

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 235

(check only one)

<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)  
Forward Together PAC

**A.**

Full Name (Last, First, Middle Initial) Royce A. Mulholland		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	9		2	0	0	9													
Mailing Address 14107 20th Ave Ste 507		<b>Transaction ID:</b> C2543857																				
City Whitestone	State NY	Zip Code 11357-3045																				
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>2500.00</td></tr></table>	2500.00																			
2500.00																						
Name of Employer The Mulholland Group, LLC	Occupation President/CEO																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>2500.00</td></tr></table>		2500.00																			
2500.00																						

**B.**

Full Name (Last, First, Middle Initial) Matthew Erskine		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	9		2	0	0	9													
Mailing Address 4904 13th St N		<b>Transaction ID:</b> C2543867																				
City Arlington	State VA	Zip Code 22205-2604																				
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Name of Employer Korn/Ferry International	Occupation Principal																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>500.00</td></tr></table>		500.00																			
500.00																						

**C.**

Full Name (Last, First, Middle Initial) Glenn A. Britt		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>7</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		3	1		2	0	0	9													
Mailing Address 188 E 78th St Number 19-B		<b>Transaction ID:</b> C2389117																				
City New York	State NY	Zip Code 10075-0533																				
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>	1000.00																			
1000.00																						
Name of Employer Time Warner	Occupation President/CEO																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>		1000.00																			
1000.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td>4000.00</td></tr></table>	4000.00
4000.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	