

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

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

FOR LINE NUMBER: PAGE 70/143

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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)

Hilary for Senate

Full Name (Last, First, Middle Initial) <b>A. Robert Lipman</b>		Date of Receipt MM / DD / YYYY 09 / 10 / 2005	
Mailing Address 411 Great Circle Rd		Transaction ID: 51013.C1170	
City Nashville	State TN	Zip Code 37208-1408	Amount of Each Receipt this Period 1900.00
FEC ID number of contributing federal political committee C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer Lipman Brothers	Occupation Owner	Election Cycle-to-Date 4000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Frank Louthan</b>		Date of Receipt MM / DD / YYYY 09 / 21 / 2005	
Mailing Address 1418 Hawthorn Pl		Transaction ID: 51013.C1248	
City Murfreesboro	State TN	Zip Code 37130-1131	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer Stone Creek Medical Center	Occupation Physician	Election Cycle-to-Date 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. William Lusk</b>		Date of Receipt MM / DD / YYYY 08 / 15 / 2005	
Mailing Address 600 Highwater Rd		Transaction ID: 51013.C1050	
City Dayton	State TN	Zip Code 37321-5897	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)(4)41a-1)	
Name of Employer n/a	Occupation Retired	Election Cycle-to-Date 1800.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	3000.00
TOTAL This Period (last page this line number only)	

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