

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 140 OF 942

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Mast for Congress

A. Full Name (Last, First, Middle Initial)
DAVIS, VIVIAN, G., MS.,

Mailing Address 1924 LYNNE AVE

City State Zip Code
 ROCKY MOUNT NC 27801-6330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 280.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 27 2018

Transaction ID : SA11A.213534

Amount of Each Receipt this Period

20.00

☐ Memo Item
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVIS, WILLIAM, H., MR.,

Mailing Address 21 WINDING WAY

City State Zip Code
 VERONA PA 15147-3888

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 04 2018

Transaction ID : SA11A.211241

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAWSON, AL, , ,

Mailing Address 7150 WINDING BAY LANE

City State Zip Code
 WEST PALM BEACH FL 33412-3039

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 25 2018

Transaction ID : SA11A.203605

Amount of Each Receipt this Period

50.00

☐ Memo Item
 CONTRIBUTION

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

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

120.00