

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

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

FOR LINE NUMBER: (check only one)		PAGE / OF /	
<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SNAKE RIVER SALMON SOCIETY

A. Full Name (Last, First, Middle Initial) <i>STUART, THOMAS R.</i>			Date of Receipt M M / D D / Y Y Y Y <i>04 / 02 / 2010</i>
Mailing Address <i>749 HIGH POINT LN</i>			Amount of Each Receipt this Period <i>, 500.00</i>
City <i>BOISE</i>	State <i>ID</i>	Zip Code <i>83712</i>	
FEC ID number of contributing federal political committee. <i>C</i>			
Name of Employer <i>RETIRED</i>		Occupation <i>MILITARY</i>	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <i>, 500.00</i>	

B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	
FEC ID number of contributing federal political committee. <i>C</i>			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y
Mailing Address			Amount of Each Receipt this Period
City	State	Zip Code	
FEC ID number of contributing federal political committee. <i>C</i>			
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	

SUBTOTAL of Receipts This Page (optional).....▶	<i>, 500.00</i>
TOTAL This Period (last page this line number only).....▶	<i>, 500.00</i>

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