

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 106
	<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)  
Volunteer PAC

Full Name (Last, First, Middle Initial) <b>A. Nello Castelvechchi</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2006	
Mailing Address N1785 Chapel Dr.		Transaction ID: 60717.C134914	
City Whitewater	State WI	Zip Code 53190	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer	Occupation Information Requested	Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Mercedes Cecchi</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2006	
Mailing Address 1209 Aldebaran Dr.		Transaction ID: 60704.C132453	
City McLean	State VA	Zip Code 22101	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer self	Occupation Homemaker	Aggregate Year-to-Date ▼ 5500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		NOTE: Refunded \$500 on 8/18/06	

Full Name (Last, First, Middle Initial) <b>C. Annie Chen</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2006	
Mailing Address 8111 Avinger Dr.		Transaction ID: 60717.C134088	
City Rosemead	State CA	Zip Code 91770-3928	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Kaiser Permanente Med. Center	Occupation Cytotechnologist	Aggregate Year-to-Date ▼ 283.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2575.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	