

RECEIVED  
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Office Use Only

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FE4M5

FRIENDS OF JOHN MCCAIN, INC.

ADDRESS (number and street)

228 S WASHINGTON STREET

SUITE 115

Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00540310

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

AZ

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM

DD

YYYYYY

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM

DD

YYYYYY

in the State of

5. Covering Period

MM / DD / YYYY

01 / 01 / 2016

through

MM / DD / YYYY

03 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Keith A Davis

Signature of Treasurer Keith A Davis

*Keith A. Davis*

Date

MM / DD / YYYY

04 / 14 / 2016

YYYYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3  
(Revised 02/2003)

201604140200097526

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**FRIENDS OF JOHN MCCAIN, INC.**

Report Covering the Period: From: 

M M	/	D D	/	Y Y Y Y
01	/	01	/	2016

 To: 

M M	/	D D	/	Y Y Y Y
03	/	31	/	2016

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ...	997496.04	7716324.78
(b) Total Contribution Refunds (from Line 20(d)) ..	1290.16	62904.16
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	996205.88	7653420.62
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	850673.56	4095237.30
(b) Total Offsets to Operating Expenditures (from Line 14)...	226.09	3814.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ...	850447.47	4091423.02
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	5537781.33	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ...</b>	0.00	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

201604140200097527

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**FRIENDS OF JOHN MCCAIN, INC.**

Report Covering the Period: From: MM / DD / YYYY  
01 / 01 / 2016

To: MM / DD / YYYY  
03 / 31 / 2016

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	714447.08	5798485.59
(i) Itemized (use Schedule A) ...	61848.96	451308.01
(ii) Unitemized .....	776296.04	6249793.60
(iii) TOTAL of contributions from individuals .	0.00	1000.00
(b) Political Party Committees...	221200.00	1465531.18
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) The Candidate .....	997496.04	7716324.78
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	148903.60	1363579.49
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..</b>	0.00	0.00
<b>13. LOANS:</b>	0.00	0.00
(a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) ..</b>	226.09	3814.28
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	141558.69	960405.26
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)...</b>	1288184.42	10044123.81

201604140200097528

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 590

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	850673.56	4095237.30
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees ...	0.00	61614.00
(b) Political Party Committees...	1290.16	1290.16
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	1290.16	62904.16
21. OTHER DISBURSEMENTS ..	0.00	348201.02
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	851963.72	4506342.48

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	5101560.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	1288184.42
25. SUBTOTAL (add Line 23 and Line 24)...	6389745.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	851963.72
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	5537781.33

201604140200097529

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 5 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JONATHAN S. AARON**

Mailing Address 1275 ORCHARD RIDGE RD

City BLOOMFIELD HILLS State MI Zip Code 48304-2646

FEC ID number of contributing federal political committee. **C**

Name of Employer THE VELVEL GROUP Occupation EXECUTIVE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 01 / 2016  
Transaction ID : SA11.3100862

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH F. ABATE**

Mailing Address 371 E. PALM LANE

City PHOENIX State AZ Zip Code 85004-1532

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt 01 / 27 / 2016  
Transaction ID : SA11.3099963

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH S. ABBOTT JR.**

Mailing Address P.O. BOX 726

City ALLOWAY State NJ Zip Code 08001-0726

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt 02 / 03 / 2016  
Transaction ID : SA11.3100203

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 1350.00

**TOTAL** This Period (last page this line number only).....

20160414020097530

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>MR. JOSEPH S. ABBOTT JR.</b>			Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>		
Mailing Address P.O. BOX 726			Transaction ID : SA11.3101487		
City <b>ALLOWAY</b>	State <b>NJ</b>	Zip Code <b>08001-0726</b>	Amount of Each Receipt this Period <b>100.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>500.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

B. Full Name (Last, First, Middle Initial) <b>MR. GREGORY E. ABEL</b>			Date of Receipt MM / DD / YYYY <b>02 / 24 / 2016</b>		
Mailing Address P.O. BOX 657			Transaction ID : SA11.3100806		
City <b>DES MOINES</b>	State <b>IA</b>	Zip Code <b>50306-0657</b>	Amount of Each Receipt this Period <b>2000.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>BERKSHIRE HATHAWAY</b>		Occupation <b>CEO</b>	Election Cycle-to-Date <b>2000.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

C. Full Name (Last, First, Middle Initial) <b>ELIZABETH ABELL</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address 13130 LUVIE LANE			Transaction ID : SA11.3102568		
City <b>POTOMAC</b>	State <b>MD</b>	Zip Code <b>20854-1180</b>	Amount of Each Receipt this Period <b>500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>500.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097531

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ALAN T. ACKERMAN**

Mailing Address **365 PINE RIDGE DRIVE**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48304-2140**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ACKERMAN & ACKERMAN** Occupation **LAWYER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 01 / 2016**

Transaction ID : **SA11.3100846**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM A. ACKMAN**

Mailing Address **888 SEVENTH AVENUE FLOOR 42**

City **NEW YORK** State **NY** Zip Code **10106-4402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PERSHING SQUARE CAPITAL MANAGEMEN** Occupation **INVESTMENT MANAGER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 09 / 2016**

Transaction ID : **SA11.3100907**

Amount of Each Receipt this Period  
**5400.00**

Memo Item  
CONTRIBUTION

SEE REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KAREN H. ACKMAN**

Mailing Address **888 SEVENTH AVENUE FLOOR 42**

City **NEW YORK** State **NY** Zip Code **10106-4402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 09 / 2016**

Transaction ID : **SA11.3101801**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

REATTRIBUTION FROM SPOUSE

**SUBTOTAL** of Receipts This Page (optional)..... **6400.00**

**TOTAL** This Period (last page this line number only).....

201604140200097532

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM A. ACKMAN**

Mailing Address **888 SEVENTH AVENUE FLOOR 42**

City **NEW YORK** State **NY** Zip Code **10106-4402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PERSHING SQUARE CAPITAL MANAGEMENT** Occupation **INVESTMENT MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 09 / 2016**

Transaction ID : **SA11.3100907B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
**CONTRIBUTION**  
**REATTRIBUTION TO SPOUSE**

**B.** Full Name (Last, First, Middle Initial)  
**JOANNA ACOCELLA**

Mailing Address **7810 KACHINA LANE**

City **BETHESDA** State **MD** Zip Code **20817-4500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO EDUCATION GROUP** Occupation **MANAGEMENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102231**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL M. ALDRICH**

Mailing Address **7 MAPLE STREET**

City **NEW CANAAN** State **CT** Zip Code **06840-5731**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BREVET CAPITAL MANAGEMENT** Occupation **CONSULTANT PRIVATE FINANCING**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 03 / 2016**

Transaction ID : **SA11.3101264**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

201604140200097533



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. WYNN ALEXANDER**

Mailing Address P.O. BOX 670

City <b>WIGGINS</b>	State <b>MS</b>	Zip Code <b>39577-0670</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>BUSINESS OWNER</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>400.00</b>	

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101860**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ANNA LOU ALLEGRI**

Mailing Address P.O. BOX 1

City <b>LOXLEY</b>	State <b>AL</b>	Zip Code <b>36551-0001</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Date of Receipt  
**02 / 03 / 2016**

Transaction ID : **SA11.3100233**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ANNA LOU ALLEGRI**

Mailing Address P.O. BOX 1

City <b>LOXLEY</b>	State <b>AL</b>	Zip Code <b>36551-0001</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Date of Receipt  
**03 / 23 / 2016**

Transaction ID : **SA11.3101624**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**300.00**

201604140200097534

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. PAUL G. ALLEN**

Mailing Address **505 FIFTH AVE S. STE 900**

City **SEATTLE** State **WA** Zip Code **98104-3821**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VULCAN, INC.** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101733**

Amount of Each Receipt this Period  
**2000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. AIHAM J. ALSAMMARAE**

Mailing Address **117 COVINGTON CT**

City **OAK BROOK** State **IL** Zip Code **60523-2575**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KCI ENGINEERING CONSULTANTS** Occupation **CEO**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101245**

Amount of Each Receipt this Period  
**150.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. AIHAM J. ALSAMMARAE**

Mailing Address **117 COVINGTON CT**

City **OAK BROOK** State **IL** Zip Code **60523-2575**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KCI ENGINEERING CONSULTANTS** Occupation **CEO**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102113**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2250.00**

201604140200097535

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLYN PETE AMADO**

Mailing Address 10548 W.VIA MONTOYA DR.

City PEORIA	State AZ	Zip Code 85383-1794
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED VETERAN	Occupation DISABLED VETERAN
--------------------------------------	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101185

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLYN PETE AMADO**

Mailing Address 10548 W.VIA MONTOYA DR.

City PEORIA	State AZ	Zip Code 85383-1794
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer DISABLED VETERAN	Occupation DISABLED VETERAN
--------------------------------------	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102155

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. LOU A. ANDERSON**

Mailing Address 601 COUNTRY CLUB ROAD

City ARDMORE	State OK	Zip Code 73401-1021
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
MM / DD / YYYY  
02 / 03 / 2016

Transaction ID : SA11.3100156

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

350.00

201604140200097536

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MADELEINE ARISON**

Mailing Address **9999 COLLINS AVE.  
APT. 15GJ**

City **BAL HARBOUR** State **FL** Zip Code **33154-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3102989**

Amount of Each Receipt this Period **2500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICKY ARISON**

Mailing Address **9999 COLLINS AVE. APT 15G**

City **BAL HARBOUR** State **FL** Zip Code **33154-1834**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CARNIVAL CORPORATION** Occupation **CEO**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102070**

Amount of Each Receipt this Period **2500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVE ARKAWI**

Mailing Address **5320 E. DOUBLETREE RANCH**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-1620**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SYRIAN-AMERICAN COUNCIL** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **7000.00**

Date of Receipt **02 / 09 / 2016**

Transaction ID : **SA11.3100592**

Amount of Each Receipt this Period **2000.00**

Memo Item CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7000.00**

201604140200097537

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID P. ARNESON**

Mailing Address 46831 RANCHO HIGUERA RD

City FREMONT	State CA	Zip Code 94539-7307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101151

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WAYNE ARMY**

Mailing Address P.O. BOX 290

City GALESVILLE	State MD	Zip Code 20765-0290
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WA&A, LLC	Occupation BUSINESS DEVELOPMENT
-------------------------------	------------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101197

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. WAYNE ARMY**

Mailing Address P.O. BOX 290

City GALESVILLE	State MD	Zip Code 20765-0290
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer WA&A, LLC	Occupation BUSINESS DEVELOPMENT
-------------------------------	------------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102106

Amount of Each Receipt this Period  
200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

350.00

201604140200097538

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

11a     11b     11c     11d  
 12     13a     13b     14     15

PAGE 14 OF 590

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAKE ARONOV**

Mailing Address **P.O. BOX 235000**

City **MONTGOMERY** State **AL** Zip Code **36123-5000**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARONOV REALTY** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 10 / 2016**

Transaction ID : **SA11.3100689**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES BRECKENRIDGE ARRINGTON JR.**

Mailing Address **800 ST. CHRISTOPHER'S ROAD**

City **RICHMOND** State **VA** Zip Code **23226-2711**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **03 / 22 / 2016**

Transaction ID : **SA11.3101559**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. LEON C. ASADOORIAN**

Mailing Address **40 LOWELL RD**

City **SALEM** State **NH** Zip Code **03079-4029**

FEC ID number of contributing federal political committee. **C**

Name of Employer **METHUEN CONSTRUCTION** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101681**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**2100.00**

201604140200097539

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 15 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
MRS. MOLLY M. ASSENMACHER

Mailing Address P.O. BOX 26945

City State Zip Code  
TUCSON AZ 85726-6945

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102990

Amount of Each Receipt this Period  
800.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. WILLIAM R. ASSENMACHER

Mailing Address P.O. BOX 26945

City State Zip Code  
TUCSON AZ 85726-6945

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
TA CAID INDUSTRIES CONTRACTOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102991

