

**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 22 OF 33
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Aon Corporation Political Action Committee

A. Michael Heffernan
 Full Name (Last, First, Middle Initial)
 Mailing Address 367 Santana Heights #3102
 City San Jose State CA Zip Code 95128-2077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aon Service Corporation Occupation Resident Managing Dir - 3 (M)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 10 / 31 / 2015
Transaction ID : PR1980952343516
 Amount of Each Receipt this Period 80.00
 P/R Deduction (\$40.00 Semi-Monthly)

B. Stephen Williams
 Full Name (Last, First, Middle Initial)
 Mailing Address 131 Arbor Shoals Drive
 City Canton State GA Zip Code 30115-6333
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aon Service Corporation Occupation President-Aon Integramark
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2015
Transaction ID : PR1980952443516
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Semi-Monthly)

C. Kevin Kalinich
 Full Name (Last, First, Middle Initial)
 Mailing Address 528 Oak Street
 City Glen Ellyn State IL Zip Code 60137-3832
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Aon Service Corporation Occupation Regl Practice Leader-Brkr (M)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 31 / 2015
Transaction ID : PR1980952643516
 Amount of Each Receipt this Period 40.00
 P/R Deduction (\$20.00 Semi-Monthly)

SUBTOTAL of Receipts This Page (optional).....▶	160.00
TOTAL This Period (last page this line number only).....▶	