

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

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

FOR LINE NUMBER: PAGE 87 / 258
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Tom DeLay Congressional Committee

Full Name (Last, First, Middle Initial) A. Lawrence Gelman		Date of Receipt M / D / Y 04 / 11 / 2005
Mailing Address 3900 Sundown Dr		Transaction ID: 50628.C21611
City McAllen	State TX	Zip Code 78503-1367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer McAllen Anesthesia Consult- ants	Occupation M.D.	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Lawrence Gelman		Date of Receipt M / D / Y 05 / 15 / 2005
Mailing Address 3900 Sundown Dr		Transaction ID: 50628.C21711
City McAllen	State TX	Zip Code 78503-1367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer McAllen Anesthesia Consult- ants	Occupation M.D.	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Maria Gelman		Date of Receipt M / D / Y 04 / 22 / 2005
Mailing Address 3900 Sundown Dr		Transaction ID: 50628.C21689
City McAllen	State TX	Zip Code 78503-1367
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Homemaker	Occupation Homemaker	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	