

**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 31 / 59
	<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)  
LeBoeuf, Lamb, Greene & MacRae, L.L.P. Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. John Lamaster</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 125 West 55th Street		<b>Transaction ID: SA11A1.6746</b>	
City State Zip Code New York NY 10019	Amount of Each Receipt this Period 1110.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer LeBoeuf, Lamb, Greene & MacRae	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1110.00		

Full Name (Last, First, Middle Initial) <b>B. MR. WILLIAM S. LAMB</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 125 W. 55TH STREET		<b>Transaction ID: SA11A1.6747</b>	
City State Zip Code NEW YORK NY 10019-5000	Amount of Each Receipt this Period 1535.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer LLG&M L.L.P.	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1535.00		

Full Name (Last, First, Middle Initial) <b>C. MR. L. CHARLES LANDGRAF</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address 125 W. 55TH STREET		<b>Transaction ID: SA11A1.6748</b>	
City State Zip Code NEW YORK NY 10019-5389	Amount of Each Receipt this Period 1140.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer LLG&M, L.L.P.	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1140.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3785.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	