

**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 9 / 45
	<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)
VIRGINIA VICTORY 2006

Full Name (Last, First, Middle Initial) A. James Bruce		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address 900 Lynton Place		Transaction ID: SA11A1.4509
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Earmark through Act Blue	
Name of Employer Occupation Wiley; Rein & Fielding Attorney	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Susan Buck		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 4723 N. 40th Street		Transaction ID: SA11A1.4318
City State Zip Code Arlington VA 22207	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Earmark through Act Blue PAC	
Name of Employer Occupation WRF Consultant	Aggregate Year-to-Date 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Gary T Burtless		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2006
Mailing Address 710 Timber Branch Drive		Transaction ID: SA11A1.4447
City State Zip Code Alexandria VA 22302	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Earmark through Act Blue	
Name of Employer Occupation Brookings Institution Economist	Aggregate Year-to-Date 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	