

**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 11 OF 29
	<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)  
**Foley & Lardner Political Fund, Inc.**

**A. Fowler, Kevin, D., Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1510 Lancaster Drive

City Orlando	State FL	Zip Code 32806
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foley & Lardner LLP	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

**Transaction ID : SA11AI.25065**

Amount of Each Receipt this Period  
25.00

Memo Item  
 Payroll Deduction

**B. Gills, Jeanne, M., Ms.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 516 N. Claremont Avenue

City Chicago	State IL	Zip Code 60612
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foley & Lardner LLP	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

**Transaction ID : SA11AI.25066**

Amount of Each Receipt this Period  
25.00

Memo Item  
 Payroll Deduction

**C. Guthrie, William, C., Mr.,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1226 Austin Road

City Orlando	State FL	Zip Code 32806
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Foley & Lardner LLP	Occupation (for Individual) Attorney
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Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		30		2018

**Transaction ID : SA11AI.25067**

Amount of Each Receipt this Period  
25.00

Memo Item  
 Payroll Deduction

<b>SUBTOTAL</b> of Receipts This Page (optional).....	75.00
<b>TOTAL</b> This Period (last page this line number only).....	