

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 34
(check only one)

<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)
PHYSICIANS FOR BARRASSO AND PRICE

A.

Full Name (Last, First, Middle Initial)
Michael Haak, MD

Mailing Address 345 East Ohio #1402

City Chicago State IL Zip Code 69611

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

Name of Employer Northwestern Medical Occupation Orthopaedic Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 28 / 2008
Transaction ID: SA11AI.4220
 Amount of Each Receipt this Period: 500.00

B.

Full Name (Last, First, Middle Initial)
Karen L. Hackett

Mailing Address 165 North Canal #512

City Chicago State IL Zip Code 60606

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

Name of Employer American Academy of Orthopaedi Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 06 / 2008
Transaction ID: SA11AI.4152
 Amount of Each Receipt this Period: 500.00

C.

Full Name (Last, First, Middle Initial)
Patrick J. Halpin

Mailing Address 3125 Anchor Lane, NW

City Olympia State WA Zip Code 98502

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

Name of Employer Self Employed Occupation Orthopaedic Surgeon

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 06 / 01 / 2008
Transaction ID: SA11AI.4302
 Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►