

**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 120 OF 389
	<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)
Rubio Victory Committee

Full Name (Last, First, Middle Initial) A. MR. LUKE T. JACOBS		Date of Receipt
Mailing Address 120 W. TUPPER STREET		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
BUFFALO	NY	14201-2170
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.712308
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS	<input type="text" value="2500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	CONTRIBUTION
	<input type="text" value="2500.00"/>	

Full Name (Last, First, Middle Initial) B. MS. PAMELA R. JACOBS		Date of Receipt
Mailing Address 33 GATES CIRCLE #10B		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2014"/>
City	State	Zip Code
BUFFALO	NY	14209-1197
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.709832
Name of Employer	Occupation	Amount of Each Receipt this Period
INFORMATION REQUESTED PER BEST EFFORTS	INFORMATION REQUESTED PER BEST EFFORTS	<input type="text" value="1000.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	CONTRIBUTION
	<input type="text" value="1000.00"/>	

Full Name (Last, First, Middle Initial) C. MS. PATRICIA L. JACOBSEN		Date of Receipt
Mailing Address 7940 AMALFI WAY		<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
FAIR OAKS	CA	95628-5903
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11.694080
Name of Employer	Occupation	Amount of Each Receipt this Period
RETIRED	RETIRED	<input type="text" value="75.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	CONTRIBUTION
	<input type="text" value="425.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="3575.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>