

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 / 259
	<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)  
NORPAC

<b>A.</b> Full Name (Last, First, Middle Initial) Sheldon Zelig Mailing Address 175 Maple St. City Englewood State NJ Zip Code 07631 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2005 <b>Transaction ID:</b> SA11A1.13806 Amount of Each Receipt this Period 180.00 Conduit Berkley <b>[MEMO ITEM]</b>
Name of Employer self Occupation attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>B.</b> Full Name (Last, First, Middle Initial) Stephen Zelkowicz Mailing Address 752 West End Ave Apt 7E City New York State NY Zip Code 10025 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2005 <b>Transaction ID:</b> SA11A1.13904 Amount of Each Receipt this Period 250.00 Conduit Engel <b>[MEMO ITEM]</b>
Name of Employer Wynnefield Capital Mgmt Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>C.</b> Full Name (Last, First, Middle Initial) Edward Zizmor Mailing Address 1255 Mercedes St City Teaneck State NJ Zip Code 07666 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 24 / 2005 <b>Transaction ID:</b> SA11A1.13890 Amount of Each Receipt this Period 250.00 Conduit Cardin for Senate <b>[MEMO ITEM]</b>
Name of Employer Self Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ .00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	89335.00