

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

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

FOR LINE NUMBER: PAGE 5 OF 46
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Allyson Schwartz for Congress

A. Full Name (Last, First, Middle Initial) Jerome Alpern		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2013	
Mailing Address 318 Audubon Rd		Transaction ID : C9567715	
City Englewood	State NJ	Zip Code 07631-4312	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Self-Employed	Occupation Financial Consultant		
Receipt For: 2014 <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) Bruce Berger M.D.		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 01 / 2013	
Mailing Address 1901 Walnut St Apt 21B		Transaction ID : C9177404	
City Philadelphia	State PA	Zip Code 19103-4661	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Self-Employed	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		
C. Full Name (Last, First, Middle Initial) Kathleen P. Chimicles		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 03 / 2013	
Mailing Address 361 Lancaster Ave		Transaction ID : C9182117	
City Haverford	State PA	Zip Code 19041-1554	Amount of Each Receipt this Period _____ 2500.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer Chimicles and Tikelles	Occupation Financial Specialist		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 3500.00	
TOTAL This Period (last page this line number only).....		_____	