

**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 4 OF 8 | |
| <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"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
INTERNATIONAL CHIROPRACTORS ASSOCIATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Riekeman, Cathy

Mailing Address
2001 Sam Mateo Blvd, NE

City State Zip Code
Albuquerque NM 87110

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

Name of Employer Occupation
Self-Employed Doctor of Chiropractic

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **\$1,000.00**
committee donation

Date of Receipt
MM / DD / YYYY
03 01 2011

Amount of Each Receipt this Period
\$1,000.00

Full Name (Last, First, Middle Initial)
B. Benson, Ronald M.

Mailing Address
2471 Berryessa Road

City State Zip Code
San Jose CA 95133

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

Name of Employer Occupation
Self-Employed Doctor of Chiropractic

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **\$250.00**
committee donation

Date of Receipt
MM / DD / YYYY
03 08 2011

Amount of Each Receipt this Period
\$250.00

Full Name (Last, First, Middle Initial)
C. Walsemann, Gary L.

Mailing Address
104 Cody Road

City State Zip Code
Alexander City AL 35010

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

Name of Employer Occupation
Self-Employed Doctor of Chiropractic

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **\$625.00**
committee donation

Date of Receipt
MM / DD / YYYY
03 01 2011

Amount of Each Receipt this Period
\$500.00

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

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

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