

**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 OF 11
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)  
**NEW MAJORITY CALIFORNIA FEDERAL PAC**

**A. PAUL F. FOLINO**  
Full Name (Last, First, Middle Initial)

Mailing Address 30021 TOMAS STREET, SUITE 300

City	State	Zip Code
RANCHO SANTA MARGA	CA	92688

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

Name of Employer	Occupation
RETIRED	NONE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 18 / 2012

**Transaction ID : INCA685**

Amount of Each Receipt this Period  
 2500.00

**B. ROBERT SHILLMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 6857 RANCHO VALENCIA ROAD

City	State	Zip Code
Rancho Santa Fe	CA	92067

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

Name of Employer	Occupation
COGNEX CORPORATION	CHAIRMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2012

**Transaction ID : INCA686**

Amount of Each Receipt this Period  
 5000.00

**C. GERALD BRIGGS**  
Full Name (Last, First, Middle Initial)

Mailing Address 9802 SALINE DRIVE

City	State	Zip Code
Huntington Beach	CA	92646

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

Name of Employer	Occupation
PHARMACY CONSULTANT SERVICES, INC.	PRESIDENT/CLINICAL PHARMACIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 24 / 2012

**Transaction ID : INCA688**

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	