

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 45 / 84
	(check only one)	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
PAUL GOSAR FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Dr. Scott L. Theurer		Date of Receipt
	Mailing Address 1340 N. 600 E Ste. 1		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Logan	UT	84341
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5468
Name of Employer Theurer Dental		Occupation Dentist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="500.00"/>	Check

B.	Full Name (Last, First, Middle Initial) Dr. Bart Thompson		Date of Receipt
	Mailing Address 7110 E. McDonald Ste A-3		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Scottsdale	AZ	85253
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.5378
Name of Employer Thompson Dental		Occupation Dentist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	Credit Card

C.	Full Name (Last, First, Middle Initial) Michael R. Thompson		Date of Receipt
	Mailing Address 6223 E Everett Drive		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Scottsdale	AZ	85254
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4911
Name of Employer Thompson Dental		Occupation Dentist	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="300.00"/>	Credit Card

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="600.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>