

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 60 OF 120	
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Joe Morelle for Congress

A. Full Name (Last, First, Middle Initial)
TBA Of NJ LLC

Mailing Address 115 Broadway
Rm 1504

City New York State NY Zip Code 10006-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : **VVBR0R53DE7**

Amount of Each Receipt this Period
1000.00

Memo Item

LLC - Members below if itemized. Permissible funds.

B. Full Name (Last, First, Middle Initial)
Burgos, Tonio, , ,

Mailing Address 115 Broadway
Rm 1504

City New York State NY Zip Code 10006-1619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Tonio Burgos & Associates Government Relations

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 20 / 2020

Transaction ID : **VVBR0R53DF5**

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Wanderer, Joshua, , ,

Mailing Address 66 Chauncey Ln

City Lawrence State NY Zip Code 11559-2824

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Self Employed Attorney

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 06 / 2020

Transaction ID : **VVBR0QSHS58**

Amount of Each Receipt this Period
1500.00

Memo Item

* Earmarked Contribution: See Below

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	