

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 34
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**IL-08 CONGRESSIONAL VICTORY COMMITTEE**

<b>A.</b> Full Name (Last, First, Middle Initial) Marjorie Fisher		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 6	
Mailing Address 920 North Lake Way		<b>Transaction ID:</b> SA12.4246	
City State Zip Code Palm Beach FL 33480	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF SAM JOHNSON		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address 1611 Avenue K		<b>Transaction ID:</b> SA12.4171	
City State Zip Code Plano TX 75074	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00250720		ROMP III [MEMO ITEM]	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Carol Funk		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 924 Golf View Circle		<b>Transaction ID:</b> SA12.4187	
City State Zip Code Tampa FL 33629	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		[MEMO ITEM]	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Interior Designer Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	