

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)
MORAN VICTORY COMMITTEE

A. Full Name (Last, First, Middle Initial) ANDERSON, DANA, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 15 / 2020		
Mailing Address 100 FALL CREEK RD			Transaction ID : SA11AI.7122		
City LAWRENCE	State KS	Zip Code 66049	Amount of Each Receipt this Period _____ 5600.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer MACERICH		Occupation VICE CHAIR			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 5600.00			
B. Full Name (Last, First, Middle Initial) ANDERSON, JUSTIN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 01 / 08 / 2020		
Mailing Address 1705 LAKE ALVAMAR DR			Transaction ID : SA11AI.7136		
City LAWRENCE	State KS	Zip Code 66047	Amount of Each Receipt this Period _____ 1500.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer THE DENTISTS IN LAWRENCE		Occupation DENTIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 1500.00			
C. Full Name (Last, First, Middle Initial) ANSCHUTZ, NANCY, , ,			Date of Receipt M M / D D / Y Y Y Y Y 02 / 10 / 2020		
Mailing Address 6 POLO CLUB ROAD			Transaction ID : SA11AI.7201		
City DENVER	State CO	Zip Code 80209	Amount of Each Receipt this Period _____ 2800.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer HOMEMAKER		Occupation HOMEMAKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2800.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 9900.00		
TOTAL This Period (last page this line number only)..... ▶			_____		