

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

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

FOR LINE NUMBER: PAGE 7 OF 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ADAM KINZINGER - FUTURE 1ST COMMITTEE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOBINS, NORMAN, R., MR.,

Mailing Address 209 E LAKE SHORE DRIVE
 # 10E

City
 CHICAGO

State
 IL

Zip Code
 60611-1307

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 NORMAN BOBINS CONSULTING

Occupation (for Individual)
 FINANCIAL CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2019

Transaction ID : SA11A.22763

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BONELLI, LORI, A., MRS.,

Mailing Address 2931 COTSWOLD CIR

City
 ROCKFORD

State
 IL

Zip Code
 61114-6393

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 INFORMATION REQUESTED PER BEST EFFORTS

Occupation (for Individual)
 INFORMATION REQUESTED PER BE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 19 / 2019

Transaction ID : SA11A.23044

Amount of Each Receipt this Period

500.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CABLE, DAVID, , DR.,

Mailing Address 6333 BRIGANTINE LANE

City
 ROCKFORD

State
 IL

Zip Code
 61114-8405

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 OSF ST. ANTHONY

Occupation (for Individual)
 PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 30 / 2019

Transaction ID : SA11A.22954

Amount of Each Receipt this Period

1000.00

☐ Memo Item
 CONTRIBUTION

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

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

2000.00