

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 4576 / 49573
	<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)  
MOVEON.ORG POLITICAL ACTION

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Richardson Mailing Address 508 Margaret St City State Zip Code Key West FL 33040-7134 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 6 <b>Transaction ID:</b> BA1400983 Amount of Each Receipt this Period 50.00 Earmark Contribution Earmark To: VOTEVETS
Name of Employer Occupation Self employed writer Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 275.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Grant Rogers Mailing Address 28 W 38th St Apt 6W City State Zip Code New York NY 10018-6286 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 6 <b>Transaction ID:</b> BA1400942 Amount of Each Receipt this Period 500.00 Earmark Contribution Earmark To: VOTEVETS
Name of Employer Occupation Guggenheim Partners hedge fund mgr Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 800.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Miriam Rosenn Mailing Address 1315 Kouskov St City State Zip Code Kodiaak AK 99615 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 6 <b>Transaction ID:</b> 1360578 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation N/A Retired Physician Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	