Amount of Each Receipt this Period  
1700.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. CHRISTOPHER J. ASTERINO

Mailing Address 9827 N. 95TH ST STE 105

City State Zip Code  
SCOTTSDALE AZ 85258-4591

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
ASTERINO & ASSOC., INC. HEALTHCARE & CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2016

Transaction ID : SA11.3101826

Amount of Each Receipt this Period  
500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3000.00

201604140200097540

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15	

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MYRON H. ATKINSON JR.**

Mailing Address P.O. BOX1176

City BISMARCK State ND Zip Code 58502-1176

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 375.00

Date of Receipt 01 / 31 / 2016

Transaction ID : SA11.3100477

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CHRISTINE E. AUGUSTINE**

Mailing Address 2744 E. UTOPIA ROAD

City PHOENIX State AZ Zip Code 85050-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer DESERT TREE FARM Occupation OFFICE MANAGER/AGRICULTURE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt 02 / 09 / 2016

Transaction ID : SA11.3100589

Amount of Each Receipt this Period 250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. LLOYD AXELROD M.D.**

Mailing Address 48 PARK AVE

City WELLESLEY HILLS State MA Zip Code 02481-6711

FEC ID number of contributing federal political committee. **C**

Name of Employer MASS GENERAL PHYSICIANS ORGANIZATIO Occupation PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 255.00

Date of Receipt 01 / 31 / 2016

Transaction ID : SA11.3100335

Amount of Each Receipt this Period 10.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

360.00

201604140200097541



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 590
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**DR. LLOYD AXELROD M.D.**

Mailing Address **48 PARK AVE**

City <b>WELLESLEY HILLS</b>	State <b>MA</b>	Zip Code <b>02481-6711</b>
--------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>MASS GENERAL PHYSICIANS ORGANIZATIO</b>	Occupation <b>PHYSICIAN</b>
--	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**255.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102266**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. CHRISTINA BABIN**

Mailing Address **4135 LUCIANO AVENUE**

City <b>COCOA</b>	State <b>FL</b>	Zip Code <b>32926-6833</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>
--------------------------------------	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
**02 / 17 / 2016**

Transaction ID : **SA11.3100720**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN C. BAKER**

Mailing Address **109 ESSEX PL**

City <b>SOUTHERN PINES</b>	State <b>NC</b>	Zip Code <b>28387-2998</b>
-------------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**02 / 03 / 2016**

Transaction ID : **SA11.3100230**

Amount of Each Receipt this Period  
**75.00**

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097542

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 18 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN C. BAKER**

Mailing Address 109 ESSEX PL

City SOUTHERN PINES   State NC   Zip Code 28387-2998

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED   Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt 03 / 21 / 2016

Transaction ID : SA11.3101513

Amount of Each Receipt this Period 75.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. BROCK BAKEWELL**

Mailing Address 6099 N. PLACITA FRESNILLO

City TUCSON   State AZ   Zip Code 85750-1257

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED   Occupation OPHTHALMOLOGIST

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11.3102692

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. A. FREDERICK BANFIELD**

Mailing Address 6440 N POMELO

City TUCSON   State AZ   Zip Code 85704-4117

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED   Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 600.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11.3102341

Amount of Each Receipt this Period 600.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 3175.00

**TOTAL** This Period (last page this line number only).....

201604140200097543

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 19 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. REGINALD E. BARR**

Mailing Address 5383 E ROCKRIDGE RD

City State Zip Code  
PHOENIX AZ 85018-1936

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AMERISCHOOLS EDUCATOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 21 / 2016

Transaction ID : SA11.3101439

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LOUIS BASILE JR.**

Mailing Address 12198 E. PARADISE DRIVE

City State Zip Code  
SCOTTSDALE AZ 85259-3341

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
WILDFLOWER BREAD COMPANY FOOD SERVICE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102704

Amount of Each Receipt this Period  
300.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PERRY E. BASSETT**

Mailing Address 3567 E. SUNRISE DR. SUITE 219

City State Zip Code  
TUCSON AZ 85718-3232

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BASSETT, HAYDEN & RAY REAL ESTATE DEVELOPER/INVESTOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102715

Amount of Each Receipt this Period  
2500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3800.00

201604140200097544

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 20 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**DR. EDGAR H. BATCHELLER JR.**

Mailing Address 1512 CLIFTON ROAD

City JACKSONVILLE   State NC   Zip Code 28540-8204

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED   Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 700.00

Date of Receipt 01 / 26 / 2016

Transaction ID : SA11.3099889

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DR. EDGAR H. BATCHELLER JR.**

Mailing Address 1512 CLIFTON ROAD

City JACKSONVILLE   State NC   Zip Code 28540-8204

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED   Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 700.00

Date of Receipt 03 / 21 / 2016

Transaction ID : SA11.3101369

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT BATT**

Mailing Address P.O. BOX 728

City ELKHORN   State NE   Zip Code 68022-0728

FEC ID number of contributing federal political committee. **C**

Name of Employer SB COMMUNITIES LLC   Occupation CHAIRMAN

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt 03 / 03 / 2016

Transaction ID : SA11.3101263

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1100.00

20160414020097545

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MOGENS C. BAY**

Mailing Address 11211 PIERCE PLAZE

City OMAHA	State NE	Zip Code 68144-
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FEC ID number of contributing federal political committee. **C**

Name of Employer VALMONT INDUSTRIES	Occupation CHAIRMAN & CEO
--	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 24 / 2016

Transaction ID : SA11.3100807

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT M. BEAGLE**

Mailing Address 8 ACORN COURT APT. E6

City WAKEFIELD	State RI	Zip Code 02879-1447
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FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSITY OF RHODE ISLAND	Occupation VICE PRESIDENT
--	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
255.00

Date of Receipt  
MM / DD / YYYY  
02 / 10 / 2016

Transaction ID : SA11.3100613

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RONNELL S. BEAL**

Mailing Address 1708 VILLAGE RIDGE PL

City COLLIERVILLE	State TN	Zip Code 38017-8718
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ORGIL, INC	Occupation MANAGEMENT
--------------------------------	--------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
4700.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101270

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2025.00

201604140200097546

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 22 OF 590  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RONNELL S. BEAL**

Mailing Address 1708 VILLAGE RIDGE PL

City COLLIERVILLE	State TN	Zip Code 38017-8718
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ORGIL, INC	Occupation MANAGEMENT
--------------------------------	--------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4700.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101270B

Amount of Each Receipt this Period  
-1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MR. RONNELL S. BEAL**

Mailing Address 1708 VILLAGE RIDGE PL

City COLLIERVILLE	State TN	Zip Code 38017-8718
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer ORGIL, INC	Occupation MANAGEMENT
--------------------------------	--------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4700.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101800

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT THOMAS BEATTIE**

Mailing Address 12 EL SERENO DRIVE

City SAN CARLOS	State CA	Zip Code 94070-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101218

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

100.00

201604140200097547

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOSHUA B. BELINFANTE**

Mailing Address 480 MOUNT VERNON HWY.

City SANDY SPRINGS      State GA      Zip Code 30327-4316

FEC ID number of contributing federal political committee. **C**

Name of Employer ROBBINS LAW FIRM      Occupation ATTORNEY

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 10 / 2016**

Transaction ID : SA11.3100671

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL BENSON**

Mailing Address 1633 BROADWAY

City NEW YORK      State NY      Zip Code 10019-6708

FEC ID number of contributing federal political committee. **C**

Name of Employer KASOWITZ BENSON      Occupation ATTORNEY

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : SA11.3102053

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GARY BERMAN**

Mailing Address 1849 GLENWOLD DRIVE

City PAOLI      State PA      Zip Code 19301-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer BOX KING      Occupation EXECUTIVE

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : SA11.3102184

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5900.00**

201604140200097548

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 OF 590

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. GARY BERMAN**

Mailing Address 1849 GLENWOLD DRIVE

City PAOLI State PA Zip Code 19301-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BOX KING EXECUTIVE

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
2800.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102184B

Amount of Each Receipt this Period  
-100.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MR. GARY BERMAN**

Mailing Address 1849 GLENWOLD DRIVE

City PAOLI State PA Zip Code 19301-1053

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BOX KING EXECUTIVE

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
2800.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102993

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MRS. NORA KRASNEY BERMAN**

Mailing Address 680 HANNA ST

City BIRMINGHAM State MI Zip Code 48009-1618

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : SA11.3100861

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

201604140200097549



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 25 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**DR. JOSE ALBERTO BERNAL**

Mailing Address **5033 ACADEMY DRIVE**

City **METAIRIE** State **LA** Zip Code **70003-2543**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OSCHSNER CLINIC** Occupation **CARDIOLOGIST**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **02 / 03 / 2016**

Transaction ID : **SA11.3100301**

Amount of Each Receipt this Period **150.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVID L. BERNHARDT**

Mailing Address **3113 JOHN MARSHALL DR.**

City **ARLINGTON** State **VA** Zip Code **22207-1376**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNITED STATES GOVERNMENT** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 28 / 2016**

Transaction ID : **SA11.3101808**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT W. BERTRAND**

Mailing Address **4333 E. LAKESIDE LANE**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-2873**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CONCORD SERVICING CORPORATION** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 28 / 2016**

Transaction ID : **SA11.3101816**

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3850.00**

201604140200097550

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

PAGE 26 OF 590

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ADOLPH BEYERLEIN**

Mailing Address **103 FOUR LAKES DRIVE**

City **EASLEY** State **SC** Zip Code **29642-3305**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101223**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ADOLPH BEYERLEIN**

Mailing Address **103 FOUR LAKES DRIVE**

City **EASLEY** State **SC** Zip Code **29642-3305**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102561**

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. JULIE BEZNOS**

Mailing Address **182 CHEWTON ROAD**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48301-2522**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 10 / 2016**

Transaction ID : **SA11.3100910**

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Recelpts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

201604140200097551

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 27 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. NORMAN BEZNOS**

Mailing Address 31731 NORTHWESTERN HWY.  
STE 250W

City FARMINGTON HILLS State MI Zip Code 48334-1668

FEC ID number of contributing federal political committee. **C**

Name of Employer BEZTEK DEVELOPMENT Occupation REAL ESTATE DEVELOPER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102713

Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. SAMUEL BEZNOS**

Mailing Address 182 CHEWTON ROAD

City BLOOMFIELD HILLS State MI Zip Code 48301-2522

FEC ID number of contributing federal political committee. **C**

Name of Employer OAKLAND MANAGEMENT Occupation REAL ESTATE DEVELOPER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt 03 / 10 / 2016  
Transaction ID : SA11.3100911

Amount of Each Receipt this Period 2700.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH J. BIALKIN**

Mailing Address 4 TIMES SQUARE 44TH FL.

