

**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 56 OF 61
<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)
Thompson Coburn Political Action Committee

A. David A. Warfield
Full Name (Last, First, Middle Initial)

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 Thompson Coburn LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) **Calender Year 2016**

Aggregate Year-to-Date **600.00**

Date of Receipt **06 / 08 / 2016**

Transaction ID : SA11Ai-CN5016

Amount of Each Receipt this Period **100.00**

Memo Item

B. Sherrie L. Waser
Full Name (Last, First, Middle Initial)

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 Occupation

Receipt For: 2016
 Primary General
 Other (specify) **Calender Year 2016**

Aggregate Year-to-Date **.00**

Date of Receipt **06 / 15 / 2016**

Transaction ID : SA11Ai-CN5025

Amount of Each Receipt this Period **580.00**

Memo Item

MEMO EXEMPT Exempt Legal/Accounting

c. Mark S. Weisberg
Full Name (Last, First, Middle Initial)

Mailing Address 55 East Monroe Street
37th Floor

City Chicago State IL Zip Code 60603

FEC ID number of contributing federal political committee. **C**

Name of Employer Thompson Coburn LLP Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) **Calender Year 2016**

Aggregate Year-to-Date **600.00**

Date of Receipt **06 / 08 / 2016**

Transaction ID : SA11Ai-CN5017

Amount of Each Receipt this Period **100.00**

Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	