

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JIM JORDAN FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MITROVICH, RONA W, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 09 / 2019	
Mailing Address 159 SEABORN DR			Transaction ID : A4CA5A23A621D48F3824	
City WILLOWICK	State OH	Zip Code 44095-4620		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED		Occupation RETIRED	<input type="checkbox"/> Memo Item	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		

B. Full Name (Last, First, Middle Initial) MITROVICH, RONA W, , ,			Date of Receipt M M / D D / Y Y Y Y Y 12 / 10 / 2019	
Mailing Address 159 SEABORN DR			Transaction ID : AA644EDE357684D1EB30	
City WILLOWICK	State OH	Zip Code 44095-4620		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 50.00	
Name of Employer RETIRED		Occupation RETIRED	<input type="checkbox"/> Memo Item	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 300.00		

C. Full Name (Last, First, Middle Initial) MITSCH, MARILYN, , ,			Date of Receipt M M / D D / Y Y Y Y Y 11 / 15 / 2019	
Mailing Address 4 CHARLEY LAKE CT			Transaction ID : A76B4C58DD80841A6A78	
City SAINT PAUL	State MN	Zip Code 55127-6219		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED		Occupation RETIRED	<input type="checkbox"/> Memo Item	
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 650.00		

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	