

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 925 / 2751  
(check only one)

<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)  
McCain Victory 2008

**A.**

Full Name (Last, First, Middle Initial) MR. CLAUDE GRAHAM		Date of Receipt MM / DD / YYYY 06 / 26 / 2008
Mailing Address 2074 BUCKEYE ROAD P.O. DRAWER 3099		Transaction ID: SA11.1136282
City EAST DUBLIN	State GA	Zip Code 31027-1330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00
Name of Employer GRAHAM BROTHERS CONSTRUCTION	Occupation PARTNER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2300.00	

**B.**

Full Name (Last, First, Middle Initial) MR. JAMES P. GRAHAM		Date of Receipt MM / DD / YYYY 06 / 17 / 2008
Mailing Address 5944 LUTHER LANE #9W		Transaction ID: SA11.1085901
City DALLAS	State TX	Zip Code 75225-2816
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer SCHICK SHADEL HOSPITAL	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) MR. JOHN J. GRAHAM		Date of Receipt MM / DD / YYYY 06 / 09 / 2008
Mailing Address 32 OAKLAWN DRIVE		Transaction ID: SA11.1038552
City COVINGTON	State LA	Zip Code 70433-4518
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer SELF-EMPLOYED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	