

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)

ROSS SPANO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Klein, Ken, , ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 04 / 2019		
Mailing Address 10315 Folk St			Transaction ID : SA11AI.4879		
City Silver Spring	State MD	Zip Code 20902	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer Self		Occupation Attorney			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00			
B. Full Name (Last, First, Middle Initial) Lorton, George, , ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 14 / 2019		
Mailing Address 1601 Sahlman Dr			Transaction ID : SA11AI.4880		
City Tampa	State FL	Zip Code 33605	Amount of Each Receipt this Period 2800.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer International Ship Repair		Occupation CEO			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2800.00			
C. Full Name (Last, First, Middle Initial) Lorton, George, , ,			Date of Receipt M M / D D / Y Y Y Y Y 06 / 14 / 2019		
Mailing Address 1601 Sahlman Dr			Transaction ID : SA11AI.4881		
City Tampa	State FL	Zip Code 33605	Amount of Each Receipt this Period 2800.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer International Ship Repair		Occupation CEO			
Receipt For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5600.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			6100.00		
TOTAL This Period (last page this line number only)..... ▶					