

**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 77 OF 204
	<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	

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)
Friends of Val Arkoosh

A. Full Name (Last, First, Middle Initial)
James Cottrell

Mailing Address 17 Vandam St

City State Zip Code
New York NY 10013-1215

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

Name of Employer Occupation
SUNY Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : VN8HHCQWEK1

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Bonita V DiCarlo

Mailing Address 6327 Jackson St

City State Zip Code
Pittsburgh PA 15206-2231

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

Name of Employer Occupation
SELF-EMPLOYED FINANCIAL PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : VN8HHCQXZ73

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Richard H Epstein

Mailing Address 3101 Boardwalk
Tower 2 unit 1505

City State Zip Code
Atlantic City NJ 08401-5100

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

Name of Employer Occupation
Jefferson Medical College Anesthesiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 16 / 2014

Transaction ID : VN8HHCQYCM1

Amount of Each Receipt this Period
500.00

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

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

850.00