

**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 7 OF 12 |
| | <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)
DEFENDING AMERICA'S FUTURE

A. Jeffrey Nelson
Full Name (Last, First, Middle Initial)

Mailing Address 582 Camillo Rd

City Sierra Madre State CA Zip Code 91024

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

Name of Employer HRC Fertility Occupation Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : SA11AI.4334

Amount of Each Receipt this Period
 1000.00

Contribution

B. Michael Sutter
Full Name (Last, First, Middle Initial)

Mailing Address 8048 W. Avenida Del Sol

City Peoria State AZ Zip Code 85383

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

Name of Employer Sutter Masonry Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 26 / 2012

Transaction ID : SA11AI.4332

Amount of Each Receipt this Period
 1000.00

Contribution

C. Eric Wnuck
Full Name (Last, First, Middle Initial)

Mailing Address 10010 E. Cholla St

City Phoenix State AZ Zip Code 85013

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

Name of Employer Enhanced Imaging Centers Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : SA11AI.4330

Amount of Each Receipt this Period
 1000.00

Contribution

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 3000.00 |
| TOTAL This Period (last page this line number only).....▶ | 8500.00 |