

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 / 297
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Forward Together PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Frank E. Loy		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006
Mailing Address 3230 Reservoir Rd NW		<b>Transaction ID:</b> C1400777
City State Zip Code Washington DC 20007-2955	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Frank E. Loy		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 3230 Reservoir Rd NW		<b>Transaction ID:</b> C1401330
City State Zip Code Washington DC 20007-2955	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer N/A Occupation Retired	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> John Lykouretzos		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 345 W 13th St Apt 5F		<b>Transaction ID:</b> C1401350
City State Zip Code New York NY 10014-1259	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Hoplite Capital Occupation CEO	Aggregate Year-to-Date ▼ 2000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	