

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Nicole For New York

A. Full Name (Last, First, Middle Initial) Smith, Floyd, ,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2019		
Mailing Address 4 Peter Cooper Rd. Apt. 9G			Transaction ID : A-787		
City New York	State NY	Zip Code 10010	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer retired		Occupation Retired			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 600.00			
B. Full Name (Last, First, Middle Initial) Spinelli, Joy, C.,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 05 / 2019		
Mailing Address 60 Tiller Court			Transaction ID : A-318		
City Staten Island	State NY	Zip Code 10309	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer None		Occupation Retired			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 400.00			
C. Full Name (Last, First, Middle Initial) Stavroulakis, George, J., Mr.,			Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2019		
Mailing Address 20-72 47th Street			Transaction ID : A-485		
City Long Island City	State NY	Zip Code 11105	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		Memo Item <input type="checkbox"/>			
Name of Employer Real Estate & Insurance		Occupation Exec.			
Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			1650.00		
TOTAL This Period (last page this line number only)..... ▶					