

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

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)  
**Beth Lindstrom for US Senate Inc.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CASSIDY, HENRY, , MR., JR.</b>			Date of Receipt MM / DD / YYYY <b>05 / 31 / 2018</b>	
Mailing Address <b>8 SHED ROW</b>			Transaction ID : <b>SA11A.10679</b>	
City <b>WEST YARMOUTH</b>	State <b>MA</b>	Zip Code <b>02673</b>	Amount of Each Receipt this Period _____ <b>100.00</b>	
FEC ID number of contributing federal political committee. <b>C</b> _____		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>CAPE COD INSULATION, INC.</b>		Occupation <b>INSULATION</b>		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date _____ <b>400.00</b>		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>CHOATE, ARTHUR, B., MR.,</b>			Date of Receipt MM / DD / YYYY <b>05 / 31 / 2018</b>	
Mailing Address <b>1390 S. DIXIE HWY. STE. 2221</b>			Transaction ID : <b>SA11A.10933</b>	
City <b>CORAL GABLES</b>	State <b>FL</b>	Zip Code <b>33146</b>	Amount of Each Receipt this Period _____ <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b> _____		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>ARTMARINE</b>		Occupation <b>EXECUTIVE</b>		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date _____ <b>1000.00</b>		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>DORSCHER, ERIC, , MR.,</b>			Date of Receipt MM / DD / YYYY <b>05 / 31 / 2018</b>	
Mailing Address <b>2057 NORTHWEST ESTUARY COURT</b>			Transaction ID : <b>SA11A.10707</b>	
City <b>STUART</b>	State <b>FL</b>	Zip Code <b>34994</b>	Amount of Each Receipt this Period _____ <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b> _____		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>		
Receipt For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date _____ <b>350.00</b>		
<b>SUBTOTAL</b> of Receipts This Page (optional) .....			_____ <b>1350.00</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			_____ <b>1350.00</b>	

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