

**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 285 OF 306
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Thompson Coburn Political Action Committee**

**A. Wuller, Roman, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One US Bank Plaza  
 27th Floor  
 City Saint Louis State MO Zip Code 63101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Thompson Coburn LLP Occupation (for Individual) Attorney  
 Receipt For: 2017  
 Primary  General  
 Other (specify) **Calendar Year 2017**  
 Aggregate Year-to-Date **1350.00**

Date of Receipt **09 / 05 / 2017**  
**Transaction ID : SA11Ai-CN7254**  
 Amount of Each Receipt this Period **150.00**  
 Memo Item

**B. Wuller, Roman, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One US Bank Plaza  
 27th Floor  
 City Saint Louis State MO Zip Code 63101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Thompson Coburn LLP Occupation (for Individual) Attorney  
 Receipt For: 2015  
 Primary  General  
 Other (specify) **Calendar Year 2015**  
 Aggregate Year-to-Date **1500.00**

Date of Receipt **10 / 03 / 2017**  
**Transaction ID : SA11Ai-CN7395**  
 Amount of Each Receipt this Period **150.00**  
 Memo Item

**C. Wuller, Roman, P., ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address One US Bank Plaza  
 27th Floor  
 City Saint Louis State MO Zip Code 63101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Thompson Coburn LLP Occupation (for Individual) Attorney  
 Receipt For: 2017  
 Primary  General  
 Other (specify) **Calendar Year 2017**  
 Aggregate Year-to-Date **1650.00**

Date of Receipt **11 / 03 / 2017**  
**Transaction ID : SA11Ai-CN7536**  
 Amount of Each Receipt this Period **150.00**  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	