

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 250 OF 388	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
The Markey Committee

Full Name (Last, First, Middle Initial) Michael Bronner			Date of Receipt MM/DD/YYYY 03/31/2014	
Mailing Address 53 Sargent Crossway			Transaction ID : C9973430	
City Brookline	State MA	Zip Code 02445	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			[MEMO ITEM]	
Name of Employer Self Employed	Occupation Entrepreneur			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 7800.00		

Full Name (Last, First, Middle Initial) Alan M. Leventhal			Date of Receipt MM/DD/YYYY 03/28/2014	
Mailing Address C/O Beacon Capital Partners 200 State St			Transaction ID : C9977276	
City Boston	State MA	Zip Code 02109	Amount of Each Receipt this Period -2600.00	
FEC ID number of contributing federal political committee. C			[MEMO ITEM]	
Name of Employer Beacon Co.	Occupation Executive			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00		

Full Name (Last, First, Middle Initial) Alan M. Leventhal			Date of Receipt MM/DD/YYYY 03/28/2014	
Mailing Address C/O Beacon Capital Partners 200 State St			Transaction ID : C9977278	
City Boston	State MA	Zip Code 02109	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			[MEMO ITEM]	
Name of Employer Beacon Co.	Occupation Executive			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00		

SUBTOTAL of Receipts This Page (optional).....			0.00	
TOTAL This Period (last page this line number only).....				

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