

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

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

FOR LINE NUMBER: PAGE 10 / 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Professional Insurance Agents Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Fred Thomas

Mailing Address 212 Main St

City State Zip Code  
Stevensville MT 59870-2111

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

Name of Employer Occupation  
Siphers/Thomas Insurance & Insurance Agent  
Financial S

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	4	/	2	0	0	9

**Transaction ID:** C778558

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
Susan D. Worthington

Mailing Address PO Box 799

City State Zip Code  
Sundance WY 82729-0799

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

Name of Employer Occupation  
Association of Wyoming Ins Insurance Agent  
Agents

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** C790801

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>400.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>2950.00</b>