

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 25
	<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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NAME OF COMMITTEE (In Full)  
**Hallmark Cards PAC**

**A. Jim Hernandez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14800 Catalina  
 City Kansas City State KS Zip Code 64108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hallmark Marketing Company, LLC Occupation Regional VP Gold Crown  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 237.50

Date of Receipt 09 / 30 / 2015  
**Transaction ID : PR107170210933**  
 Amount of Each Receipt this Period 12.50  
 P/R Deduction (\$12.50 Semi-Monthly)

**B. Ellen McKeever Junger**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6557 High Dr  
 City Kansas City State KS Zip Code 64108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hallmark Cards, Inc. Occupation Sr VP - Consumer Solutions  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : PR107204810933**  
 Amount of Each Receipt this Period 25.00  
 P/R Deduction (\$25.00 Semi-Monthly)

**C. Barry Michael Katz**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12608 W. 130th Terrace  
 City Kansas City State KS Zip Code 64108  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Hallmark Cards, Inc. Occupation Associate General Cnsl Litigtn  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 09 / 30 / 2015  
**Transaction ID : PR107207910933**  
 Amount of Each Receipt this Period 20.00  
 P/R Deduction (\$20.00 Semi-Monthly)

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 57.50  
**TOTAL** This Period (last page this line number only)..... ▶