City NEW YORK State NY Zip Code 10036-6518

FEC ID number of contributing federal political committee. **C**

Name of Employer SKADDEN, ARPS SLATE, MEAGHER & FLOM Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2525.00

Date of Receipt 03 / 21 / 2016  
Transaction ID : SA11.3101398

Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 3950.00

**TOTAL** This Period (last page this line number only).....

201604140200097552

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 590
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	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial) <b>MR. THOMAS D. BICKLEY</b>			Date of Receipt MM / DD / YYYY <b>02 / 03 / 2016</b>
Mailing Address <b>2951 E. WINDSOR STREET</b>			Transaction ID : <b>SA11.3100206</b>
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85716-1280</b>	Amount of Each Receipt this Period <b>25.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>E.N.E.A. SOFTWARE SYSTEMS</b>	Occupation <b>SOFTWARE SYSTEMS ENGINEER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>225.00</b>		

B. Full Name (Last, First, Middle Initial) <b>MR. THOMAS D. BICKLEY</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>2951 E. WINDSOR STREET</b>			Transaction ID : <b>SA11.3102753</b>
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85716-1280</b>	Amount of Each Receipt this Period <b>25.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>E.N.E.A. SOFTWARE SYSTEMS</b>	Occupation <b>SOFTWARE SYSTEMS ENGINEER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>225.00</b>		

C. Full Name (Last, First, Middle Initial) <b>MS. PHYLLIS BIEDESS</b>			Date of Receipt MM / DD / YYYY <b>02 / 03 / 2016</b>
Mailing Address <b>301 W. HOLLY STREET</b>			Transaction ID : <b>SA11.3100167</b>
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85003-1116</b>	Amount of Each Receipt this Period <b>150.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>350.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097553

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 29 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ED L. BIGGERS**

Mailing Address 6336 N. ORACLE RD. #326-337

City TUCSON State AZ Zip Code 85704-5480

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102718

Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. DAWN BIRON**

Mailing Address 3924 E. GLENROSA AVENUE

City PHOENIX State AZ Zip Code 85018-4809

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation MEDICAL SALES

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt 03 / 16 / 2016  
Transaction ID : SA11.3101304

Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. TERRI BISHOP**

Mailing Address 789 LOS PALOS MANOR

City LAFAYETTE State CA Zip Code 94549-5365

FEC ID number of contributing federal political committee. **C**

Name of Employer APOLLO EDUCATION GROUP Occupation VICE CHAIRMAN

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102693

Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 2250.00

**TOTAL** This Period (last page this line number only).....

201604140200097554

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 30 OF 590  
(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**SUHIR BITAR**

Mailing Address **13749 E. YUCCA STREET**

City **SCOTTSDALE** State **AZ** Zip Code **85259-4641**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HAPPY KIDS PEDIATRICS** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**02 / 09 / 2016**

Transaction ID : **SA11.3100738**

Amount of Each Receipt this Period  
**2000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES R. BLACK JR.**

Mailing Address **601 N. FAIRFAX STREET #402**

City **ALEXANDRIA** State **VA** Zip Code **22314-2079**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRIME POLICY GROUP** Occupation **PUBLIC AFFAIRS**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**02 / 23 / 2016**

Transaction ID : **SA11.3100774**

Amount of Each Receipt this Period  
**4400.00**

Memo Item CONTRIBUTION  
: REFUNDED \$1,000.00 ON 03/29/2016

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES R. BLACK JR.**

Mailing Address **601 N. FAIRFAX STREET #402**

City **ALEXANDRIA** State **VA** Zip Code **22314-2079**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PRIME POLICY GROUP** Occupation **PUBLIC AFFAIRS**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101912B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6400.00**

201604140200097555

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES R. BLACK JR.**

Mailing Address **601 N. FAIRFAX STREET #402**

City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22314-2079</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>PRIME POLICY GROUP</b>	Occupation <b>PUBLIC AFFAIRS</b>
---	-------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101914**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MS. DIANNA BLACK-JACKMAN**

Mailing Address **5013 N. 78TH STREET**

City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85250-7214</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>INFORMATION REQUESTED PER BEST EFF</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>
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Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101326**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. JOAN BLACKWOOD**

Mailing Address **1625 W. FOUNTAINHEAD PARKWAY**

City <b>TEMPE</b>	State <b>AZ</b>	Zip Code <b>85282-2371</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>UNIVERSITY OF PHOENIX</b>	Occupation <b>CHIEF MARKETING OFFICER</b>
--	--

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102706**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**750.00**

201604140200097556

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JUDY A. BLACK**

Mailing Address **208 VIRGINIA AVENUE**

City **ALEXANDRIA** State **VA** Zip Code **22302-2906**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BHFS LAW FIRM** Occupation **PUBLIC AFFAIRS**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**02 / 23 / 2016**

Transaction ID : **SA11.3100768**

Amount of Each Receipt this Period  
**4400.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JUDY A. BLACK**

Mailing Address **208 VIRGINIA AVENUE**

City **ALEXANDRIA** State **VA** Zip Code **22302-2906**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BHFS LAW FIRM** Occupation **PUBLIC AFFAIRS**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3100768B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. JUDY A. BLACK**

Mailing Address **208 VIRGINIA AVENUE**

City **ALEXANDRIA** State **VA** Zip Code **22302-2906**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BHFS LAW FIRM** Occupation **PUBLIC AFFAIRS**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3101879**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION  
**REDESIGNATION FROM PRIMARY**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4400.00**

201604140200097557



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 33 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEONARD BLAVATNIK**

Mailing Address **730 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10019-4105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ACCESS INDUSTRIES** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101687**

Amount of Each Receipt this Period **5400.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LEONARD BLAVATNIK**

Mailing Address **730 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10019-4105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ACCESS INDUSTRIES** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101687B**

Amount of Each Receipt this Period **-2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. LEONARD BLAVATNIK**

Mailing Address **730 FIFTH AVENUE**

City **NEW YORK** State **NY** Zip Code **10019-4105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ACCESS INDUSTRIES** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101889**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5400.00**

**5400.00**

201604140200097558

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 34 OF 590  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**DR. KATHRYN D. BLITT**

Mailing Address **656 A. AVENUE**

City <b>CORONADO</b>	State <b>CA</b>	Zip Code <b>92118-2205</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>OLD PUEBLO ANESTHESIA</b>	Occupation <b>ANESTHESIOLOGIST</b>
--	---------------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**02 / 23 / 2016**

Transaction ID : **SA11.3100787**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRAD BLOOM**

Mailing Address **11 ALBION**

City <b>WELLESLEY</b>	State <b>MA</b>	Zip Code <b>02481-1304</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>BERKSHIRE PARTNERS</b>	Occupation <b>INVESTMENTS</b>
---	----------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102214**

Amount of Each Receipt this Period  
**5400.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LOIS F. BLOOM**

Mailing Address **9777 WILSHIRE BLVD., SUITE 711**

City <b>BEVERLY HILLS</b>	State <b>CA</b>	Zip Code <b>90212-1907</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>
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Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102885**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**8350.00**

20160414020097559

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RONALD H. BLOOM**

Mailing Address **9777 WILSHIRE BLVD.**  
**SUITE 711**

City **BEVERLY HILLS** State **CA** Zip Code **90212-1907**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CROWN ASSOCIATES REALTY, INC.** Occupation **INDUSTRIAL REAL ESTATE**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102884**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM E. BLOOMFIELD JR.**

Mailing Address **940 1ST STREET**

City **MANHATTAN BEACH** State **CA** Zip Code **90266-6604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**11 / 10 / 2015**

Transaction ID : **SA11.3098395**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM E. BLOOMFIELD JR.**

Mailing Address **940 1ST STREET**

City **MANHATTAN BEACH** State **CA** Zip Code **90266-6604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**01 / 07 / 2016**

Transaction ID : **SA11.3098395B**

Amount of Each Receipt this Period  
**-200.00**

Memo Item  
CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**2700.00**

20160414020097560

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM E. BLOOMFIELD JR.**

Mailing Address **940 1ST STREET**

City <b>MANHATTAN BEACH</b>	State <b>CA</b>	Zip Code <b>90266-6604</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  

MM	DD	YYYY
01	07	2016

Transaction ID : **SA11.3100834**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION  
**REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT H. BLUESTEIN**

Mailing Address **260 E. BROWN STREET  
SUITE 100**

City <b>BIRMINGHAM</b>	State <b>MI</b>	Zip Code <b>48009-6230</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>R.H. BLUESTEIN &amp; COMPANY</b>	Occupation <b>PRESIDENT</b>
---	--------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

MM	DD	YYYY
03	08	2016

Transaction ID : **SA11.3100899**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ELAINE F. BLUMENTHAL**

Mailing Address **3840 BRANDY STATION COURT S.E.**

City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30339-4404</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>PHILANTHROPIST</b>
---	-------------------------------------

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  

MM	DD	YYYY
02	10	2016

Transaction ID : **SA11.3100675**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

201604140200097561

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 37 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. HAROLD BLUMENSTEIN**

Mailing Address **237 LAKEWOOD DRIVE**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48304-3532**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PARAGON PROPERTIES** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

Transaction ID : **SA11.3100856**

Amount of Each Receipt this Period  
**2000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. BENNIE BOCK**

Mailing Address **162 LAKEVIEW BLVD**

City **NEW BRAUNFELS** State **TX** Zip Code **78130-8102**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**02 / 03 / 2016**

Transaction ID : **SA11.3100239**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL A. BOCK**

Mailing Address **7141 E. BERNEIL DRIVE**

City **SCOTTSDALE** State **AZ** Zip Code **85253-1945**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCCARTY & ASSOCIATES** Occupation **INVESTOR**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**01 / 27 / 2016**

Transaction ID : **SA11.3099950**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2700.00**

201604140200097562

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 38 OF 590

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID A. BOCKORNY**

Mailing Address 3101 S. BISHOP JONES PLACE

City: SIOUX FALLS   State: SD   Zip Code: 57103-4669

FEC ID number of contributing federal political committee: **C**

Name of Employer: THE BOCKORNY GROUP   Occupation: PRESIDENT

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date: 3500.00

Date of Receipt: 02 / 05 / 2016

Transaction ID: SA11.3100563

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVID A. BOCKORNY**

Mailing Address 3101 S. BISHOP JONES PLACE

City: SIOUX FALLS   State: SD   Zip Code: 57103-4669

FEC ID number of contributing federal political committee: **C**

Name of Employer: THE BOCKORNY GROUP   Occupation: PRESIDENT

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date: 3500.00

Date of Receipt: 03 / 29 / 2016

Transaction ID: SA11.3100563B

Amount of Each Receipt this Period: -500.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID A. BOCKORNY**

Mailing Address 3101 S. BISHOP JONES PLACE

City: SIOUX FALLS   State: SD   Zip Code: 57103-4669

FEC ID number of contributing federal political committee: **C**

Name of Employer: THE BOCKORNY GROUP   Occupation: PRESIDENT

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date: 3500.00

Date of Receipt: 03 / 29 / 2016

Transaction ID: SA11.3101915

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... 500.00

**TOTAL** This Period (last page this line number only)..... 500.00

201604140200097563

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 39 OF 590  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**DR. JOHN C. BODLE**

Mailing Address **126 ANGELA DRIVE**

City <b>SANTA ROSA</b>	State <b>CA</b>	Zip Code <b>95403-1773</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  

MM	DD	YYYY
03	21	2016

Transaction ID : SA11.3101495

Amount of Each Receipt this Period  
**100.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVID R. BOESCH**

Mailing Address **63 MONTEREY AVENUE**

City <b>TEANECK</b>	State <b>NJ</b>	Zip Code <b>07666-5529</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**225.00**

Date of Receipt  

MM	DD	YYYY
03	31	2016

Transaction ID : SA11.3102524

Amount of Each Receipt this Period  
**100.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. TONY BOLAZINA**

Mailing Address **12833 N. 116TH STREET**

City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85259-2713</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>NORTHERN TRUST</b>	Occupation <b>FINANCE</b>
---	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  

MM	DD	YYYY
02	23	2016

Transaction ID : SA11.3100797

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**700.00**

201604140200097564

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 40 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MS. KAREN BONADIO**

Mailing Address 5002 MYCENAE WAY

City OCEANSIDE State CA Zip Code 92056-7419

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CALIFORNIA LICENSED CONTRACTOR

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : SA11.3102111

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. PAUL R. BONDERSON JR.**

Mailing Address 8121 ALPHA LANE

City SUNOL State CA Zip Code 94586-9500

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 02 / 2016**

Transaction ID : SA11.3100867

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS BONILLA**

Mailing Address 12003 N. OAKHURST WAY

City SCOTTSDALE State AZ Zip Code 85254-4806

FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSITY OF PHOENIX Occupation DEAN

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : SA11.3102696

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3250.00**

201604140200097565



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. OLE BORCH-CHRISTENSEN**

Mailing Address **4561 EAST DESERT PARK PLACE**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-2912**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **460.00**

Date of Receipt **02 / 23 / 2016**

Transaction ID : **SA11.3100766**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GEN JOHN L. BORLING**

Mailing Address **1979 HARLEM BLVD**

City **ROCKFORD** State **IL** Zip Code **61103-6345**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **AUTHOR/SPEAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102102**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. LISA M. BOROWSKY**

Mailing Address **4701 N. DROMEDARY ROAD**

City **PHOENIX** State **AZ** Zip Code **85018-2939**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BOROWSKY LAW GROUP** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 16 / 2016**

Transaction ID : **SA11.3101325**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**550.00**

201604140200097566

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. TUCKER S. BOUNDS**

Mailing Address 3006 CASTRO ST.

