

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 715	
	<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

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NAME OF COMMITTEE (In Full)
Tom Smith for Senate Inc.

Full Name (Last, First, Middle Initial) Kenneth E Taylor		Date of Receipt MM / DD / YYYY 11 / 06 / 2012	
Mailing Address 19510 Argyle Oval		Transaction ID : AB7358E80B789454B852	
City Rocky River	State OH	Zip Code 44116-1604	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		Occupation Business Executive	
Name of Employer Ohio CAT		Election Cycle-to-Date 2500.00	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Carol C Loeffler		Date of Receipt MM / DD / YYYY 11 / 04 / 2012	
Mailing Address 4 Vine Drive		Transaction ID : AE3885CD041224186AE5	
City Carlisle	State PA	Zip Code 17015-9559	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Occupation associate professor	
Name of Employer Dickinson College		Election Cycle-to-Date 250.00	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) Jeffrey Snyder		Date of Receipt MM / DD / YYYY 11 / 05 / 2012	
Mailing Address 2715 Deninger Rd		Transaction ID : A86D98495678B454DA7B	
City York	State PA	Zip Code 17406-9775	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Occupation Vice President	
Name of Employer PEOPLE'S BANK		Election Cycle-to-Date 2000.00	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	3050.00
TOTAL This Period (last page this line number only).....	

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