

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 231

(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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NAME OF COMMITTEE (In Full)

COUNCIL FOR A LIVABLE WORLD CANDIDATE FUND

A.

Full Name (Last, First, Middle Initial)

Thomas E Leggat

Mailing Address 81 Baker Bridge Rd

City

Lincoln

State

MA

Zip Code

01773-3100

FEC ID number of contributing
federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	8	/	2	0	0	9

Transaction ID: SA11AI.8672

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Milton Leitenberg

Mailing Address 14720 Seneca Castle Ct

City

North Potomac

State

MD

Zip Code

20878-2402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	5	/	2	0	0	9

Transaction ID: SA11AI.9139

Amount of Each Receipt this Period

50.00

Earmark to Robin Carnahan
(MO-00S)**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Milton Leitenberg

Mailing Address 14720 Seneca Castle Ct

City

North Potomac

State

MD

Zip Code

20878-2402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.9140

Amount of Each Receipt this Period

50.00

Earmark to Michael F. Ben-
net (CO-00S)**[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)