

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

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

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Crowley Leadership Fund**

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

**A. Troia, John, , ,**

Mailing Address 76 Dorchester Dr

City  
Manhasset

State  
NY

Zip Code  
11030-3530

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
62 65 Fresh Pond Road Inc

Occupation (for Individual)  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 27 / 2017

**Transaction ID : C10882594**

Amount of Each Receipt this Period

2700.00

☐ Memo Item

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

**B. Catell, Robert, B., ,**

Mailing Address 62 Osborne Rd.

City  
Garden City

State  
NY

Zip Code  
11530-3127

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
N/A

Occupation (for Individual)  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 03 / 2017

**Transaction ID : C10877504**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

**c. Chugh, Mulchand, , ,**

Mailing Address 23 Cabriole Lane

City  
Melville

State  
NY

Zip Code  
11747

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
South Nassau Communities Hospital

Occupation (for Individual)  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 / 22 / 2017

**Transaction ID : C10889235**

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

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

4700.00