

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

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

FOR LINE NUMBER: PAGE 57 OF 63  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Thompson Coburn Political Action Committee**

**A. Mark S. Weisberg**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 East Monroe Street  
 37th Floor  
 City Chicago State IL Zip Code 60603  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Thompson Coburn LLP Occupation Attorney  
 Receipt For: 2016  
 Primary     General  
 Other (specify) ▼  
 Calender Year 2016

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11Ai-CN5336**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Barry M. Weisz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2029 Century Park East  
 19th Floor  
 City Los Angeles State CA Zip Code 90067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Thompson Coburn LLP Occupation Attorney  
 Receipt For: 2016  
 Primary     General  
 Other (specify) ▼  
 Calender Year 2016

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11Ai-CN5337**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Brandi M. Wilson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One US Bank Plaza  
 27th Floor  
 City Saint Louis State MO Zip Code 63101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Thompson Coburn LLP Occupation Attorney  
 Receipt For: 2016  
 Primary     General  
 Other (specify) ▼  
 Calender Year 2016

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 08 / 2016  
**Transaction ID : SA11Ai-CN5338**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 220.00  
**TOTAL** This Period (last page this line number only)..... ▶