

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 246
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Pam Byrnes For Congress

A. Full Name (Last, First, Middle Initial)
Wendy W. Lawrence

Mailing Address 2740 Laurel Hill Rd

City State Zip Code
Ann Arbor MI 48103-1717

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 15 / 2014

Transaction ID : C9280835

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Robert H Lazebnik

Mailing Address 6740 Kentucky Ave

City State Zip Code
Clarklake MI 49234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 07 / 2014

Transaction ID : C9289137

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Jeanne Patricia Learman

Mailing Address 7500 Boardwalk

City State Zip Code
Saline MI 48176-8877

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Saline Anesthesia Associates, Inc. Nurse Anesthetist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1461.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 15 / 2014

Transaction ID : C9133504

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

820.00