

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 75
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Bert Miller for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT E. KING**

Mailing Address 15W090 SEDGLEY RD.

City State Zip Code  
BURR RIDGE IL 60527-5281

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
RASMUSSEN, INC. EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.98**

Amount of Each Receipt this Period

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRED A. KREHBIEL**

Mailing Address 505 S COUNTY LINE RD.

City State Zip Code  
HINSDALE IL 60521-4725

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MOLEX EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.19**

Amount of Each Receipt this Period

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. FRED A. KREHBIEL**

Mailing Address 505 S COUNTY LINE RD.

City State Zip Code  
HINSDALE IL 60521-4725

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
MOLEX EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : SA11.194**

Amount of Each Receipt this Period

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....