

**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)	PAGE 16 OF 80
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Allyson Schwartz for Congress

A. Full Name (Last, First, Middle Initial)
Margaret Boyce Furey

Mailing Address 299 Barren Hill Rd

City Conshohocken State PA Zip Code 19428-2403

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

Name of Employer Self Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2010

Transaction ID : C5485168

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
JoAnne Glisson

Mailing Address 113 7th St SE
1100 New York Ave, NW Ste 725

City Washington State DC Zip Code 20003-1213

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

Name of Employer American Clinical Laboratory Associati Occupation Senior Vice President

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 26 / 2010

Transaction ID : C5495804

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Barbara Gold M.D.

Mailing Address 2039 Mount Vernon St

City Philadelphia State PA Zip Code 19130-3235

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

Name of Employer St. Christopher Care Northeast Pediatr Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 08 / 2010

Transaction ID : C5485512

Amount of Each Receipt this Period
500.00

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

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

900.00