SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 126
(check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 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)
Mary Ose for Congress

A.
Full Name (Last, First, Middle Initial)
Barbara LeVake
Mailing Address PO Box 3014
City: Sacramento State: CA Zip Code: 95812
FEC ID number of contributing federal political committee: C
Name of Employer: Brazil/Levake
Occupation: Partner
Receipt For: 2004
X Primary General
Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 02 11 2004
Transaction ID: INC:A:459
Amount of Each Receipt this Period: 500.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.
Full Name (Last, First, Middle Initial)
Robert I. Schramm
Mailing Address 117 6th Street, NE
City: Washington State: DC Zip Code: 20002
FEC ID number of contributing federal political committee: C
Name of Employer: Schramm Williams & Assoc
Occupation: Partner
Receipt For: 2004
X Primary General
Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 02 11 2004
Transaction ID: INC:A:458
Amount of Each Receipt this Period: 500.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.
Full Name (Last, First, Middle Initial)
Sunrise Mall
Mailing Address 6041 Sunrise Mall
City: Citrus Heights State: CA Zip Code: 95610
FEC ID number of contributing federal political committee: C
Name of Employer: Partners Requested
Occupation: Partnership
Receipt For: 2004
X Primary General
Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 02 11 2004
Transaction ID: INC:A:421
Amount of Each Receipt this Period: 500.00
Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1500.00**

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