

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 1192
	(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"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. David McMellon		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2007	
Mailing Address 21975 Country Woods Dr		<b>Transaction ID:</b> IE070402.0010180	
City State Zip Code Fairhope AL 36532-4451	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer McMellon Co. LLC	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Ron McCauley		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2007	
Mailing Address 5601 National Rd E		<b>Transaction ID:</b> IE070402.0010182	
City State Zip Code Richmond IN 47374-2617	Amount of Each Receipt this Period 750.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Toyota Of Richmond	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Celesta M. Regenberg		Date of Receipt M M / D D / Y Y Y Y 04 / 02 / 2007	
Mailing Address PO Box 5031		<b>Transaction ID:</b> IE070402.0010186	
City State Zip Code Madison WI 53705-0031	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Broadcast Accounting Service	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	