

**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 27087 OF 32259 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <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)
OBAMA VICTORY FUND 2012

A. Larry D. Stone
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 128

City Birchrunville State PA Zip Code 19421-0128

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

Name of Employer Metron Inc Occupation Chief Scientist/Senior Manager

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 02 / 2012

Transaction ID : C29285046

Amount of Each Receipt this Period
 500.00

B. Lois R. Stone
Full Name (Last, First, Middle Initial)

Mailing Address 13650 Marina Pointe Dr Unit 1605

City Marina Del Rey State CA Zip Code 90292

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

Name of Employer Not Employed Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : C27897774

Amount of Each Receipt this Period
 500.00

C. Mardia Stone
Full Name (Last, First, Middle Initial)

Mailing Address 909 3rd Avenue, #1803

City New York State NY Zip Code 10150-2057

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

Name of Employer Harvard University Occupation Physician/International Public Health

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 05 / 2012

Transaction ID : C29778406

Amount of Each Receipt this Period
 300.00

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 1300.00 |
| TOTAL This Period (last page this line number only).....▶ | |