

# **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)

**DR JOHN JOYCE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

**FIORE, MICHAEL, A, ,**

**A.**

Mailing Address 2591 RESERVOIR RD

City

HOLLIDAYSBURG

State

PA

Zip Code

16648-8633

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LS FIORE, INC.

Occupation

BUSINESSMAN

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

840.00

Date of Receipt

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

Transaction ID : A938E1FDA8A134327A18

Amount of Each Receipt this Period

340.00

☒ Memo Item

PARTNERSHIP: MLR PARTNERSHIP

Full Name (Last, First, Middle Initial)

**FIORE, LEONARD, , ,**

**B.**

Mailing Address 5506 6TH AVE REAR

City

ALTOONA

State

PA

Zip Code

16602-1205

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MLR PARTNERSHIP

Occupation

PRINCIPAL

Receipt For: 2020

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

330.00

Date of Receipt

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

Transaction ID : A66EBEB6F04594AD6B76

Amount of Each Receipt this Period

330.00

☒ Memo Item

PARTNERSHIP: MLR PARTNERSHIP

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

0.00

36600.00