City State Zip Code  
SAN FRANCISCO CA 94131-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SIDEWIRE, INC. FOUNDER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2016

Transaction ID : SA11.3101810

Amount of Each Receipt this Period  
2700.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. TUCKER S. BOUNDS**

Mailing Address 3006 CASTRO ST.

City State Zip Code  
SAN FRANCISCO CA 94131-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SIDEWIRE, INC. FOUNDER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2016

Transaction ID : SA11.3101810B

Amount of Each Receipt this Period  
-1000.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. TUCKER S. BOUNDS**

Mailing Address 3006 CASTRO ST.

City State Zip Code  
SAN FRANCISCO CA 94131-3026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SIDEWIRE, INC. FOUNDER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3700.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2016

Transaction ID : SA11.3102050

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2700.00

201604140200097567

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. REBECCA BOWMAN**

Mailing Address **6741 N. INVERGORDON RD**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-4218**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **INVESTMENTS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101297**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. HARVEY BRAUN**

Mailing Address **6 FAWN DR.**

City **LIVINGSTON** State **NJ** Zip Code **07039-1916**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100934**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
CONTRIBUTION

REFUNDED \$100.00 ON 03/03/2016

**C.** Full Name (Last, First, Middle Initial)  
**MR. PATRICK A. BRAY**

Mailing Address **1401 MN 24TH STREET STE. 4**

City **PHOENIX** State **AZ** Zip Code **85008-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARIZONA CATTLEMEN'S ASSOCIATION** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 09 / 2016**

Transaction ID : **SA11.3100587**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1350.00**

201604140200097568

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MARK J. BRENNER**

Mailing Address **6825 E. IRONWOOD DR.**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-2656**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO EDUCATION GROUP, INC.** Occupation **SR. V.P., BUSINESS DEVELOPMENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 14 / 2016**

Transaction ID : SA11.3100927

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. WENDY G. BRIGGS**

Mailing Address **301 E INDIAN SCHOOL RD**

City **PHOENIX** State **AZ** Zip Code **85012-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VERIDUS, LLC** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : SA11.3102100

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. WENDY G. BRIGGS**

Mailing Address **301 E INDIAN SCHOOL RD**

City **PHOENIX** State **AZ** Zip Code **85012-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VERIDUS, LLC** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : SA11.3102100B

Amount of Each Receipt this Period  
**-500.00**

Memo Item  
CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

201604140200097569

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. WENDY G. BRIGGS**

Mailing Address 301 E INDIAN SCHOOL RD

City PHOENIX   State AZ   Zip Code 85012-

FEC ID number of contributing federal political committee. **C**

Name of Employer VERIDUS, LLC   Occupation ATTORNEY

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 4500.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11.3102994

Amount of Each Receipt this Period 500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN K. BRITT**

Mailing Address 334 WAQUOIT RD.

City COTUIT   State MA   Zip Code 02635-3562

FEC ID number of contributing federal political committee. **C**

Name of Employer RUBIN AND RUDMAN L.L.P.   Occupation ATTORNEY

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11.3102719

Amount of Each Receipt this Period 300.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ELLIOTT B. BROIDY**

Mailing Address 1801 CENTURY PARK EAST  
SUITE 2150

City LOS ANGELES   State CA   Zip Code 90067-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer BROIDY CAPITAL   Occupation CHAIRMAN

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11.3102789

Amount of Each Receipt this Period 2700.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 3000.00

**TOTAL** This Period (last page this line number only).....

201604140200097570

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ROBIN BROIDY**

Mailing Address **1801 CENTURY PARK EAST  
SUITE 2150**

City **LOS ANGELES** State **CA** Zip Code **90067-2343**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102788**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ERIC BRONSTEIN**

Mailing Address **12934 VERNON AVE**

City **HUNTINGTON WOODS** State **MI** Zip Code **48070-1450**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE SCION GROUP** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 01 / 2016**

Transaction ID : **SA11.3100860**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LTC. EDWARD G. BROWN JR.**

Mailing Address **4157 S. CONSTANCIA COURT**

City **GREEN VALLEY** State **AZ** Zip Code **85622-5612**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt  
**01 / 29 / 2016**

Transaction ID : **SA11.3100034**

Amount of Each Receipt this Period  
**75.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3775.00**

201604140200097571

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**LTC. EDWARD G. BROWN JR.**

Mailing Address **4157 S. CONSTANCIA COURT**

City **GREEN VALLEY** State **AZ** Zip Code **85622-5612**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt **03 / 21 / 2016**

Transaction ID : **SA11.3101368**

Amount of Each Receipt this Period **75.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOEL K. BROWN**

Mailing Address **585 SHIRLEY ROAD**

City **BIRMINGHAM** State **MI** Zip Code **48009-1642**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RHP PROPERTIES** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 08 / 2016**

Transaction ID : **SA11.3100904**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. LAURIE E. BROWN**

Mailing Address **5219 N. CASA BLANCA DRIVE #39**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-6201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt **02 / 23 / 2016**

Transaction ID : **SA11.3101890**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2075.00**

201604140200097572

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. OSCAR D. BROWN**

Mailing Address **2459 LAKEVIEW CIRCLE**

City **ARLINGTON** State **TX** Zip Code **76013-3327**

FEC ID number of contributing federal political committee. **C**

Name of Employer **F.A.A.** Occupation **SAFETY INSPECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 17 / 2016**

Transaction ID : **SA11.3100707**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DR. FREDERICK L. BRUENING**

Mailing Address **17091 KINGS FAIRWAY LN**

City **GRAND BLANC** State **MI** Zip Code **48439-8676**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102265**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BROOKE BUCHANAN**

Mailing Address **2148 FRANKLINS STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94109-2912**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THERANOS** Occupation **VICE PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100538**

Amount of Each Receipt this Period  
**1700.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2800.00**

201604140200097573



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

Full Name (Last, First, Middle Initial)  
**MRS. JOAN BUCHANAN**

Mailing Address **6301 E. HUNTRESS DRIVE**

City State Zip Code  
**PARADISE VALLEY AZ 85253-8001**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 03 / 2016**

Transaction ID : **SA11.3100169**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. DONALD V. BUDINGER**

Mailing Address **6720 N. SCOTTSDALE ROAD, #355**

City State Zip Code  
**SCOTTSDALE AZ 85253-4456**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RODEL FOUNDATION EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102723**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**DR. MALCOLM I. BULL M.D.**

Mailing Address **622 ALMOND RD**

City State Zip Code  
**WALNUTPORT PA 18088-9601**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102620**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**800.00**

201604140200097574

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

A. Full Name (Last, First, Middle Initial)  
**MR. STEPHEN PHILLIP BURCH**

Mailing Address **14125 W. ZODIAC DRIVE**

City State Zip Code  
**ELOY AZ 85131-3240**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)  
Election Cycle-to-Date  
**398.00**

Date of Receipt  
**02 / 03 / 2016**

Transaction ID : **SA11.3100259**

Amount of Each Receipt this Period  
**40.00**

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MR. STEPHEN PHILLIP BURCH**

Mailing Address **14125 W. ZODIAC DRIVE**

City State Zip Code  
**ELOY AZ 85131-3240**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)  
Election Cycle-to-Date  
**398.00**

Date of Receipt  
**03 / 22 / 2016**

Transaction ID : **SA11.3101598**

Amount of Each Receipt this Period  
**40.00**

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. SCOTT J. BUTLER**

Mailing Address **914 W. CORONADO**

City State Zip Code  
**PHOENIX AZ 85007-1722**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**CITY OF MESA GOVERNMENT EMPLOYEE**

Receipt For: 2016  
 Primary    General  
 Other (specify)  
Election Cycle-to-Date  
**450.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099991**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **280.00**  
**TOTAL** This Period (last page this line number only).....

201604140200097575

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. GARY G. CAMPBELL**

Mailing Address 176 CHURCH ST.

City LOWELL	State MA	Zip Code 01852-2685
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GILBERT CAMPBELL REAL ESTATE	Occupation BUSINESS EXEC. - REAL ESTATE
--	--

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2016

Transaction ID : SA11.3101672

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GARY G. CAMPBELL**

Mailing Address 176 CHURCH ST.

City LOWELL	State MA	Zip Code 01852-2685
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GILBERT CAMPBELL REAL ESTATE	Occupation BUSINESS EXEC. - REAL ESTATE
--	--

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2016

Transaction ID : SA11.3101672B

Amount of Each Receipt this Period  
-300.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. GARY G. CAMPBELL**

Mailing Address 176 CHURCH ST.

City LOWELL	State MA	Zip Code 01852-2685
----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GILBERT CAMPBELL REAL ESTATE	Occupation BUSINESS EXEC. - REAL ESTATE
--	--

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2016

Transaction ID : SA11.3101840

Amount of Each Receipt this Period  
300.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

201604140200097576

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROB CANTRELL**

Mailing Address **3211 E. DESERT BROOM WAY**

City **PHOENIX** State **AZ** Zip Code **85044-8723**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNIVERSITY OF PHOENIX** Occupation **V.P. OF HUMAN RESOURCES**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102737**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GREGORY W. CAPPELLI**

Mailing Address **1046 JACKSON AVENUE**

City **RIVER FOREST** State **IL** Zip Code **60305-1418**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO GROUP** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
**03 / 14 / 2016**

Transaction ID : **SA11.3101899**

Amount of Each Receipt this Period  
**2500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES P. CARINO JR.**

Mailing Address **138 MONTROSE AVE, UNIT 29**  
**UNIT 29**

City **BRYN MAWR** State **PA** Zip Code **19010-1561**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **SECURITY CONSULTANT ( RET. USAF 0-5)**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101183**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**3050.00**

201604140200097577

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 53 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**TYLER CARLSON**

Mailing Address **3575 MCCORMICK DRIVE**  
**E-322**

City **BULLHEAD CITY** State **AZ** Zip Code **86429-7688**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MEC, INC.** Occupation **MANAGER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100511**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TYLER CARLSON**

Mailing Address **3575 MCCORMICK DRIVE**  
**E-322**

City **BULLHEAD CITY** State **AZ** Zip Code **86429-7688**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MEC, INC.** Occupation **MANAGER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102235**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID H. CARNAHAN**

Mailing Address **201 E. 62ND STREET**  
**APARTMENT 13C**

City **NEW YORK** State **NY** Zip Code **10065-7691**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
**02 / 03 / 2016**

Transaction ID : **SA11.3100232**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
CONTRIBUTION

**550.00**

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

201604140200097578

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

A. Full Name (Last, First, Middle Initial) <b>MS. HELEN CARRAS</b>		Date of Receipt MM / DD / YYYY <b>02 / 03 / 2016</b>
Mailing Address <b>21766 54TH AVENUE</b>		Transaction ID : <b>SA11.3100191</b>
City <b>BAYSIDE HILLS</b>	State <b>NY</b>	Zip Code <b>11364-1415</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>825.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MS. HELEN CARRAS</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>21766 54TH AVENUE</b>		Transaction ID : <b>SA11.3101424</b>
City <b>BAYSIDE HILLS</b>	State <b>NY</b>	Zip Code <b>11364-1415</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>825.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. JOHN CASEY</b>		Date of Receipt MM / DD / YYYY <b>03 / 24 / 2016</b>
Mailing Address <b>435 NEWBURY ST.</b>		Transaction ID : <b>SA11.3101674</b>
City <b>DANVERS</b>	State <b>MA</b>	Zip Code <b>01923-1041</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>5400.00</b>
Name of Employer <b>BOSTON, GRAND, PRY LLC</b>	Occupation <b>CEO</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5400.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097579

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN CASEY**

Mailing Address 435 NEWBURY ST.

