

**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 6482 / 13294
	<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)  
REPUBLICAN NATIONAL COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Keith Mantis		Date of Receipt	
	Mailing Address 2335 Prometheus Ct.		M M / D D / Y Y Y Y 07 / 21 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> 49287155
	Henderson	NV	89074-5339	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		500.00	
Name of Employer Requested		Occupation		
Cardiology Consultants, P.C.		President & Ceo		
Receipt For:		Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General		500.00		
<input type="checkbox"/> Other (specify) ▼				

<b>B.</b>	Full Name (Last, First, Middle Initial) Dr. John A. Mantle		Date of Receipt	
	Mailing Address 214 The Highlands		M M / D D / Y Y Y Y 07 / 28 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> 49351094
	Tuscaloosa	AL	35404-2917	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1200.00	
Name of Employer Requested		Occupation		
Cardiology Consultants, P.C.		Physician		
Receipt For:		Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General		2400.00		
<input type="checkbox"/> Other (specify) ▼				

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr. John A. Mantle		Date of Receipt	
	Mailing Address 214 The Highlands		M M / D D / Y Y Y Y 07 / 28 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> 49365957
	Tuscaloosa	AL	35404-2917	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		1200.00	
Name of Employer Requested		Occupation		
Cardiology Consultants, P.C.		Physician		
Receipt For:		Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General		2400.00		
<input type="checkbox"/> Other (specify) ▼				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	