

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
DANIEL WEBSTER PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark Magliocchetti		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 5 / 2 0 0 7	
Mailing Address 10203 Woodvale Pond Dr		Transaction ID: SA11A1.5825	
City State Zip Code Fairfax Station VA 22039	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PMA Group	Occupation Government Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Paul Magliocchetti		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 10203 Woodvale Pond Dr		Transaction ID: SA11A1.5829	
City State Zip Code Fairfax Station VA 22039	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PMA Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffrey Walter		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7	
Mailing Address 508 Summers Court		Transaction ID: SA11A1.5828	
City State Zip Code Alexandria VA 22301	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer The Walter Group	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	12000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	26250.00