City DANVERS      State MA      Zip Code 01923-1041

FEC ID number of contributing federal political committee. **C**

Name of Employer BOSTON, GRAND, PRY LLC      Occupation CEO

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2016

Transaction ID : SA11.3101674B

Amount of Each Receipt this Period  
-2700.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN CASEY**

Mailing Address 435 NEWBURY ST.

City DANVERS      State MA      Zip Code 01923-1041

FEC ID number of contributing federal political committee. **C**

Name of Employer BOSTON, GRAND, PRY LLC      Occupation CEO

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2016

Transaction ID : SA11.3101693

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**CONWEY CASILLAS**

Mailing Address 21384 GLEBE VIEW DRIVE

City BROADLANDS      State VA      Zip Code 20148-3628

FEC ID number of contributing federal political committee. **C**

Name of Employer APOLLO EDUCATION GROUP      Occupation VICE PRESIDENT

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102671

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

1000.00

201604140200097580

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 56 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. JOSEPHINE C. CASSIDY**

Mailing Address **9214 ANNHURST STREET**

City **FAIRFAX** State **VA** Zip Code **22031-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099933**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. JOSEPHINE C. CASSIDY**

Mailing Address **9214 ANNHURST STREET**

City **FAIRFAX** State **VA** Zip Code **22031-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt **03 / 21 / 2016**

Transaction ID : **SA11.3101468**

Amount of Each Receipt this Period **75.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. CATSIMATIDIS**

Mailing Address **800 3RD AVENUE**

City **NEW YORK** State **NY** Zip Code **10022-7649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RED APPLE COMPANY** Occupation **OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 08 / 2016**

Transaction ID : **SA11.3100894**

Amount of Each Receipt this Period **400.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**525.00**

201604140200097581



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 57 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. CATSIMATIDIS**

Mailing Address **800 3RD AVENUE**

City **NEW YORK** State **NY** Zip Code **10022-7649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RED APPLE COMPANY** Occupation **OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3100894B**

Amount of Each Receipt this Period  
**-400.00**

Memo Item  
**CONTRIBUTION**

**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. CATSIMATIDIS**

Mailing Address **800 3RD AVENUE**

City **NEW YORK** State **NY** Zip Code **10022-7649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RED APPLE COMPANY** Occupation **OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3101835**

Amount of Each Receipt this Period  
**400.00**

Memo Item  
**CONTRIBUTION**

**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. MARGO CATSIMATIDIS**

Mailing Address **800 3RD AVENUE**

City **NEW YORK** State **NY** Zip Code **10022-7649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCVADS** Occupation **ADVERTISING**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3100892**

Amount of Each Receipt this Period  
**400.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**400.00**

201604140200097582

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 58 OF 590  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARGO CATSIMATIDIS**

Mailing Address **800 3RD AVENUE**

City **NEW YORK** State **NY** Zip Code **10022-7649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCVADS** Occupation **ADVERTISING**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 08 / 2016**

Transaction ID : **SA11.3100892B**

Amount of Each Receipt this Period  
**-400.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. MARGO CATSIMATIDIS**

Mailing Address **800 3RD AVENUE**

City **NEW YORK** State **NY** Zip Code **10022-7649**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MCVADS** Occupation **ADVERTISING**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 08 / 2016**

Transaction ID : **SA11.3101834**

Amount of Each Receipt this Period  
**400.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MS. ROSE-MARY A. CAVAGNARO**

Mailing Address **11220 72ND DRIVE**

City **FOREST HILLS** State **NY** Zip Code **11375-5631**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **239.58**

Date of Receipt  
MM / DD / YYYY  
**02 / 17 / 2016**

Transaction ID : **SA11.3100702**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**25.00**

201604140200097583

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. ROSE-MARY A. CAVAGNARO**

Mailing Address 11220 72ND DRIVE

City FOREST HILLS	State NY	Zip Code 11375-5631
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
239.58

Date of Receipt  
MM / DD / YYYY  
03 / 23 / 2016

Transaction ID : SA11.3101630

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. DORDE CEDIC**

Mailing Address P.O. BOX 1906

City SEDONA	State AZ	Zip Code 86339-1906
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FEC ID number of contributing federal political committee. **C**

Name of Employer CEDIC DEVELOPMENT CO.	Occupation REAL ESTATE DEVELOPMENT
---	---------------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2016

Transaction ID : SA11.3100522

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT K. CELLEY**

Mailing Address 923 W. SELDON LANE

City PHOENIX	State AZ	Zip Code 85021-4469
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FEC ID number of contributing federal political committee. **C**

Name of Employer TRIFACTA COMMUNICATIONS	Occupation VICE PRESIDENT, EXTERNAL AFFAIRS
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Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2016

Transaction ID : SA11.3099969

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

1025.00

201604140200097584

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

PAGE 60 OF 590

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. AUGUSTINE CENAME**

Mailing Address **110 CHRISTABEL STREET**

City **LYNBROOK** State **NY** Zip Code **11563-1930**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**220.00**

Date of Receipt  
**02 / 03 / 2016**

Transaction ID : **SA11.3100241**

Amount of Each Receipt this Period  
**20.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. AUGUSTINE CENAME**

Mailing Address **110 CHRISTABEL STREET**

City **LYNBROOK** State **NY** Zip Code **11563-1930**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
INFORMATION REQUESTED PER BEST EFFORTS

Occupation  
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**220.00**

Date of Receipt  
**03 / 21 / 2016**

Transaction ID : **SA11.3101464**

Amount of Each Receipt this Period  
**20.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. MICHAEL I. CHALIFF**

Mailing Address **195 GROGANS LAKE PT**

City **ATLANTA** State **GA** Zip Code **30350-3118**

FEC ID number of contributing federal political committee. **C**

Name of Employer  
**DIAGNOSTIC IMAGING**

Occupation  
**PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100531**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1040.00**

201604140200097585

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. CONSTANCE E. CHAMBERS**

Mailing Address 3230 ALEXIS DRIVE

City PALO ALTO      State CA      Zip Code 94304-1331

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER**      Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

Transaction ID : SA11.3101812

Amount of Each Receipt this Period  
 5400.00

Memo Item CONTRIBUTION  
 SEE REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CONSTANCE E. CHAMBERS**

Mailing Address 3230 ALEXIS DRIVE

City PALO ALTO      State CA      Zip Code 94304-1331

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER**      Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

Transaction ID : SA11.3101812B

Amount of Each Receipt this Period  
 -2700.00

Memo Item CONTRIBUTION  
 REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN T. CHAMBERS**

Mailing Address 3230 ALEXIS DRIVE

City PALO ALTO      State CA      Zip Code 94304-1331

FEC ID number of contributing federal political committee. **C**

Name of Employer **CISCO SYSTEMS**      Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2016

Transaction ID : SA11.3101807

Amount of Each Receipt this Period  
 2700.00

Memo Item CONTRIBUTION  
 REATTRIBUTION FROM SPOUSE

**SUBTOTAL** of Receipts This Page (optional)..... 5400.00

**TOTAL** This Period (last page this line number only).....

201604140200097586

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>ROBERT CHAMBERLIN</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>4951 ROCKWOOD PARKWAY NW</b>			Transaction ID : <b>SA11.3102128</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20016-3247</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>MCBEE STRATEGIC</b>	Occupation <b>CONSULTANT</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>		

B. Full Name (Last, First, Middle Initial) <b>MR. ROBERT C. CHAMBERLAIN</b>			Date of Receipt MM / DD / YYYY <b>03 / 24 / 2016</b>
Mailing Address <b>P.O. BOX 142</b>			Transaction ID : <b>SA11.3101680</b>
City <b>SOUTH DENNIS</b>	State <b>MA</b>	Zip Code <b>02660-0142</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>ROBIN RUDMAN CHAMBERLAIN &amp; MARSH</b>	Occupation <b>ATTORNEY</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500.00</b>		

C. Full Name (Last, First, Middle Initial) <b>MS. SARAH LARRISSA CHAMBLEE</b>			Date of Receipt MM / DD / YYYY <b>02 / 19 / 2016</b>
Mailing Address <b>65 OAKLAND SCHOOL ROAD</b>			Transaction ID : <b>SA11.3100741</b>
City <b>FULTON</b>	State <b>MS</b>	Zip Code <b>38843-8348</b>	Amount of Each Receipt this Period <b>20.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>FREDERICKS LAWN &amp; JANITORIAL SERVICE</b>	Occupation <b>LAWN AND JANITORIAL SERVICE WORKER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>210.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1520.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097587

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MS. SARAH LARRISSA CHAMBLEE**

Mailing Address **65 OAKLAND SCHOOL ROAD**

City **FULTON** State **MS** Zip Code **38843-8348**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FREDERICKS LAWN & JANITORIAL SERVICE** Occupation **LAWN AND JANITORIAL SERVICE WORKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3101920**

Amount of Each Receipt this Period **30.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. BENJAMIN G. CHAPMAN**

Mailing Address **20 LAKECREST LANE**

City **GROSSE POINTE FARM** State **MI** Zip Code **48236-3714**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 21 / 2016**

Transaction ID : **SA11.3101535**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**EVAN CHARLES**

Mailing Address **1883 WALTHAM CIRCLE**

City **MARIETTA** State **GA** Zip Code **30062-8129**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE COCA-COLA COMPANY** Occupation **GROUP DIRECTOR, REVENUE GROWTH M/**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : **SA11.3100518**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**630.00**

201604140200097588

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 64 OF 590  
(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. SUSAN H. CHARLTON**

Mailing Address **6330 E. CALLE ROSA**

City **SCOTTSDALE** State **AZ** Zip Code **85251-4227**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **02 / 23 / 2016**

Transaction ID : **SA11.3100765**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR R. CHASE JR.**

Mailing Address **2782 W. JASPER DRIVE**

City **CHANDLER** State **AZ** Zip Code **85224-3908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **W.M.M. INC.** Occupation **RESTAURANT OWNER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt **02 / 23 / 2016**

Transaction ID : **SA11.3100788**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR R. CHASE JR.**

Mailing Address **2782 W. JASPER DRIVE**

City **CHANDLER** State **AZ** Zip Code **85224-3908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **W.M.M. INC.** Occupation **RESTAURANT OWNER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102724**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

20160414020097589



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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 12  13a  13b  14  15

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

A. Full Name (Last, First, Middle Initial)  
**MR. SAEED A. CHAUDHRY**  
Mailing Address **43 WHITEHALL WAY**

Date of Receipt  
MM / DD / YYYY  
**03 / 24 / 2016**

City State Zip Code  
**HYANNIS MA 02601-2149**

Transaction ID : **SA11.3101685**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
**500.00**

Name of Employer Occupation  
**INFORMATION REQUESTED PER BEST EFF** **INFORMATION REQUESTED PER BEST EFF**

Memo Item  
CONTRIBUTION

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**500.00**

B. Full Name (Last, First, Middle Initial)  
**MR. SAM CHAWKIN**  
Mailing Address **750 PARK AVENUE N.E. SUITE 20SE**

Date of Receipt  
MM / DD / YYYY  
**02 / 10 / 2016**

City State Zip Code  
**ATLANTA GA 30326-3263**

Transaction ID : **SA11.3100677**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
**500.00**

Name of Employer Occupation  
**SELF-EMPLOYED ATTORNEY**

Memo Item  
CONTRIBUTION

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**500.00**

C. Full Name (Last, First, Middle Initial)  
**MR. STEPHEN CHAZEN**  
Mailing Address **P.O. BOX 530470**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

