

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 220 OF 732	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Alaskans for Begich 2014

Full Name (Last, First, Middle Initial) June P Vezina			Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address 1420 I Street			Transaction ID : C9703099	
City Anchorage	State AK	Zip Code 99501	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Information Requested		Occupation Information Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) David Victor			Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address 401 S Old Woodward Ave Ste 333			Transaction ID : C9701374	
City Birmingham	State MI	Zip Code 48009-6612	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer American Education Institute		Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) Kathleen Villacorta			Date of Receipt M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address 2057 Florida Ave			Transaction ID : C9703102	
City Tallahassee	State FL	Zip Code 32303-5173	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Self-Employed		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	, , 1500.00
TOTAL This Period (last page this line number only).....	, , .

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