

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 145
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Friends of Patrick Murphy**

**A.** Full Name (Last, First, Middle Initial)  
**Joseph Bensmihen**

Mailing Address 17643 Bocaire Way

City State Zip Code  
Boca Raton FL 33487-1121

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

Name of Employer Occupation  
Boca Home Care President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 02 / 2011

**Transaction ID : C7268191**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Janine Bera**

Mailing Address PO Box 582496

City State Zip Code  
Elk Grove CA 95758

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

Name of Employer Occupation  
Kaiser Permanente Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : C7388756**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Janine Bera**

Mailing Address PO Box 582496

City State Zip Code  
Elk Grove CA 95758

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

Name of Employer Occupation  
Kaiser Permanente Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 09 / 26 / 2011

**Transaction ID : C7388787**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00