

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 93
(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)
Ciro Rodriguez for Congress

A.

Full Name (Last, First, Middle Initial) Larry Zinn		Date of Receipt MM / DD / YYYY 11 / 29 / 2005
Mailing Address 126 W. Hollywood		Transaction ID: C2951
City San Antonio	State TX	Zip Code 78212
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer TRLA/COSA	Occupation Lawyer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) Gale, Wilson & Sanchez, LLC		Date of Receipt MM / DD / YYYY 11 / 11 / 2005
Mailing Address 115 E. Travis Suite 618		Transaction ID: C1689229
City San Antonio	State TX	Zip Code 78205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

LLC - Members below if it-
emized. Permissible funds.

C.

Full Name (Last, First, Middle Initial) Jim Harrison		Date of Receipt MM / DD / YYYY 11 / 30 / 2005
Mailing Address 3500 N. County Road 25		Transaction ID: C2962
City Big Spring	State TX	Zip Code 79720
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Dentist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page this line number only)	