

**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 59 / 225
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Charlie Dent for Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr. Barry R. Follweiler	Date of Receipt MM / DD / YYYY 08 / 19 / 2010
	Mailing Address 2903 W. Turner Street	<b>Transaction ID:</b> A3A16C3DAE2D9406C916
	City Allentown State PA Zip Code 18104-5329	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Self Occupation Physician Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Edward Schlechter	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 3849 Dogwood Trail	<b>Transaction ID:</b> AD0F34FC562F24DB0BEB
	City Allentown State PA Zip Code 18103-6103	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Arnold Kaplan	Date of Receipt MM / DD / YYYY 07 / 26 / 2010
	Mailing Address 3020 Fairfield Drive	<b>Transaction ID:</b> A84043273F7464BC0ABC
	City Allentown State PA Zip Code 18103-5542	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Retired Occupation Retired Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	