City State Zip Code  
**BIRMINGHAM AL 35253-0470**

Transaction ID : **SA11.3102277**

FEC ID number of contributing federal political committee. **C**

Amount of Each Receipt this Period  
**50.00**

Name of Employer Occupation  
**UNUS LLC PRIVATE INVESTMENTS**

Memo Item  
CONTRIBUTION

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**250.00**

**SUBTOTAL** of Receipts This Page (optional).....

**1050.00**

**TOTAL** This Period (last page this line number only).....

201604140200097590

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 66 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAY CHODOCK**

Mailing Address 10040 E. HAPPY VALLEY ROAD UNIT 20

City SCOTTSDALE State AZ Zip Code 85255-2313

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 16 / 2016  
Transaction ID : SA11.3101329

Amount of Each Receipt this Period 1000.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN M. CHORKAWY**

Mailing Address 1371 RUSSELL AVENUE

City LINCOLN PARK State MI Zip Code 48146-1626

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 375.00

Date of Receipt 02 / 03 / 2016  
Transaction ID : SA11.3100208

Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN M. CHORKAWY**

Mailing Address 1371 RUSSELL AVENUE

City LINCOLN PARK State MI Zip Code 48146-1626

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 375.00

Date of Receipt 03 / 28 / 2016  
Transaction ID : SA11.3101773

Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1100.00

201604140200097591

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 590
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	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)  
**MRS. DANICE L. CHRISTENSEN**

Mailing Address **217 BIG HORN DRIVE**

City	State	Zip Code
<b>BOULDER CITY</b>	<b>NV</b>	<b>89005-1451</b>

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
<b>RETIRED</b>	<b>RETIRED</b>

Receipt For: 2016	Election Cycle-to-Date
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>300.00</b>

Date of Receipt  
MM / DD / YYYY  
**02 / 03 / 2016**

Transaction ID : **SA11.3100161**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**MRS. DANICE L. CHRISTENSEN**

Mailing Address **217 BIG HORN DRIVE**

City	State	Zip Code
<b>BOULDER CITY</b>	<b>NV</b>	<b>89005-1451</b>

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
<b>RETIRED</b>	<b>RETIRED</b>

Receipt For: 2016	Election Cycle-to-Date
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>300.00</b>

Date of Receipt  
MM / DD / YYYY  
**03 / 23 / 2016**

Transaction ID : **SA11.3101658**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MR. J. KENNETH CLANCY**

Mailing Address **9305 N. 115TH STREET**

City	State	Zip Code
<b>SCOTTSDALE</b>	<b>AZ</b>	<b>85259-5849</b>

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
<b>RETIRED</b>	<b>RETIRED</b>

Receipt For: 2016	Election Cycle-to-Date
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>500.00</b>

Date of Receipt  
MM / DD / YYYY  
**02 / 03 / 2016**

Transaction ID : **SA11.3100155**

Amount of Each Receipt this Period  
**150.00**

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097592

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN B. CLARK**

Mailing Address **9273 LERWICK DRIVE**

City **DUBLIN** State **OH** Zip Code **43017-9492**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CLARK & ASSOCIATES** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt **03 / 16 / 2016**

Transaction ID : **SA11.3101312**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ANDREW C. COATS**

Mailing Address **1441 LAYMAN ST.**

City **MCLEAN** State **VA** Zip Code **22101-3129**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LIBERTY PARTNERS GROUP** Occupation **PARTNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 14 / 2016**

Transaction ID : **SA11.3100921**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DON V. COGMAN**

Mailing Address **5714 N. 77TH PLACE  
UNIT 469**

City **SCOTTSDALE** State **AZ** Zip Code **85250-6198**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 09 / 2016**

Transaction ID : **SA11.3100576**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

20160414020097593

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GERALD JOHN COLANGELO**

Mailing Address **70 E. COUNTRY CLUB DRIVE**

City **PHOENIX** State **AZ** Zip Code **85014-5435**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JDM PARTNERS, LLC** Occupation **CHAIRMAN/CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **01 / 14 / 2016**

Transaction ID : **SA11.3099856**

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GERALD JOHN COLANGELO**

Mailing Address **70 E. COUNTRY CLUB DRIVE**

City **PHOENIX** State **AZ** Zip Code **85014-5435**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JDM PARTNERS, LLC** Occupation **CHAIRMAN/CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **01 / 28 / 2016**

Transaction ID : **SA11.3099856B**

Amount of Each Receipt this Period **-2700.00**

Memo Item CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GERALD JOHN COLANGELO**

Mailing Address **70 E. COUNTRY CLUB DRIVE**

City **PHOENIX** State **AZ** Zip Code **85014-5435**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JDM PARTNERS, LLC** Occupation **CHAIRMAN/CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **01 / 28 / 2016**

Transaction ID : **SA11.3100569**

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION  
**REDESIGNATION FROM PRIMARY**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2700.00**

201604140200097594

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DOUGLAS R. COLEMAN JR.**

Mailing Address **140 S. BROWN ROAD**

City **LONG LAKE** State **MN** Zip Code **55356-9134**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 23 / 2016**

Transaction ID : **SA11.3100782**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MAYOR MICHAEL COLLINS**

Mailing Address **4422 E. INDIAN SCHOOL RD #101**

City **PHOENIX** State **AZ** Zip Code **85018-5411**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VERNADERO GROUP, INC.** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101294**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. PETER C. COLLING**

Mailing Address **9016 N. FOOTHILLS MANOR DR.**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-1533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COLLING MEDIA** Occupation **CHIEF OPERATING OFFICER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102708**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

20160414020097595

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DONALD E. COOLEY**

Mailing Address **140 PECKHAM ROAD**

City **WATSONVILLE** State **CA** Zip Code **95076-9747**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 03 / 2016**

Transaction ID : **SA11.3100151**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PHILIP COOPER**

Mailing Address **122 CHAMPLAIN STREET**

City **DECATUR** State **GA** Zip Code **30030-1803**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NELSON MULLINS RILEY & SCARBOROUGH** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2016**

Transaction ID : **SA11.3100508**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. BETH CORONELLI**

Mailing Address **457 COTTAGE AVE.**

City **GLEN ELLYN** State **IL** Zip Code **60137-4406**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO EDUCATION GROUP** Occupation **SENIOR VICE PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102707**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1750.00**

**TOTAL** This Period (last page this line number only).....

201604140200097596

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 72 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**KEVIN COSTELLO**

Mailing Address **600 N DEARBORN ST #1401**

City **CHICAGO** State **IL** Zip Code **60654-6293**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOME RUN INN FROZEN FOODS** Occupation **VP OF SALES**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2016**

Transaction ID : **SA11.3101260**

Amount of Each Receipt this Period  
**300.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY HUGH COWAN**

Mailing Address **1003 LAKE STREET S.  
APARTMENT 102**

City **KIRKLAND** State **WA** Zip Code **98033-6871**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CALEDOMAN INSURANCE GROUP** Occupation **AVIATION INSURANCE BROKER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 03 / 2016**

Transaction ID : **SA11.3100204**

Amount of Each Receipt this Period  
**150.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. LARRY E. COX**

Mailing Address **5552 E. WASHINGTON**

City **PHOENIX** State **AZ** Zip Code **85034-2134**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SUNSTATE EQUIPMENT CO.** Occupation **VP, SALES & MARKETING**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2016**

Transaction ID : **SA11.3101825**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**950.00**

201604140200097597



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 73 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD H. CRABBS**

Mailing Address **8314 BAYONET POINT COURT**

City **FREDERICKSBURG** State **VA** Zip Code **22407-2124**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **284.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 17 / 2016**

Transaction ID : **SA11.3100732**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. BETTIE H. CRAWFORD**

Mailing Address **4555 E MAYO BLVD  
UNIT 29101**

City **PHOENIX** State **AZ** Zip Code **85050-6994**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 03 / 2016**

Transaction ID : **SA11.3100196**

Amount of Each Receipt this Period  
**150.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL K. CROSSEN**

Mailing Address **50 ROWES WHARF**

City **BOSTON** State **MA** Zip Code **02110-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUBIN AND RUDMAN LLP** Occupation **ATTORNEY/PARTNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 24 / 2016**

Transaction ID : **SA11.3101676**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2875.00**

201604140200097598

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 74 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. PHILIP CUBA**

Mailing Address **8 MISTY RIDGE MANOR N.W.**

City **ATLANTA** State **GA** Zip Code **30327-4978**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SYSTEMS IMPROVEMENT GROUP, INC.** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **02 / 10 / 2016**

Transaction ID : **SA11.3100676**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR B. CULVAHOUSE JR.**

Mailing Address **719 BRACEY LN**

City **ALEXANDRIA** State **VA** Zip Code **22314-6246**

FEC ID number of contributing federal political committee. **C**

Name of Employer **O'MELVENY & MYERS LLP** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102784**

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. JANNA-NEEN J. CUNNINGHAM**

Mailing Address **5519 N. VIA PAPAVERO**

City **TUCSON** State **AZ** Zip Code **85750-6060**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 03 / 2016**

Transaction ID : **SA11.3100152**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3700.00**

201604140200097599

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MRS. CECILIA QUINN CURRIEO</b>			Date of Receipt MM / DD / YYYY 01 / 29 / 2016		
Mailing Address 9569 N. CRESTONE DRIVE			Transaction ID : SA11.3100062		
City TUCSON	State AZ	Zip Code 85742-5101	Amount of Each Receipt this Period _____ 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 550.00			

Full Name (Last, First, Middle Initial) <b>MRS. MARY V. CURRIE</b>			Date of Receipt MM / DD / YYYY 03 / 21 / 2016		
Mailing Address 230 CORONADO TRAIL			Transaction ID : SA11.3101507		
City SEDONA	State AZ	Zip Code 86336-3552	Amount of Each Receipt this Period _____ 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 300.00			

Full Name (Last, First, Middle Initial) <b>MS. BETHANY A. CURRY</b>			Date of Receipt MM / DD / YYYY 02 / 10 / 2016		
Mailing Address 8590 PARKER ROAD			Transaction ID : SA11.3100611		
City INDEPENDENCE	State OR	Zip Code 97351-9749	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 210.00			

SUBTOTAL of Receipts This Page (optional).....			_____ 275.00		
TOTAL This Period (last page this line number only).....			_____		

201604140200097600

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL A. CURTIS**

Mailing Address 148 N. COUNTRY CLUB DR.

City PHOENIX      State AZ      Zip Code 85014-5443

FEC ID number of contributing federal political committee. **C**

Name of Employer CURTIS & GOODWIN      Occupation ATTORNEY

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt 02 / 23 / 2016

Transaction ID : SA11.3100786

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL A. CURTIS**

Mailing Address 148 N. COUNTRY CLUB DR.

City PHOENIX      State AZ      Zip Code 85014-5443

FEC ID number of contributing federal political committee. **C**

Name of Employer CURTIS & GOODWIN      Occupation ATTORNEY

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt 02 / 23 / 2016

Transaction ID : SA11.3100786B

Amount of Each Receipt this Period -300.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL A. CURTIS**

Mailing Address 148 N. COUNTRY CLUB DR.

