

**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 6 OF 33
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input 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)
Joint Action Committee for Political Affairs

Full Name (Last, First, Middle Initial)
A. Wendy Abrams

Mailing Address 45 Lakewood place

City Highland Park State IL Zip Code 60035

FEC ID number of contributing federal political committee. **C**

Name of Employer not employed Occupation volunteer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2015
Transaction ID : SA11AI.42685

Amount of Each Receipt this Period
 500.00

earmarked-Dr.Paul Ruiz for Congress CA-36

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Nathalie Anolik

Mailing Address P.O. Box 658

City Wynnewood State PA Zip Code 19196-0658

FEC ID number of contributing federal political committee. **C**

Name of Employer M. Anolik, MD Occupation manager medical office

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 28 / 2015
Transaction ID : SA11AI.42649

Amount of Each Receipt this Period
 250.00

membership

Full Name (Last, First, Middle Initial)
C. Marcia Balonick

Mailing Address 367 Charal Lane

City Highland Park State IL Zip Code 60035

FEC ID number of contributing federal political committee. **C**

Name of Employer JAC Occupation Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2015
Transaction ID : SA11AI.42686

Amount of Each Receipt this Period
 500.00

earmarked-Dr.Paul Ruiz for Congress CA-36

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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