

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)
Collins For Senator

A. Full Name (Last, First, Middle Initial)
Smith, Barbara, , ,

Mailing Address 38372 Stone Eden Dr

City Hamilton	State VA	Zip Code 20158-3456
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FEC ID number of contributing federal political committee. **C**

Name of Employer Mark G Smith Dds	Occupation Dental office manager
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 04 2019

Transaction ID : A19815A81EB3C4281B76

Amount of Each Receipt this Period

50.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Smith, Barbara, , ,

Mailing Address 38372 Stone Eden Dr

City Hamilton	State VA	Zip Code 20158-3456
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FEC ID number of contributing federal political committee. **C**

Name of Employer Mark G Smith Dds	Occupation Dental office manager
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 04 2019

Transaction ID : A1A1A0E40AC98400AAFD

Amount of Each Receipt this Period

50.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Smith, Clark, , ,

Mailing Address 366 Tynebridge Ln

City Houston	State TX	Zip Code 77024-7425
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FEC ID number of contributing federal political committee. **C**

Name of Employer Buckeye Partners	Occupation Energy Provider
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Receipt For: 2020
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 14 2019

Transaction ID : AC147110AE4374720B9F

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1100.00

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

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