

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 / 137 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Adrian Smith for Congress

A. Full Name (Last, First, Middle Initial)
Margaret Welch

Mailing Address 1102 W. 12th Street

City State Zip Code
Hastings NE 68901

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

Name of Employer Self Occupation
Housewife

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: AC3F364E641204094962

Amount of Each Receipt this Period
200.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Dr. Casey Iverson

Mailing Address PO Box 2371

City State Zip Code
Grand Island NE 68802

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

Name of Employer Self Occupation
Chiropractor

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: A6890C3EB629740748A1

Amount of Each Receipt this Period
200.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Byron Boslau

Mailing Address 6816 Forest Lake Boulevard

City State Zip Code
Lincoln NE 68516

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

Name of Employer Farmers Mutual of Nebraska Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: AE236464A1E6C477EA07

Amount of Each Receipt this Period
250.00

Check
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **650.00**

TOTAL This Period (last page this line number only) ▶