SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one) PAGE 5 / 37

[X] 11a [ ] 11b [ ] 11c [ ] 12 [ ] 13 [ ] 14 [ ] 15 [ ] 16 [ ] 17

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NAME OF COMMITTEE (In Full)
CONGRESSIONAL MAJORITY COMMITTEE

A.
Full Name (Last, First, Middle Initial): KIM ALFANO
Mailing Address: 5130 28TH ST. NORTH
City: ARLINGTON State: VA Zip Code: 22207
FEC ID number of contributing federal political committee.
Name of Employer: ALFANO COMMUNICATIONS, INC
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 2000.00
Date of Receipt: 03 29 2003
Amount of Each Receipt this Period: 2000.00
CONTRIBUTION
Transaction ID: SA11A1.5961

B.
Full Name (Last, First, Middle Initial): KIM ALFANO
Mailing Address: 5130 28TH ST. NORTH
City: ARLINGTON State: VA Zip Code: 22207
FEC ID number of contributing federal political committee.
Name of Employer: ALFANO COMMUNICATIONS, INC
Occupation: CEO
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 4000.00
Date of Receipt: 03 29 2003
Amount of Each Receipt this Period: 2000.00
CONTRIBUTION
Transaction ID: SA11A1.5963

C.
Full Name (Last, First, Middle Initial): Dr. MORRELL AVRAM
Mailing Address: 115 DEMSEN ST
City: BROOKLYN State: NY Zip Code: 11201
FEC ID number of contributing federal political committee.
Name of Employer: LONG ISLAND COLLEGE HOSPITAL
Occupation: CHIEF DIVISION OF NEPHROLOGY
Receipt For: Primary General Other (specify)
Aggregate Year-to-Date: 1000.00
Date of Receipt: 03 29 2003
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION
Transaction ID: SA11A1.5917

SUBTOTAL of Receipts This Page (optional) ..... ▶ **5000.00**

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