

**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 61 / 91
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
National Organization for Women PAC

Full Name (Last, First, Middle Initial) <b>A. Ms. Sarah Beinecke Richardson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5	
Mailing Address 305 Beavertail Rd		<b>Transaction ID: SA11A1.21849</b>	
City State Zip Code Jamestown, RI 028	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		7345283	
Name of Employer SELF	Occupation PHILANTHROPIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Ms Carol Roggenstein</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 5	
Mailing Address 3852 Dunes Rd		<b>Transaction ID: SA11A1.22144</b>	
City State Zip Code Palm Beach Gardens FL 33410-2348	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. <b>C</b>		5029301	
Name of Employer PALM BEACH COUNTY, FL	Occupation LIBRARIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) <b>C. MD Lucille Rosenberg</b>		Date of Receipt M M / D D / Y Y Y Y 0 7 / 0 8 / 2 0 0 5	
Mailing Address 3431 N Lake Dr		<b>Transaction ID: SA11A1.19282</b>	
City State Zip Code Milwaukee, WI 532	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>		4372769	
Name of Employer	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	570.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)