

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 200
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
ASSOCIATION FOR THE ADVANCEMENT OF PSYCHOLOGY INC PSYCHOLOGISTS FOR LEG ACTION NOW (PLAN)

Full Name (Last, First, Middle Initial) A. Dr. Norman Abeles			Date of Receipt
Mailing Address 953 Rosewood Ave			<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
City	State	Zip Code	Transaction ID : SA11AI.51991
East Lansing	MI	48823	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="250.00"/>
Name of Employer	Occupation		
Michigan State University	Professor Emeritus		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Dr. Laurence Abrams			Date of Receipt
Mailing Address 510 Bering St.			<input type="text" value="08"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
City	State	Zip Code	Transaction ID : SA11AI.51488
Houston	TX	77057-1452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="125.00"/>
Name of Employer	Occupation		
Self-Employed	Clinical Psychologist		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Dr. Laurence Abrams			Date of Receipt
Mailing Address 510 Bering St.			<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
City	State	Zip Code	Transaction ID : SA11AI.51963
Houston	TX	77057-1452	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="125.00"/>
Name of Employer	Occupation		
Self-Employed	Clinical Psychologist		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>