

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 7 / 14
	<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)
KIDSPAC

A.

Full Name (Last, First, Middle Initial) David M. Wark		Date of Receipt MM / DD / YYYY 08 / 20 / 2009
Mailing Address 1588 Northrup Street		Transaction ID: C1403
City Falcon Heights	State MN	Zip Code 55108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Self-Employed	Occupation Psychologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B.

Full Name (Last, First, Middle Initial) Mary Ann B. Wark		Date of Receipt MM / DD / YYYY 08 / 20 / 2009
Mailing Address 1588 Northrup Street		Transaction ID: C1404
City Falcon Heights	State MN	Zip Code 55108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Jean Lyle Children's Center	Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	20250.00