

**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 7 / 65
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 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)
Friends of Glenn Thompson

A.	Full Name (Last, First, Middle Initial) Rodney A. Bedow		Date of Receipt
	Mailing Address 3123 State Route B		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Titusville	PA	16354
	FEC ID number of contributing federal political committee. C		Transaction ID: 0003501
Name of Employer None		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 1000.00	

B.	Full Name (Last, First, Middle Initial) James Klein		Date of Receipt
	Mailing Address PO Box 67		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Spring Mills	PA	16875
	FEC ID number of contributing federal political committee. C		Transaction ID: 0003502
Name of Employer NJARTDP Plan, LLC		Occupation Insurance	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1150.00
		<input type="text"/> 2400.00	

C.	Full Name (Last, First, Middle Initial) James Klein		Date of Receipt
	Mailing Address PO Box 67		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 7 / 2 0 1 0
	City	State	Zip Code
	Spring Mills	PA	16875
	FEC ID number of contributing federal political committee. C		Transaction ID: 0003503
Name of Employer NJARTDP Plan, LLC		Occupation Insurance	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 2500.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1750.00
TOTAL This Period (last page this line number only)	<input type="text"/>