

**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 88 OF 280
	<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)
Royce Campaign Committee

A. Full Name (Last, First, Middle Initial)
Reza Nemovi

Mailing Address 722 Via Cafetal

City San Marcos State CA Zip Code 92069-7384

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

Name of Employer Engineer Major Occupation Student

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1300**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 06 / 2015

Transaction ID : A-CF14585

Amount of Each Receipt this Period
1300

Memo Item

B. Full Name (Last, First, Middle Initial)
Kumar Family LTD Partnership

Mailing Address PO Box 1327

City Bettendorf State IA Zip Code 52722-0023

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5400**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 23 / 2015

Transaction ID : A-CF14536

Amount of Each Receipt this Period
1100

Memo Item

Contribution from Partnership. Partners exceeding reporting threshold itemized as memos.

C. Full Name (Last, First, Middle Initial)
Mahvash Dadvand

Mailing Address 5556 Mason Avenue

City Woodland Hills State CA Zip Code 91367-6841

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

Name of Employer Northridge Hospital Occupation Registered Nurse

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 06 / 2015

Transaction ID : A-CF14565

Amount of Each Receipt this Period
1000

Memo Item

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

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

3400.00