

**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 7 OF 82
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 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)
Todd Lally for Congress

A. Full Name (Last, First, Middle Initial)
Vivek Sarin

Mailing Address 14644 Cressington Circle

City Louisville State KY Zip Code 40245-8463

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

Name of Employer Self Employed Occupation Self employed

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 02 / 2010

Transaction ID : A-C502

Amount of Each Receipt this Period
250

B. Full Name (Last, First, Middle Initial)
Michael A. Jones

Mailing Address 547 Sunnyside Drive

City Louisville State KY Zip Code 40206-2918

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

Name of Employer highland cleaners Occupation owner

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2010

Transaction ID : A-C592

Amount of Each Receipt this Period
1000

C. Full Name (Last, First, Middle Initial)
Daniel Santos CLU

Mailing Address 1000 Alta Vista Road

City Louisville State KY Zip Code 40205-1728

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

Name of Employer NY Life Occupation Insurance Sales

Receipt For: 2010
 Primary General
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2010

Transaction ID : A-C469

Amount of Each Receipt this Period
500

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

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

1750.00