

# 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 6 / 20
	<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

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)  
SCOOTER STORE, INC. POLITICAL ACTION COMMITTEE; THE

<b>A.</b>	Full Name (Last, First, Middle Initial) Mark W Allen		Date of Receipt
	Mailing Address 27 Timber Meadow		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 01 / 2010
	City	State	Zip Code
	New Braunfels	TX	78132
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer The SCOOTER Store		Occupation Operations Management	<b>Transaction ID:</b> SA11AI.6483
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 250.00
		<input type="text"/> 2000.00	\$250/pay period

<b>B.</b>	Full Name (Last, First, Middle Initial) Mark W Allen		Date of Receipt
	Mailing Address 27 Timber Meadow		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 15 / 2010
	City	State	Zip Code
	New Braunfels	TX	78132
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer The SCOOTER Store		Occupation Operations Management	<b>Transaction ID:</b> SA11AI.6484
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 250.00
		<input type="text"/> 2250.00	\$250/pay period

<b>C.</b>	Full Name (Last, First, Middle Initial) David C Berger		Date of Receipt
	Mailing Address 354 Hueco Ridge		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 15 / 2010
	City	State	Zip Code
	New Braunfels	TX	78132
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer The SCOOTER Store		Occupation Healthcare Relations Analysis	<b>Transaction ID:</b> SA11AI.6437
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 200.00
		<input type="text"/> 304.00	\$200/pay period

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 700.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>