

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2484 OF 5262
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**STAND FOR AMERICA PAC**

**A. RENNERT, INGEBORG, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **ONE ROCKEFELLER PLAZA**  
**29TH FLOOR**  
 City **NEW YORK** State **NY** Zip Code **10020**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **INFORMATION REQUESTED** Occupation (for Individual) **INFORMATION REQUESTED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **06 / 17 / 2021**  
**Transaction ID : SA11AI.134642**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**B. RENNERT, IRA, LEON, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **ONE ROCKEFELLER PLAZA**  
**29TH FLOOR**  
 City **NEW YORK** State **NY** Zip Code **10020**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **INFORMATION REQUESTED** Occupation (for Individual) **INFORMATION REQUESTED**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **5000.00**

Date of Receipt **06 / 17 / 2021**  
**Transaction ID : SA11AI.134644**  
 Amount of Each Receipt this Period **5000.00**  
 Memo Item

**C. RESMONDO, PATRICK, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address **4575 RESMONDO LANE**  
 City **PENSACOLA** State **FL** Zip Code **32526**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) **DRMP** Occupation (for Individual) **CONSTRUCTION INSPECTOR**  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ **31.00**

Date of Receipt **05 / 26 / 2021**  
**Transaction ID : SA11AI.119701**  
 Amount of Each Receipt this Period **10.00**  
 Memo Item  
**EARMARKED FOR MARK MOORES FOR CONGRESS**

**SUBTOTAL** of Receipts This Page (optional)..... **10010.00**  
**TOTAL** This Period (last page this line number only).....