

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 45
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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) <b>A.</b> Sharon Labovitz		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 510 Wolfe Street		<b>Transaction ID:</b> SA11A1.4395	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer n/a Occupation n/a	Aggregate Year-to-Date ▼ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Paul Lancaster		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 118 Quay Street		<b>Transaction ID:</b> SA11A1.4397	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer n/a Occupation n/a	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>C.</b> Susan Lancaster		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 118 Quay Street		<b>Transaction ID:</b> SA11A1.4399	
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer n/a Occupation n/a	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	