

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 71

(check only one)

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

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NAME OF COMMITTEE (In Full)

Scott Rigell for Congress

A.

Full Name (Last, First, Middle Initial)

Mr. James Cacioppo

Mailing Address 4 E. 88th St, Apt. 7B

City

New York

State

NY

Zip Code

10128-0509

FEC ID number of contributing
federal political committee.

C

Name of Employer
One East Partners

Occupation

Hedge Fund Manager

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	1	0

Transaction ID: A9902D00DD652489B9F7

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Mr. Christopher L. Schroeder

Mailing Address 101 Lockgreen PI

City

Richmond

State

VA

Zip Code

23226-1744

FEC ID number of contributing
federal political committee.

C

Name of Employer
FraudX LLC

Occupation

Director

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

Transaction ID: A2B4651B838C346A7A3F

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Ms. Shirley J Crosby

Mailing Address 700 W. Morse Blvd
Suite 201

City

Winter Park

State

FL

Zip Code

32789-3768

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation

Homemaker

Receipt For: 2010

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	1	0

Transaction ID: A5859C4E8E2ED44FA828

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)