

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

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

FOR LINE NUMBER: PAGE 6 / 10

(check only one)

<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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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)
Professional Insurance Agents Political Action Committee

Full Name (Last, First, Middle Initial) A. Mr. Donald H. Flanders		Date of Receipt M / D / Y 12 / 21 / 2004
Mailing Address 208 Union Avenue		Transaction ID: R49687
City Laconia	State NH	Zip Code 03246
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Bysa Agency, Inc.	Occupation Insurance Agent	Credit Card
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. Mr. Lewis L. Wilson		Date of Receipt M / D / Y 12 / 15 / 2004
Mailing Address 151 East Main Street		Transaction ID: R49685
City Cobleskill	State NY	Zip Code 12043
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Fire Mark Insurance Agency Inc	Occupation Insurance Agent	Credit Card
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	500.00