

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 29
	<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)
Foley & Lardner Political Fund, Inc.

A. Erens, Jay, , Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1260 N Astor St #9

City Chicago	State IL	Zip Code 60610
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foley & Lardner LLP	Occupation (for Individual) Attorney
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.24040

Amount of Each Receipt this Period
50.00

Memo Item
 Payroll Deduction

B. Gills, Jeanne, M., Ms.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 516 N. Claremont Avenue

City Chicago	State IL	Zip Code 60612
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foley & Lardner LLP	Occupation (for Individual) Attorney
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.24041

Amount of Each Receipt this Period
25.00

Memo Item
 Payroll Deduction

C. Guthrie, William, C., Mr.,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1226 Austin Road

City Orlando	State FL	Zip Code 32806
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foley & Lardner LLP	Occupation (for Individual) Attorney
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Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		31		2017

Transaction ID : SA11AI.24042

Amount of Each Receipt this Period
25.00

Memo Item
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	