

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

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

FOR LINE NUMBER:		PAGE 768 of 1368	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Salazar for Senate

A. Full Name (Last, First, Middle Initial)
John M Scanlan

Mailing Address **P.O. Box 163630**

City **Austin** State **TX** Zip Code **78716-3630**

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

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2004
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **4000.00**

Date of Receipt
09 / 07 / 2004

Transaction ID: **C47722**

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

B. Full Name (Last, First, Middle Initial)
Charles A Sheeley, II

Mailing Address **10405 Chadwell Drive**

City **Reno** State **NV** Zip Code **89521**

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

Name of Employer **Spine Care & Rehab clinic of Carson** Occupation **Nurse Practitioner & R N**

Receipt For: 2004
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **550.00**

Date of Receipt
08 / 05 / 2004

Transaction ID: **C45090**

Amount of Each Receipt this Period
200.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

C. Full Name (Last, First, Middle Initial)
Charles A Sheeley, II

Mailing Address **10405 Chadwell Drive**

City **Reno** State **NV** Zip Code **89521**

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

Name of Employer **Spine Care & Rehab clinic of Carson** Occupation **Nurse Practitioner & R N**

Receipt For: 2004
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **550.00**

Date of Receipt
08 / 09 / 2004

Transaction ID: **C45472**

Amount of Each Receipt this Period
50.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)(1a-1))

SUBTOTAL of Receipts This Page (optional) ▶ **2250.00**

TOTAL This Period (last page this line number only) ▶