

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 2359 / 9280
	(check only one)	
<input type="checkbox"/> 16 <input type="checkbox"/> 19a	<input checked="" type="checkbox"/> 17a <input type="checkbox"/> 19b	<input type="checkbox"/> 17b <input type="checkbox"/> 20a
<input type="checkbox"/> 17c <input type="checkbox"/> 20b	<input type="checkbox"/> 17d <input type="checkbox"/> 20c	<input type="checkbox"/> 18 <input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
JOHN MCCAIN 2008, INC.

A.	Full Name (Last, First, Middle Initial) MR. DANIEL FISHER	Date of Receipt MM / DD / YYYY 04 / 08 / 2008
	Mailing Address 400 E. 66TH STREET PENTHOUSE 3	Amount of Each Receipt this Period 300.00
	City State Zip Code NEW YORK NY 10065-9320	CONTRIBUTION
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.784711
	Name of Employer Occupation Occupation RETIRED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

B.	Full Name (Last, First, Middle Initial) MRS. DIANE D. FISHER	Date of Receipt MM / DD / YYYY 04 / 22 / 2008
	Mailing Address 3418 MAIN STREET	Amount of Each Receipt this Period 25.00
	City State Zip Code CHINCOTEAGUE VA 23336-1549	CONTRIBUTION
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.839652
	Name of Employer Occupation PRMC MEDICAL CENTER NURSE	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 410.00	

C.	Full Name (Last, First, Middle Initial) MRS. DIANE D. FISHER	Date of Receipt MM / DD / YYYY 04 / 24 / 2008
	Mailing Address 3418 MAIN STREET	Amount of Each Receipt this Period 25.00
	City State Zip Code CHINCOTEAGUE VA 23336-1549	CONTRIBUTION
	FEC ID number of contributing federal political committee.	Transaction ID: SA17.855132
	Name of Employer Occupation PRMC MEDICAL CENTER NURSE	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 410.00	

SUBTOTAL of Receipts This Page (optional)	350.00
TOTAL This Period (last page this line number only)	