

**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 24 OF 103		
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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)  
**Friends of Gary DeLong**

**A.** Full Name (Last, First, Middle Initial)  
**Virginia Shlemmer**

Mailing Address 230 Park Ave

City Long Beach State CA Zip Code 90803

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

Name of Employer Shlemmer Investments Occupation Property Manager

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 29 / 2011

**Transaction ID : INCA61**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Scott Braly**

Mailing Address 5700 Bayshore Walk

City Long Beach State CA Zip Code 90803

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

Name of Employer CSULB Occupation Athletic Program

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : INCA62**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Robert Garey**

Mailing Address 3602 Aquarius Dr

City Huntington Beach State CA Zip Code 92649

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

Name of Employer Cushman & Wakefield Occupation Real Estate Sales

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 31 / 2011

**Transaction ID : INCA63**

Amount of Each Receipt this Period  
250.00

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

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

1500.00