

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

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

FOR LINE NUMBER: PAGE 17 / 29  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MOUNTAIN LEADERSHIP PAC

**A.** Full Name (Last, First, Middle Initial)  
Dr. Charles C. Thomas, II

Mailing Address 21 East Forest Rd

City State Zip Code  
Asheville NC 28803

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Physican

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 1 0

**Transaction ID:** SA11AI.5351

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Sandra Watson

Mailing Address 106 Holly Lane

City State Zip Code  
Brevard NC 28712

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation  
Information Requested

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 1 0

**Transaction ID:** SA11AI.5118

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Ethan Wingfield

Mailing Address 331 Center Street NE

City State Zip Code  
Vienna VA 22180

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation  
Business Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 3 / 2 0 1 0

**Transaction ID:** SA11AI.5333

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1650.00

**TOTAL** This Period (last page this line number only) ..... ►