

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

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

FOR LINE NUMBER: PAGE 18 OF 82  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**VoteVets**

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

**A. Feuer, Bryan, , ,**

Mailing Address 1500 Curtis Ave

City

Manhattan Beach

State

CA

Zip Code

90266-7021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Not Employed

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

12 / 27 / 2018

**Transaction ID : 15718424**

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

**B. Fox, Richard, , ,**

Mailing Address 6 Jamesbury Dr

City

Worcester

State

MA

Zip Code

01609-1202

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

12 / 27 / 2018

**Transaction ID : 15718544**

Amount of Each Receipt this Period

35.00

☐ Memo Item

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

**C. Fraser, Ross, , ,**

Mailing Address 28 Margaret St

City

Glen Cove

State

NY

Zip Code

11542-2439

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Nassau Health Care Corp

Occupation (for Individual)

Hospital Administrator

Receipt For:

☐ Primary  
☐ Other (specify)

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 11 / 2018

**Transaction ID : 15661097**

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

95.00