

**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 / 253
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Ernst & Young Political Action Committee

Full Name (Last, First, Middle Initial) A. David L Brown		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039763518581	
Mailing Address 200 Clarendon Street		Amount of Each Receipt this Period 300.00	
City Boston State MA Zip Code 02116-5099	FEC ID number of contributing federal political committee. C		
Name of Employer Ernst & Young Occupation Partner/Principal	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 300.00		P/R Deduction (\$300.00 Monthly)	

Full Name (Last, First, Middle Initial) B. Keith W Anderson		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039764018581	
Mailing Address Suite 1500 2100 Ross Avenue		Amount of Each Receipt this Period 300.00	
City Dallas State TX Zip Code 75201-6714	FEC ID number of contributing federal political committee. C		
Name of Employer Ernst & Young Occupation Partner/Principal	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 300.00		P/R Deduction (\$300.00 Monthly)	

Full Name (Last, First, Middle Initial) C. Stephanie J Manko		Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR1039764218581	
Mailing Address Suite 1500 2100 Ross Avenue		Amount of Each Receipt this Period 300.00	
City Dallas State TX Zip Code 75201-6714	FEC ID number of contributing federal political committee. C		
Name of Employer Ernst & Young Occupation Executive Director	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Aggregate Year-to-Date ▼ 300.00		P/R Deduction (\$300.00 Monthly)	

SUBTOTAL of Receipts This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	[]