

**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 9
	<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	

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NAME OF COMMITTEE (In Full)  
**DORSEY NATIONAL FUND**

Full Name (Last, First, Middle Initial) <b>A. Michael Ahern</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2011
Mailing Address 50 South Sixth Street		<b>Transaction ID : SA11AI.6461</b>
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Dorsey & Whitney LLP	Occupation Lawyer	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

Full Name (Last, First, Middle Initial) <b>B. Lynnette S Crandall</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2011
Mailing Address 50 South Sixth Street STE 1500		<b>Transaction ID : SA11AI.6462</b>
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Dorsey & Whitney LLP	Occupation Lawyer	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

Full Name (Last, First, Middle Initial) <b>C. Philippe Oman</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2011
Mailing Address 50 South Sixth Street		<b>Transaction ID : SA11AI.6463</b>
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Dorsey & Whitney LLP	Occupation Accountant	<b>[MEMO ITEM]</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.00
<b>TOTAL</b> This Period (last page this line number only).....▶	