

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

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

FOR LINE NUMBER: PAGE 8/14

(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
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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)  
Red PAC

Full Name (Last, First, Middle Initial) <b>A. Mr. Clayton Hollis</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2004
Mailing Address 1385 Jefferson Drive		Transaction ID: SA11A1.4119
City Lakeland	State FL	Zip Code 33803
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2004 1000.00
Name of Employer Public	Occupation Executive	Aggregate Year-to-Date ▼ 1000.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Frank LaPietra</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2004
Mailing Address 839 - 1st Street South		Transaction ID: SA11A1.4146
City Winter Haven	State FL	Zip Code 33880
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2004 250.00
Name of Employer State Farm Insurance Companies	Occupation Executive	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mr. Andrew LaVigna</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2004
Mailing Address 1130 E. Highland Drive		Transaction ID: SA11A1.4148
City Lakeland	State FL	Zip Code 33813
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2004 250.00
Name of Employer Florida Citrus Mutual	Occupation Executive	Aggregate Year-to-Date ▼ 250.00
Receipt For: Primary      General Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	▶	