 OF 69

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

TEAM MCCAUL TEXAS VICTORY

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

A. Levy, Bruce, A., Dr.,

Mailing Address 4000 Enclave Mesa Cir

City
AustinState
TXZip Code
78731FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Austin GastroenterologyOccupation (for Individual)
Physician

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	29	/	2019

Transaction ID : SA564

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

B. Lieberman, Nora, , Mrs.,

Mailing Address 48 Saint Stephens School Rd

City
AustinState
TXZip Code
78746FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
HomemakerOccupation (for Individual)
Homemaker

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2019

Transaction ID : SA530

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. Link, Tom, E., Mr.,

Mailing Address 807 Brazos St Ste 605

City
AustinState
TXZip Code
78701FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Self EmployedOccupation (for Individual)
Investor

Receipt For: 2020

☒ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	08	/	2019

Transaction ID : SA466

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

1300.00

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