

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 16 OF 51
(check only one)

☐ 11a	☐ 11b	☐ 11c	☐ 12	☐ 17
☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

Salazar Victory Committee

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState Zip Code
VA 22219-1891FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
Other (specify) ▼

Aggregate Year-to-Date ▼

536404.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	2	4

Transaction ID : SA11C.193092

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. FIGUEIREDO, PAULO, , ,

Mailing Address

City
WESTONState Zip Code
FLFEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

SELF-EMPLOYED

JOURNALIST

Receipt For:

☐ Primary ☐ General
Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	2	4

Transaction ID : SA11A.193093

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

EARMARKED FROM WINRED

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WINRED

Mailing Address P.O. BOX 9891

City
ARLINGTONState Zip Code
VA 22219-1891FEC ID number of contributing
federal political committee.**C** C00694323

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
Other (specify)

Aggregate Year-to-Date ▼

536404.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	2	4

Transaction ID : SA11C.195031

Amount of Each Receipt this Period

3300.00

☐ Memo Item

CONTRIBUTION

SEE ATTRIBUTION BELOW FOR ALL DONORS
ABOVE ITEMIZATION THRESHOLD**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10000.00