

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 216

<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
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)

**LIBERTARIAN NATIONAL COMMITTEE, INC.**

Full Name (Last, First, Middle Initial)

**A. Mr. Richard F. Guill**

Mailing Address 499 Bowler Creek Rd

City

Pamplin

State

VA

Zip Code

23958-3809

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Central BA Community Services

Occupation

Therapist

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			02			2015					

**Transaction ID : SA11AI.34836**

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

**B. Mr. David C. Gustman**

Mailing Address 19670 Beach Rd Apt 614

City

Tequesta

State

FL

Zip Code

33469-2857

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			02			2015					

**Transaction ID : SA11AI.34843**

Amount of Each Receipt this Period

25.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Donna Harmon**

Mailing Address 615 W Riverwood Dr Apt 311

City

Oak Creek

State

WI

Zip Code

53154-8600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			01			2015					

**Transaction ID : SA11AI.34880**

Amount of Each Receipt this Period

50.00

Contribution

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

100.00

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