

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

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

FOR LINE NUMBER: PAGE 27 / 168

(check only one)

| | | | | | | | | | |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|
| <input checked="" type="checkbox"/> | 11a | <input type="checkbox"/> | 11b | <input type="checkbox"/> | 11c | <input type="checkbox"/> | 11d | <input type="checkbox"/> | 15 |
| | 12 | | 13a | | 13b | | 14 | | |

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NAME OF COMMITTEE (In Full)
Beilenson for Congress

| | | |
|--|------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Mr. Mark Caplan | | Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2005 |
| Mailing Address 8 Cotswald RD | | Transaction ID: C456 |
| City | State | Zip Code |
| Baltimore | MD | 21210 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.00 |
| Name of Employer The Time Group | Occupation President | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|--|------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Ms. Jackie Carrera | | Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2005 |
| Mailing Address 4832 Kenswick RD | | Transaction ID: C490 |
| City | State | Zip Code |
| Baltimore | MD | 21210 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Parks and People | Occupation Executive Director | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | | |
|--|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Dr. Ben Carson | | Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2005 |
| Mailing Address 15117 N. Old Hanover RD | | Transaction ID: C236 |
| City | State | Zip Code |
| Upperco | MD | 21155 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 250.00 |
| Name of Employer Johns Hopkins | Occupation Physician | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼ | Election Cycle-to-Date ▼ 250.00 | |

| | |
|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1000.00 |
| TOTAL This Period (last page this line number only) | |