

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

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

FOR LINE NUMBER: PAGE 84 / 175  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Roxanne Conlin for Senate

**A.**

Full Name (Last, First, Middle Initial)  
Roxanne Conlin

Mailing Address PO Box 876

City State Zip Code  
Des Moines IA 50304-0876

FEC ID number of contributing federal political committee. **C** S0IA00127

Name of Employer Self Occupation  
Self Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1064869.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 30 / 2010

Transaction ID: C2280653

Amount of Each Receipt this Period  
53.50

\* In-Kind: Gas

**B.**

Full Name (Last, First, Middle Initial)  
Roxanne Conlin

Mailing Address PO Box 876

City State Zip Code  
Des Moines IA 50304-0876

FEC ID number of contributing federal political committee. **C** S0IA00127

Name of Employer Self Occupation  
Self Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1064869.12

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2010

Transaction ID: C2280654

Amount of Each Receipt this Period  
44.00

\* In-Kind: Gas

**C.**

Full Name (Last, First, Middle Initial)  
Roxanne Conlin

Mailing Address PO Box 876

City State Zip Code  
Des Moines IA 50304-0876

FEC ID number of contributing federal political committee. **C** S0IA00127

Name of Employer Self Occupation  
Self Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2204.61

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 04 / 2010

Transaction ID: C2280655

Amount of Each Receipt this Period  
788.44

\* In-Kind: Room Rental and Refreshments

SUBTOTAL of Receipts This Page (optional) ..... 885.94

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

10021012517