

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 84
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
PAUL GOSAR FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Michael R. Thompson

Mailing Address 6223 E Everett Drive

City State Zip Code
Scottsdale AZ 85254

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

Name of Employer Occupation
Thompson Dental Dentist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 9

Transaction ID: SA11AI.5375

Amount of Each Receipt this Period
200.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Dr. Roger Triftshauer

Mailing Address 63 Ellicott Ave.

City State Zip Code
Batavia NY 14020

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

Name of Employer Occupation
Triftshauer Dental Dentist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 9

Transaction ID: SA11AI.4814

Amount of Each Receipt this Period
250.00

Check

C. Full Name (Last, First, Middle Initial)
Dr. W. Mark Tucker

Mailing Address 724 Druid Hills Rd.

City State Zip Code
Tampa FL 33617

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

Name of Employer Occupation
Dept of Veterans Affairs Dentist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.5152

Amount of Each Receipt this Period
200.00

Credit Card

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