

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

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

FOR LINE NUMBER: PAGE 96 OF 291

(check only one)

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

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NAME OF COMMITTEE (In Full)

House Senate Victory Fund

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

A. Forte, Carol, , ,

Mailing Address 1 Deer Trail

City

Boonton Township

State

NJ

Zip Code

07005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Blume, Forte et al

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2019

Transaction ID : SA11AI-287

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

B. Silin, Steven, , ,

Mailing Address PO Box 36

City

South Freeport

State

ME

Zip Code

04078

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Berman &amp; Simmons P.A.

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2019

Transaction ID : SA11AI-288

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

C. O'Connell, James, E, ,

Mailing Address 13 Muirfield Rd

City

Cumberland Center

State

ME

Zip Code

04021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Berman &amp; Simmons P.A.

Occupation (for Individual)

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 24 / 2019

Transaction ID : SA11AI-289

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

1750.00

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