

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

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

FOR LINE NUMBER: PAGE 9 OF 24

(check only one)

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

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NAME OF COMMITTEE (In Full)

NATIONAL RIGHT TO LIFE POLITICAL ACTION COMMITTEE

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

A. Koloze, Jeffrey J, , ,

Mailing Address 10019 Granger Rd

City

Garfield Heights

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of Phoenix

Occupation (for Individual)

Professor, Campus College Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2019

Transaction ID : SA11Al.10494

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

B. Koloze, Jeffrey J, , ,

Mailing Address 10019 Granger Rd

City

Garfield Heights

State

OH

Zip Code

44125

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

University of Phoenix

Occupation (for Individual)

Professor, Campus College Chair

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2019

Transaction ID : SA11Al.10495

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

C. Morris, Thomas, , ,

Mailing Address 331 Poplar St

City

Roslindale

State

MA

Zip Code

02131

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Dimock Center

Occupation (for Individual)

Administrator

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 20 / 2019

Transaction ID : SA11Al.10544

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

250.00

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