

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

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

FOR LINE NUMBER: PAGE 6 OF 15

(check only one)

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

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NAME OF COMMITTEE (In Full)

Free Syria PAC

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

A. Akhras, Fadi, , ,

Mailing Address 20 Blue Grass Ct

City

Oak Brook

State

IL

Zip Code

60523-2613

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

All Smiles Orthodontics

Occupation (for Individual)

Orthodontist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 13 / 2019

Transaction ID : VSH9YJDT8E7

Amount of Each Receipt this Period

250.00

☐ Memo Item

Contribution

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

B. Alalao, Bashar, , ,

Mailing Address 1461 Summerwood Dr

City

Broadview Heights

State

OH

Zip Code

44147-2846

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 04 / 2019

Transaction ID : VSH9YJDT815

Amount of Each Receipt this Period

75.00

☐ Memo Item

Contribution

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

C. Alalao, Bashar, , ,

Mailing Address 1461 Summerwood Dr

City

Broadview Heights

State

OH

Zip Code

44147-2846

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Self-Employed

Occupation (for Individual)

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 20 / 2019

Transaction ID : VSH9YJDT8N3

Amount of Each Receipt this Period

75.00

☐ Memo Item

Contribution

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

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

400.00