

**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 13 OF 34
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)  
**Elizabeth Crowley for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Theresa Crowley**

Mailing Address 77-20 82nd Street

City State Zip Code  
Glendale NY 11385

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

Name of Employer Occupation  
Rossi & Crowley LLP Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C8133951**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Walter Crowley**

Mailing Address 12 Gary Drive

City State Zip Code  
Windsor NY 13865

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

Name of Employer Occupation  
Self-Employed Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C8133952**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Mary Crowley Grogan**

Mailing Address 64-76 82nd Street

City State Zip Code  
Middle Village NY 11379

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

Name of Employer Occupation  
Burke Rehab Hospital RN Admissions Dept.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 27 / 2012

**Transaction ID : C8133955**

Amount of Each Receipt this Period  
500.00

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

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

1500.00