

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Lonegan for Congress, Inc.

Full Name (Last, First, Middle Initial)

Penna, Sue, Ann, ,

Mailing Address 13 Parkway W

City

Caldwell

State

NJ

Zip Code

07006-6009

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Consultant

Receipt For: 2018

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 14 / 2018D D / Y Y Y Y Y
14 / 2018Y Y Y Y Y
2018

Transaction ID : AF7CA202907B94E90AC3

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Choate, Arthur, B, Mr.,

Mailing Address 1390 S Dixie Hwy

City

Coral Gables

State

FL

Zip Code

33146-2927

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2018

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2018D D / Y Y Y Y Y
31 / 2018Y Y Y Y Y
2018

Transaction ID : AF91B5C2EE6A1490CA1C

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Saitas, Vasiliki, , ,

Mailing Address 3 Bayberry Dr

City

Saddle River

State

NJ

Zip Code

07458-2609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Biopath Diagnostic Assoc

Occupation

Physician

Receipt For: 2018

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 27 / 2018D D / Y Y Y Y Y
27 / 2018Y Y Y Y Y
2018

Transaction ID : A2DA9784DF6C3498F97B

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

820.00

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