

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

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

FOR LINE NUMBER: PAGE 43 OF 135  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**DONALD NORCROSS FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**David Brett Krone**

Mailing Address 3257 O Street  
NW

City Washington State DC Zip Code 20007

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

Name of Employer Self Occupation Consultant

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9018**

Amount of Each Receipt this Period  
2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Lloyd D Levenson**

Mailing Address 107 S Argyle Ave

City Margate City State NJ Zip Code 08402

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

Name of Employer Cooper Levenson Occupation Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 11 / 2015

**Transaction ID : SA11AI.9000**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**George Loesch**

Mailing Address 6 Trefoil Terrace

City Mount Laurel State NJ Zip Code 08054

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

Name of Employer Conner Strong Buckelew Occupation Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2015

**Transaction ID : SA11AI.9281**

Amount of Each Receipt this Period  
1500.00

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

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

5700.00