

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)

**FISHER FOR CONGRESS TX14**

Full Name (Last, First, Middle Initial)

**Long, Charmaine, , ,****A.**

Mailing Address 9550 Strawberry Field W. Drive

City

Amarillo

State

TX

Zip Code

79119

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

Name of Employer

Self Employed

Occupation

Dog Handler

Receipt For: 2020

☒ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	0		2	0	2	0

**Transaction ID : SA11AI.4155**

Amount of Each Receipt this Period

250.00

☐ Memo Item  
 AB101047465

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

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

Name of Employer

Occupation

Receipt For:

☐ Primary    ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

☐ Memo Item
**SUBTOTAL** of Receipts This Page (optional)..... ▶

250.00

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

250.00