

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 125
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Chris Wakim for Congress

Full Name (Last, First, Middle Initial) <b>A. Mrs. Cathy Baliker</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 14 / 2006
Mailing Address 1126 Blue Horizon Dr.		Transaction ID: SA11A1.6917
City State Zip Code Morgantown WV 26501	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Danny's Door Service Owner	Election Cycle-to-Date 450.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Danny Baliker</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006
Mailing Address 1126 Blue Horizon Drive		Transaction ID: SA11A1.6907
City State Zip Code Morgantown WV 26501	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Self Sales	Election Cycle-to-Date 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Maxima Barcinas</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006
Mailing Address PO Box 160		Transaction ID: SA11A1.6913
City State Zip Code Bridgeport WV 26330	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Self Physician	Election Cycle-to-Date 1100.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	