

**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 216 OF 463
	<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)
Midwest Values PAC

A. Miller, Carolyn, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6222 Quinwood Ln N
 Apt 220
 City Maple Grove State MN Zip Code 55369-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **07 / 28 / 2017**
Transaction ID : C6949711
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Miller, Carolyn, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6222 Quinwood Ln N
 Apt 220
 City Maple Grove State MN Zip Code 55369-6348
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **10 / 25 / 2017**
Transaction ID : C6992495
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Miller, Mitchell, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 Constitution Ct Apt 1009
 City Hoboken State NJ Zip Code 07030-6730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Lamb, Ketzer, Rewman, Rselle Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **08 / 09 / 2017**
Transaction ID : C6955832
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	