City PHOENIX      State AZ      Zip Code 85014-5443

FEC ID number of contributing federal political committee. **C**

Name of Employer CURTIS & GOODWIN      Occupation ATTORNEY

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt 02 / 23 / 2016

Transaction ID : SA11.3100884

Amount of Each Receipt this Period 300.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

201604140200097601

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.**

Full Name (Last, First, Middle Initial)  
**MR. HUGH D'ANDRADE**

Mailing Address **142 BEECHWOOD ROAD**

City <b>SUMMIT</b>	State <b>NJ</b>	Zip Code <b>07901-2016</b>
-----------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>
------------------------------------	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2700.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102572**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. ALEX DAMELIO**

Mailing Address **180 MCCOY RD**

City <b>SALVISA</b>	State <b>KY</b>	Zip Code <b>40372-9500</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>IBM</b>	Occupation <b>RETIRED</b>
--------------------------------	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**400.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102302**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MS. LISA L. DANIELS**

Mailing Address **3214 E. TERE STREET**

City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85044-3622</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>KPMG</b>	Occupation <b>PARTNER</b>
---------------------------------	------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**02 / 23 / 2016**

Transaction ID : **SA11.3100773**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3150.00**

201604140200097602

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 78 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DIXON H. DAVENPORT**

Mailing Address **4508 NE BLUE JAY COURT**

City **LEES SUMMIT** State **MO** Zip Code **64064-3207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102304**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD K. DAVIDSON**

Mailing Address **4875 PELICAN COLONY BLVD. #2004**

City **BONITA SPRINGS** State **FL** Zip Code **34134-6923**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102883**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. DEE DEE DAVIES**

Mailing Address **3049 N. WISCONSIN STREET**

City **RACINE** State **WI** Zip Code **53402-4072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt **01 / 26 / 2016**

Transaction ID : **SA11.3099894**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1150.00**

201604140200097603

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. DEE DEE DAVIES**

Mailing Address **3049 N. WISCONSIN STREET**

City **RACINE** State **WI** Zip Code **53402-4072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt  
**01 / 28 / 2016**

Transaction ID : **SA11.3099894B**

Amount of Each Receipt this Period  
**-100.00**

Memo Item CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MS. DEE DEE DAVIES**

Mailing Address **3049 N. WISCONSIN STREET**

City **RACINE** State **WI** Zip Code **53402-4072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt  
**01 / 28 / 2016**

Transaction ID : **SA11.3100566**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MS. DEE DEE DAVIES**

Mailing Address **3049 N. WISCONSIN STREET**

City **RACINE** State **WI** Zip Code **53402-4072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100644**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**100.00**

**100.00**

201604140200097604

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. DEE DEE DAVIES**

Mailing Address **3049 N. WISCONSIN STREET**

City **RACINE** State **WI** Zip Code **53402-4072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt  
 MM / DD / YYYY  
**02 / 10 / 2016**

Transaction ID : **SA11.3100644B**

Amount of Each Receipt this Period  
**-100.00**

Memo Item CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MS. DEE DEE DAVIES**

Mailing Address **3049 N. WISCONSIN STREET**

City **RACINE** State **WI** Zip Code **53402-4072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2900.00**

Date of Receipt  
 MM / DD / YYYY  
**02 / 10 / 2016**

Transaction ID : **SA11.3100737**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ANN L. DAVIS**

Mailing Address **2450 W. WESLEY ROAD NW**

City **ATLANTA** State **GA** Zip Code **30327-2032**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **PHILANTHROPIST**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM / DD / YYYY  
**02 / 10 / 2016**

Transaction ID : **SA11.3100670**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

**1000.00**

201604140200097605



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.**

Full Name (Last, First, Middle Initial)  
**ELIZABETH DAVIS**

Mailing Address **1 NATIONAL DRIVE SW**

City **ATLANTA**   State **GA**   Zip Code **30336-1631**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RNDC**   Occupation **PR/EXEC**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100532**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. JAY M. DAVIS**

Mailing Address **2450 W. WESLEY ROAD N.W.**

City **ATLANTA**   State **GA**   Zip Code **30327-2032**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NATIONAL DISTRIBUTING COMPANY, INC.**   Occupation **CHAIRMAN & CEO**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100674**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. RICHARD J. DAVIS**

Mailing Address **164 LAKE FORREST LANE**

City **ATLANTA**   State **GA**   Zip Code **30342-3210**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NATIONAL DISTRIBUTING COMPANY, INC.**   Occupation **MANAGER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100678**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

201604140200097606

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**SETH B. DAVIS**

Mailing Address **377 N. WYOMING AVENUE**

City **SOUTH ORANGE** State **NJ** Zip Code **07079-1650**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KASOWITZ BENSON TORRES & FRIEDMAN** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 24 / 2016**

Transaction ID : SA11.3101671

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JANNA B. DAY**

Mailing Address **2222 N. VAL VISTA DR.  
UNIT 16**

City **MESA** State **AZ** Zip Code **85213-1736**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AZ POLICY CONNECT** Occupation **GOVERNMENT RELATIONS**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 23 / 2016**

Transaction ID : SA11.3100764

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. JACK H. DEAN**

Mailing Address **10331 N. WILD CREEK DRIVE**

City **ORO VALLEY** State **AZ** Zip Code **85742-8426**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 03 / 2016**

Transaction ID : SA11.3100223

Amount of Each Receipt this Period  
**40.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1040.00**

201604140200097607

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**FREDERICK R. DEANE M.D.**

Mailing Address 3696 COOK VALLEY BLVD. SE

City GRAND RAPIDS	State MI	Zip Code 49546-8324
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101167

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN DECOTEAU**

Mailing Address P.O. BOX 1677

City HUNTERSVILLE	State NC	Zip Code 28070-1677
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NOVANT HEALTHCARE	Occupation NURSE
---------------------------------------	---------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2016

Transaction ID : SA11.3101824

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. R. MARCUS DELL'ARTINO**

Mailing Address 45 E. LAMAR RD

City PHOENIX	State AZ	Zip Code 85012-1023
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer FIRST STRATEGIC	Occupation PARTNER/PUBLIC AFFAIRS
-------------------------------------	--------------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102726

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097608

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 84 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID M. DELORENZO**

Mailing Address **7010 E. CHAUNCEY LANE  
SUITE 230**

City **PHOENIX** State **AZ** Zip Code **85054-3118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AMBASSADOR GROUP** Occupation **INSURANCE SALES**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102689**

Amount of Each Receipt this Period  
**300.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**STEVEN DEMBY**

Mailing Address **2539 EAST 5TH AVENUE**

City **DENVER** State **CO** Zip Code **80206-4267**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BROWNSTEIN HYATT FARBER SCHRECK, LI** Occupation **SHAREHOLDER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100535**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DANA DENAULT**

Mailing Address **37 GREEN STREET**

City **MARBLEHEAD** State **MA** Zip Code **01945-2404**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNIVERSITY OF DENVER** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102591**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1325.00**

201604140200097609

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 85 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DOUGLAS R. DESCHUTTER**

Mailing Address **8 SPRING BAY LANE**

City **LLOYD HARBOR** State **NY** Zip Code **11743-9600**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BROADRIDGE FINANCIAL SOLUTIONS, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 28 / 2016**

Transaction ID : **SA11.3101815**

Amount of Each Receipt this Period  
**5400.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DOUGLAS R. DESCHUTTER**

Mailing Address **8 SPRING BAY LANE**

City **LLOYD HARBOR** State **NY** Zip Code **11743-9600**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BROADRIDGE FINANCIAL SOLUTIONS, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 28 / 2016**

Transaction ID : **SA11.3101815B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DOUGLAS R. DESCHUTTER**

Mailing Address **8 SPRING BAY LANE**

City **LLOYD HARBOR** State **NY** Zip Code **11743-9600**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BROADRIDGE FINANCIAL SOLUTIONS, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 28 / 2016**

Transaction ID : **SA11.3101894**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**5400.00**

201604140200097610

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 86 OF 590

11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD DESCHUTTER**

Mailing Address **510 CAMBRIDGE LN.**

City **LAKE BLUFF** State **IL** Zip Code **60044-2802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102745**

Amount of Each Receipt this Period  
**5400.00**

Memo Item  
CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
**MRS. WENDI L. DESCHUTTER**

Mailing Address **8 SPRING BAY LANE**

City **LLOYD HARBOR** State **NY** Zip Code **11743-9600**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 28 / 2016**

Transaction ID : **SA11.3101811**

Amount of Each Receipt this Period  
**5400.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. WENDI L. DESCHUTTER**

Mailing Address **8 SPRING BAY LANE**

City **LLOYD HARBOR** State **NY** Zip Code **11743-9600**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 28 / 2016**

Transaction ID : **SA11.3101811B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
CONTRIBUTION

REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**10800.00**

201604140200097611

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. WENDI L. DESCHUTTER**

Mailing Address 8 SPRING BAY LANE

City LLOYD HARBOR    State NY    Zip Code 11743-9600

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER**    Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 28 / 2016**

Transaction ID : **SA11.3101892**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ANNA F. DETORE**

Mailing Address 22 LIBERTY DRIVE UNIT 2F

City BOSTON    State MA    Zip Code 02210-1298

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER**    Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **4900.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 24 / 2016**

Transaction ID : **SA11.3101673**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ANNA F. DETORE**

Mailing Address 22 LIBERTY DRIVE UNIT 2F

City BOSTON    State MA    Zip Code 02210-1298

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER**    Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **4900.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 24 / 2016**

Transaction ID : **SA11.3101673B**

Amount of Each Receipt this Period  
**-2200.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2700.00**

**2700.00**

201604140200097612

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 88 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ANNA F. DETORE**

Mailing Address **22 LIBERTY DRIVE UNIT 2F**

City **BOSTON** State **MA** Zip Code **02210-1298**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **4900.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101691**

Amount of Each Receipt this Period **2200.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**DR. PHILIP ELLSWORTH DEW**

Mailing Address **715 S. MOUNTVALE DRIVE**

City **TUCSON** State **AZ** Zip Code **85710-6232**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099899**

Amount of Each Receipt this Period **35.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. PHILIP ELLSWORTH DEW**

Mailing Address **715 S. MOUNTVALE DRIVE**

City **TUCSON** State **AZ** Zip Code **85710-6232**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **255.00**

Date of Receipt **03 / 18 / 2016**

Transaction ID : **SA11.3101351**

Amount of Each Receipt this Period **35.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **70.00**

**TOTAL** This Period (last page this line number only).....

201604140200097613



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.**

Full Name (Last, First, Middle Initial)  
**MR. AUREO DIAZ JR.**

Mailing Address **1818 SAN ALEJANDRO STREET**  
**URB SAN IGNACIO**

City **SAN JUAN** State **PR** Zip Code **00927-6821**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **215.00**

Date of Receipt **02 / 10 / 2016**

Transaction ID : **SA11.3100631**

Amount of Each Receipt this Period **25.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. AUREO DIAZ JR.**

Mailing Address **1818 SAN ALEJANDRO STREET**  
**URB SAN IGNACIO**

City **SAN JUAN** State **PR** Zip Code **00927-6821**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **215.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102777**

Amount of Each Receipt this Period **40.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MRS. NELIA B. DIAZ**

Mailing Address **200 LUNA PARK DRIVE APT. 408**

City **ALEXANDRIA** State **VA** Zip Code **22305-3149**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt **02 / 11 / 2016**

Transaction ID : **SA11.3100691**

Amount of Each Receipt this Period **40.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**105.00**

201604140200097614

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. NELIA B. DIAZ**

Mailing Address **200 LUNA PARK DRIVE APT. 408**

City **ALEXANDRIA** State **VA** Zip Code **22305-3149**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt **03 / 21 / 2016**

Transaction ID : **SA11.3101418**

Amount of Each Receipt this Period **40.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EMILY DIBERT**

Mailing Address **121 WEST POPLAR AVENUE**

City **SAN MATEO** State **CA** Zip Code **94402-1151**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101251**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN DILLINGHAM**

Mailing Address **5925 E. SAINT ANDREW'S WAY**

City **SCOTTSDALE** State **AZ** Zip Code **85254-4846**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DILLINGHAM LAW P.L.L.C.** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102703**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**790.00**

201604140200097615

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 91 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL D. DINUR**

Mailing Address **625 RIVER CHASE RIDGE N.W.**

City **ATLANTA** State **GA** Zip Code **30328-3568**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DINUR AND DELUCA, LLP** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **02 / 10 / 2016**

Transaction ID : **SA11.3100679**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MIKE DOERNHOEFER**

