

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

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

FOR LINE NUMBER:		PAGE 8 / 3160	
(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

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)  
Santorum 2006

Full Name (Last, First, Middle Initial) <b>A. DR. ANDREW ABELA</b>		Date of Receipt MM / DD / YYYY 07 / 24 / 2006	
Mailing Address 2052 EAKINS COURT		Transaction ID: SA11.10163122	
City RESTON	State VA	Zip Code 20191-1314	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer CATHOLIC UNIV OF AMERICA	Occupation PROFESSOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2900.00		

Full Name (Last, First, Middle Initial) <b>B. DR. ANDREW ABELA</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2006	
Mailing Address 2052 EAKINS COURT		Transaction ID: SA11.10216669	
City RESTON	State VA	Zip Code 20191-1314	Amount of Each Receipt this Period 800.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer CATHOLIC UNIV OF AMERICA	Occupation PROFESSOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2900.00	REFUND TO BE ISSUED	

Full Name (Last, First, Middle Initial) <b>C. DR. ANDREW ABELA</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2006	
Mailing Address 2052 EAKINS COURT		Transaction ID: SA11.10216670	
City RESTON	State VA	Zip Code 20191-1314	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		CONTRIBUTION	
Name of Employer CATHOLIC UNIV OF AMERICA	Occupation PROFESSOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2900.00		

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

2900.00

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