SCHEDULE 9-A
Donation(s) Received

A. Full Name of Donor
Bob J. Perry

Mailing Address of Donor
PO Box 34153

City State Zip
Houston, TX 77234

Date of Receipt
10 / 27 / 2006

Amount
$1,000,000.00

B. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt
M M / D D / Y Y Y Y

Amount

C. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt
M M / D D / Y Y Y Y

Amount

D. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt
M M / D D / Y Y Y Y

Amount

E. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt
M M / D D / Y Y Y Y

Amount

SUBTOTAL of Donations This Page (optional) ..... ▶ $1,000,000.00

TOTAL This Period (last page this line number only) ..... ▶ $1,000,000.00
(carry total from last page to Line 9)