

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 9  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)  
Alzheimer's Action PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jeannine C. Vradenburg</p> <p>Mailing Address 2141 Bradley Pl</p> <hr/> <p>City State Zip Code Chicago IL 60618-4909</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Student Occupation Student</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">01 / 21 / 2010</span></p> <p><b>Transaction ID:</b> SA11AI.4469</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Patricia Vradenburg</p> <p>Mailing Address 2901 Woodland Drive, NW</p> <hr/> <p>City State Zip Code Washington DC 20008</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer self-employed Occupation writer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">01 / 21 / 2010</span></p> <p><b>Transaction ID:</b> SA11AI.4468</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Tyler Seth Vradenburg</p> <p>Mailing Address 2141 Bradley Pl</p> <hr/> <p>City State Zip Code Chicago IL 60618-4909</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Loyola Academy Occupation Guidance Counselor</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">01 / 21 / 2010</span></p> <p><b>Transaction ID:</b> SA11AI.4470</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">5000.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">15000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">38500.00</span>