

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 320  
(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)  
Deloitte Federal Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Joy Paul Khanna

Mailing Address 200 Berkeley Street

City State Zip Code  
Boston MA 02116

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

Name of Employer Deloitte Consulting LLP Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** PR1331070523630

Amount of Each Receipt this Period  
250.00

P/R Deduction (\$250.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
Carol O Bailey

Mailing Address 111 S. Wacker Drive

City State Zip Code  
Chicago IL 60606

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

Name of Employer Deloitte Consulting LLP Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** PR1331070823630

Amount of Each Receipt this Period  
300.00

P/R Deduction (\$300.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
Tammie C Potvin

Mailing Address 2500 One PPG PI

City State Zip Code  
Pittsburgh PA 15222

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

Name of Employer Deloitte Consulting LLP Occupation Principal

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 3 0 / 2 0 1 0

**Transaction ID:** PR1331071523630

Amount of Each Receipt this Period  
300.00

P/R Deduction (\$300.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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