

# **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)

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

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NAME OF COMMITTEE (In Full)  
**Ted Cruz for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**HUMPHREY, DIANE, S., MS.,**  
Mailing Address 2279 E. 250 N.

City  
BLUFFTON

State  
IN

Zip Code  
46714-9206

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 22 2019

Transaction ID : SA11A.2395141

Amount of Each Receipt this Period

100.00

☐ Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KEITH, JOANN, R., MS.,**  
Mailing Address 8316 OAK COURT

City  
N RICHLAND HILLS

State  
TX

Zip Code  
76182-6011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WELLS FARGO

Occupation  
COMPLIANCE OFFICER

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 22 2019

Transaction ID : SA11A.2394804

Amount of Each Receipt this Period

20.00

☐ Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LOMBARDO, T., RANDOLPH, DR.,**  
Mailing Address 7 OAKLEIGH BOULEVARD

City  
BEAUMONT

State  
TX

Zip Code  
77706-7635

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation  
PHYSICIAN

Receipt For: 2024  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 22 2019

Transaction ID : SA11A.2395074

Amount of Each Receipt this Period

250.00

☐ Memo Item  
CONTRIBUTION

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

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

370.00