

**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 6 OF 10
	<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)  
**HOUSE MAJORITY TRUST**

Full Name (Last, First, Middle Initial) <b>A. Eastern Band of Cherokee Indians</b>		Date of Receipt
Mailing Address P.O. Box 455		<input type="text" value="10"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City Cherokee	State NC	Zip Code 28719
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.5127</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="10000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="10000.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Michael L. Goguen</b>		Date of Receipt
Mailing Address 489 Fletcher Drive		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>
City Atherton	State CA	Zip Code 94027
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.5133</b>
Name of Employer Sequoia Capital		Amount of Each Receipt this Period
Occupation Venture capitalist		<input type="text" value="32400.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="32400.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Robert A. Ortenzio</b>		Date of Receipt
Mailing Address 4714 Gettysburg Road		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2014"/>
City Mechanicsburg	State PA	Zip Code 17055
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.5135</b>
Name of Employer Select Medical Holding		Amount of Each Receipt this Period
Occupation CEO		<input type="text" value="32400.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="32400.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="74800.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>