

SCHEDULE A ITEMIZED RECEIPTS

| | | |
|--|---|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 1706 / 4441 |
| | (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. HOWARD B. KOSLOW | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2007 |
| Mailing Address 5698 HUNTINGTON PARK CT | | Amount of Each Receipt this Period 2300.00 |
| City BOCA RATON | State Zip Code FL 33496-2901 | |
| FEC ID number of contributing federal political committee. | | CONTRIBUTION Transaction ID: SA17.304335 |
| Name of Employer PROMISE HEALTHCARE | Occupation CEO | |
| 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. JANE KOSLOW | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 31 / 2007 |
| Mailing Address 5698 HUNTINGTON PARK CT | | Amount of Each Receipt this Period 2300.00 |
| City BOCA RATON | State Zip Code FL 33496-2901 | |
| FEC ID number of contributing federal political committee. | | CONTRIBUTION Transaction ID: SA17.304334 |
| Name of Employer | Occupation HOMEMAKER | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2300.00 | |

| | | |
|---|------------------------------------|--|
| C. Full Name (Last, First, Middle Initial) HOD KOSMAN | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 08 / 2007 |
| Mailing Address P.O. BOX 2308 | | Amount of Each Receipt this Period 500.00 |
| City SCOTTSBLUFF | State Zip Code NE 69363-2308 | |
| FEC ID number of contributing federal political committee. | | CONTRIBUTION Transaction ID: SA17.289665 |
| Name of Employer PLATTE VALLEY NATIONAL BA- NK | Occupation PRESIDENT | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 5100.00 |
| TOTAL This Period (last page this line number only) ▶ | |