

**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 6 OF 9
	<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)  
**COMMUNITY FINANCIAL SERVICES ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Fraser MacKechnie</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2013 <b>Transaction ID : SA11AI.6149</b>
Mailing Address 371 Channelside Walkway Unit 1402		Amount of Each Receipt this Period 2500.00
City Tampa	State FL	
Zip Code 33602	FEC ID number of contributing federal political committee. C	
Name of Employer Amscot Financial	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. Ian MacKechnie</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2013 <b>Transaction ID : SA11AI.6148</b>
Mailing Address 49020 Andros Drive		Amount of Each Receipt this Period 2500.00
City Tampa	State FL	
Zip Code 33629	FEC ID number of contributing federal political committee. C	
Name of Employer Amscot Financial	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. Ian A. MacKechnie</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2013 <b>Transaction ID : SA11AI.6147</b>
Mailing Address 921 Harbour Bay Drive		Amount of Each Receipt this Period 5000.00
City Tampa	State FL	
Zip Code 33602	FEC ID number of contributing federal political committee. C	
Name of Employer Amscot Financial	Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	