

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

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

FOR LINE NUMBER: PAGE 74 / 295

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

EMILY's List

**A.**

Full Name (Last, First, Middle Initial)

Ms. Kathy T. Rose

Mailing Address 130 8th Avenue, # 5G

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Merrill Lynch

Occupation

Insurance Risk Manag

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 3 / 2 0 1 1

Transaction ID: 2928217

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Ms. Kay Nosler

Mailing Address 625 Hobart St

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
N/A

Occupation

Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 0 7 / 2 0 1 1

Transaction ID: 2927092

Amount of Each Receipt this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Mr. Kenneth Malcolm Jones

Mailing Address PO Box 45

City

West Tisbury

State

MA

Zip Code

02575

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

REQUESTED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 0 / 2 0 1 1

Transaction ID: 2927447

Amount of Each Receipt this Period

1000.00

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

3250.00

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