

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 8	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
BRACEPAC

A.

Full Name (Last, First, Middle Initial) Bill White for Texas		Date of Receipt
Mailing Address PO BOX 131197		<input type="text" value="03"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
City	State	Zip Code
Houston	TX	77219
FEC ID number of contributing federal political committee.		Transaction ID: SA16.12371
<input type="text" value="C"/> <input type="text" value="C00457945"/>		Amount of Each Receipt this Period
		<input type="text" value="500.00"/>
Name of Employer	Occupation	Contribution Refund
Receipt For: 2010	Aggregate Year-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="500.00"/>