

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 122
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
**ADAM KINZINGER - FUTURE 1ST COMMITTEE**

**A. RITER, ROBERT, L., MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4855 WHISPERING PINE WAY  
 City NAPLES State FL Zip Code 34103-2409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) NONE Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 22 / 2019  
**Transaction ID : SA11A.19666**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B. ROBINSON, BERNIE, , MR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 408 A STREET, SE  
 City WASHINGTON State DC Zip Code 20003-3807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) LANGSTON GROUP Occupation (for Individual) LOBBYIST  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 12 / 2019  
**Transaction ID : SA11A.19614**  
 Amount of Each Receipt this Period 500.00  
 Memo Item CONTRIBUTION

**C. SCHULZ, REX, , DR.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4000 CATAMARAN CT  
 City QUINCY State IL Zip Code 62305-8281  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) WEST CENTRAL PATHOLOGY SPECIALISTS Occupation (for Individual) PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 08 / 2019  
**Transaction ID : SA11A.19592**  
 Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	