

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 11
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Beverage Licensees Political Action Committee

Full Name (Last, First, Middle Initial) A. Patricia Marsicano		Date of Receipt 10 / 28 / 2015 Transaction ID : SA11AI.5426
Mailing Address 221 Inlet Shore Drive		Amount of Each Receipt this Period 1000.00
City Delavan	State WI	Zip Code 53115
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Beverage Retailer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Mike Moser		Date of Receipt 10 / 09 / 2015 Transaction ID : SA11AI.5409
Mailing Address 1010 Iron Moutain Road		Amount of Each Receipt this Period 250.00
City Cheyenne	State WY	Zip Code 82009
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Beverage Retailer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Susan L. Robinson		Date of Receipt 10 / 28 / 2015 Transaction ID : SA11AI.5428
Mailing Address 821 S. Broadway Street		Amount of Each Receipt this Period 500.00
City Green Bay	State WI	Zip Code 54304-2734
FEC ID number of contributing federal political committee. C	Name of Employer Self	Occupation Beverage Retailer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	1750.00
TOTAL This Period (last page this line number only).....▶	