

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 144
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Barbara Lee for Congress

A. Full Name (Last, First, Middle Initial)
Bertram Lubin, M.D.
Mailing Address 117 Parkside Drive

City State Zip Code
Berkeley CA 94705

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

Name of Employer Childrens Hospital Oakland Occupation Physician

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	7

Transaction ID: 11 ai-20707

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Henry Lucas, DDS
Mailing Address 5019 Diamond Heights Blvd

City State Zip Code
San Francisco CA 94131

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

Name of Employer Henry Lucas, DDS Occupation Dentist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	5	/	2	0	0	7

Transaction ID: 11 ai-20555

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Susan (BAD ADDRESS) Maher
Mailing Address NO GOOD:1300 Dolores Street

City State Zip Code
San Francisco CA 94114

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

Name of Employer Self Occupation CPA

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	5	/	2	0	0	7

Transaction ID: 11 ai-21228

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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