

**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 396 OF 6832	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Sherrod Brown

Full Name (Last, First, Middle Initial) A. William Birchenough		Date of Receipt MM / DD / YYYY 08 / 27 / 2012	
Mailing Address 4161 W 229th St		Transaction ID : C4315497	
City Fairview Park	State OH	Zip Code 44126-1851	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer IEC Infrared Systems	Occupation Software Engineer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00		

Full Name (Last, First, Middle Initial) B. William Birchenough		Date of Receipt MM / DD / YYYY 09 / 25 / 2012	
Mailing Address 4161 W 229th St		Transaction ID : C4397833	
City Fairview Park	State OH	Zip Code 44126-1851	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer IEC Infrared Systems	Occupation Software Engineer		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00		

Full Name (Last, First, Middle Initial) C. Diane Birckbichler		Date of Receipt MM / DD / YYYY 09 / 03 / 2012	
Mailing Address 94 Aldrich Road		Transaction ID : C4329312	
City Columbus	State OH	Zip Code 43214	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Ohio State University	Occupation Professor		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

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