Mailing Address **2840 SAN JUAN BLVD.**

City **BELMONT** State **CA** Zip Code **94002-1344**

FEC ID number of contributing federal political committee. **C**

Name of Employer **REYNOLDS & REYNOLDS CO.** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101132**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM DOLAN**

Mailing Address **1040 E. OSBORN RD.**

City **PHOENIX** State **AZ** Zip Code **85014-5248**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PHYSICIAN** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102335**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**650.00**

201604140200097616

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MICHELLE DORMAN**

Mailing Address **1345 CHANDLER ROAD**

City **LAKE OSWEGO** State **OR** Zip Code **97034-2807**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **COMMUNITY VOLUNTEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102672**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. NANCY D. DOWNEY**

Mailing Address **18730 N. 97TH PLACE**

City **SCOTTSDALE** State **AZ** Zip Code **85255-2599**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099981**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. RAISSA H. DOWNS**

Mailing Address **1016 SOUTH CAROLINA AVE SE**

City **WASHINGTON** State **DC** Zip Code **20003-2146**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TARPLIN, DOWNS & YOUNG, LLC** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102134**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

201604140200097617

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>JOHN DRAGHI</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>
Mailing Address <b>325 WEST END AVENUE</b>		Transaction ID : <b>SA11.3101337</b>
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10023-8135</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>FORTRESS INVESTMENT GROUP</b>	Occupation <b>MANAGING DIRECTOR</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>MS. LINDA DRESNER</b>		Date of Receipt MM / DD / YYYY <b>03 / 01 / 2016</b>
Mailing Address <b>8800 DIX AVENUE</b>		Transaction ID : <b>SA11.3100854</b>
City <b>DETROIT</b>	State <b>MI</b>	Zip Code <b>48209-1093</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2700.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>RETAIL MERCHANT</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2700.00</b>	

Full Name (Last, First, Middle Initial) <b>MRS. PATSY L. DRUMMOND</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>1701 BRAMSFORD COURT</b>		Transaction ID : <b>SA11.3101448</b>
City <b>RICHMOND</b>	State <b>VA</b>	Zip Code <b>23238-4446</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>750.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097618

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 94 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**COURTNEY DUNBAR**

Mailing Address **2111 S. 67TH STREET**

City **OMAHA** State **NE** Zip Code **68106-2882**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OLSSON ASSOCIATES** Occupation **ECONOMIC DEVELOPMENT LEADER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101265**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ROSEMARY DUNCAN**

Mailing Address **907 E. 3RD STREET**

City **SWEETWATER** State **TX** Zip Code **79556-4775**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**01 / 13 / 2016**

Transaction ID : **SA11.3099854**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ROSEMARY DUNCAN**

Mailing Address **907 E. 3RD STREET**

City **SWEETWATER** State **TX** Zip Code **79556-4775**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**01 / 26 / 2016**

Transaction ID : **SA11.3099895**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**600.00**

201604140200097619

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 95 OF 590

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JANICE V. DUNN**

Mailing Address **311 CALIFORNIA ROAD**

City **MORGANTOWN** State **PA** Zip Code **19543-9445**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **02 / 17 / 2016**

Transaction ID : **SA11.3100721**

Amount of Each Receipt this Period **100.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. BRUCE L. DUSENBERRY**

Mailing Address **7090 N. VIA SIERRA DEL SOL**

City **TUCSON** State **AZ** Zip Code **85718-7343**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102690**

Amount of Each Receipt this Period **500.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. PHYLLIS J. EAGON**

Mailing Address **2420 NW MARSHALL ST.**  
**APT 104**

City **PORTLAND** State **OR** Zip Code **97210-2975**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101042**

Amount of Each Receipt this Period **25.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **625.00**

**TOTAL** This Period (last page this line number only).....

201604140200097620

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 96 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial) <b>MRS. BARBARA B. EBERT</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>	
Mailing Address 1 <b>CHRISTINA</b>			Transaction ID : <b>SA11.3100454</b>	
City <b>WAYLAND</b>	State <b>MA</b>	Zip Code <b>01778-3919</b>	Amount of Each Receipt this Period <b>50.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item <input type="checkbox"/> CONTRIBUTION		
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>525.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

B. Full Name (Last, First, Middle Initial) <b>MRS. BARBARA B. EBERT</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address 1 <b>CHRISTINA</b>			Transaction ID : <b>SA11.3102514</b>	
City <b>WAYLAND</b>	State <b>MA</b>	Zip Code <b>01778-3919</b>	Amount of Each Receipt this Period <b>75.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item <input type="checkbox"/> CONTRIBUTION		
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>525.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

C. Full Name (Last, First, Middle Initial) <b>MR. CHARLES B. EDELSTEIN</b>			Date of Receipt MM / DD / YYYY <b>03 / 14 / 2016</b>	
Mailing Address <b>219 E. LAKE SHORE DR., APT. 8D</b>			Transaction ID : <b>SA11.3100926</b>	
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60611-1333</b>	Amount of Each Receipt this Period <b>1250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item <input type="checkbox"/> CONTRIBUTION		
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>PHILANTHROPIST</b>	Election Cycle-to-Date <b>1250.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1375.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097621



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 97 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JEAN A. EGAN**

Mailing Address **116 FLANDERS ROAD  
SUITE 2000**

City **WESTBOROUGH** State **MA** Zip Code **01581-1072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101684**

Amount of Each Receipt this Period **5400.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JEAN A. EGAN**

Mailing Address **116 FLANDERS ROAD  
SUITE 2000**

City **WESTBOROUGH** State **MA** Zip Code **01581-1072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101684B**

Amount of Each Receipt this Period **-2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. JEAN A. EGAN**

Mailing Address **116 FLANDERS ROAD  
SUITE 2000**

City **WESTBOROUGH** State **MA** Zip Code **01581-1072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101697**

Amount of Each Receipt this Period **2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**SUBTOTAL** of Receipts This Page (optional)..... **5400.00**

**TOTAL** This Period (last page this line number only).....

201604140200097622

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ERIC Y. EICHLER**

Mailing Address 123 JAFFREY RD,

City MALVERN State PA Zip Code 19355-3417

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102570

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JUDITH A. EISENBERG**

Mailing Address 12 EAST 49TH STREET -41ST FLOOR

City NEW YORK State NY Zip Code 10017-8298

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2700.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102042

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. SAMUEL M. EISENSTAT**

Mailing Address 45 EAST 89TH STREET  
APARTMENT 24E

City NEW YORK State NY Zip Code 10128-1230

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102098

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

6400.00

201604140200097623

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 99 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

Full Name (Last, First, Middle Initial) <b>MR. SAMUEL M. EISENSTAT</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>45 EAST 89TH STREET APARTMENT 24E</b>			Transaction ID : <b>SA11.3102098B</b>	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10128-1230</b>	Amount of Each Receipt this Period <b>-2700.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>ATTORNEY</b>	REDESIGNATION TO GENERAL	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5400.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. SAMUEL M. EISENSTAT</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>45 EAST 89TH STREET APARTMENT 24E</b>			Transaction ID : <b>SA11.3102995</b>	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10128-1230</b>	Amount of Each Receipt this Period <b>2700.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>ATTORNEY</b>	REDESIGNATION FROM PRIMARY	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5400.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. TIMOTHY V. EISENMANN</b>			Date of Receipt MM / DD / YYYY <b>02 / 03 / 2016</b>	
Mailing Address <b>2608 WEST 20TH PLACE</b>			Transaction ID : <b>SA11.3100210</b>	
City <b>YUMA</b>	State <b>AZ</b>	Zip Code <b>85364-6005</b>	Amount of Each Receipt this Period <b>50.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>450.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>50.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097624

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 100 OF 590

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.**

Full Name (Last, First, Middle Initial)  
**MR. TIMOTHY V. EISENMANN**

Mailing Address **2608 WEST 20TH PLACE**

City **YUMA** State **AZ** Zip Code **85364-6005**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3101946**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
**MR. RAMSAY ELDER**

Mailing Address **2817 TANGLEY ROAD**

City **HOUSTON** State **TX** Zip Code **77005-2351**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ACCOUNTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102079**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
**MR. MARK ELLIOTT**

Mailing Address **33922 N. 67TH ST.**

City **SCOTTSDALE** State **AZ** Zip Code **85266-7248**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102720**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**550.00**

201604140200097625

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 101 OF 590

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>MR. WILLIAM J. ELSER</b>		Date of Receipt MM / DD / YYYY <b>03 / 15 / 2016</b>
Mailing Address <b>210 N. MAGUIRE AVENUE APARTMENT 315</b>		Transaction ID : <b>SA11.3101283</b>
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85710-9048</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>225.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>225.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. ROBERT A. EPSTEIN</b>		Date of Receipt MM / DD / YYYY <b>03 / 24 / 2016</b>
Mailing Address <b>4562 CHELSEA LN</b>		Transaction ID : <b>SA11.3101688</b>
City <b>BLOOMFIELD HILLS</b>	State <b>MI</b>	Zip Code <b>48301-3616</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>AJM PACKING</b>	Occupation <b>EXECUTIVE</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. CHRISTOPHER F. ERSKINE</b>		Date of Receipt MM / DD / YYYY <b>01 / 11 / 2016</b>
Mailing Address <b>12828 N. WOODLAND TRAIL</b>		Transaction ID : <b>SA11.3099849</b>
City <b>PARKER</b>	State <b>CO</b>	Zip Code <b>80138-8256</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>40.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1265.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097626

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 102 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRUCE ETKIN**

Mailing Address **1512 LARIMER ST, STE 100**

City **DENVER** State **CO** Zip Code **80202-1644**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ETKIN JOHNSON GROUP** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 01 / 2016**

Transaction ID : **SA11.3100864**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RON D. ETTINGER**

Mailing Address **1565 VICTORIA ROAD SOUTH**

City **LILYDALE** State **MN** Zip Code **55118-3659**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **411.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101246**

Amount of Each Receipt this Period **163.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RON D. ETTINGER**

Mailing Address **1565 VICTORIA ROAD SOUTH**

City **LILYDALE** State **MN** Zip Code **55118-3659**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **411.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102383**

Amount of Each Receipt this Period **20.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **1183.00**

**TOTAL** This Period (last page this line number only) .....

201604140200097627

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 103 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. P.F.N. FANNING**

Mailing Address **P.O. BOX 607**

City **UNIONVILLE** State **PA** Zip Code **19375-0607**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **HORSE BREEDER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 03 / 2016**

Transaction ID : **SA11.3100168**

Amount of Each Receipt this Period **100.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. P.F.N. FANNING**

Mailing Address **P.O. BOX 607**

City **UNIONVILLE** State **PA** Zip Code **19375-0607**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **HORSE BREEDER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 28 / 2016**

Transaction ID : **SA11.3101796**

Amount of Each Receipt this Period **100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. SUSAN M. FARBMAN**

Mailing Address **28400 NORTHWESTERN HIGHWAY STE. 40**

City **SOUTHFIELD** State **MI** Zip Code **48034-8349**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 08 / 2016**

Transaction ID : **SA11.3100903**

Amount of Each Receipt this Period **1000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **1200.00**

**TOTAL** This Period (last page this line number only).....

201604140200097628

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 104 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOE E. FARRELL JR.**

Mailing Address 1512 SE 11 ST

City FT. LAUDERDALE State FL Zip Code 33316-1442

FEC ID number of contributing federal political committee. **C**

Name of Employer RESOLVE MARINE GROUP Occupation SHIP SALVAGE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101268

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MATTHEW P. FEENEY**

Mailing Address 6525 N. CENTRAL AVE.

City PHOENIX State AZ Zip Code 85012-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer SNELL & WILMER, L.L.P. Occupation PARTNER, ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt MM / DD / YYYY  
12 / 07 / 2015

Transaction ID : SA11.3099091

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MATTHEW P. FEENEY**

Mailing Address 6525 N. CENTRAL AVE.

City PHOENIX State AZ Zip Code 85012-1139

FEC ID number of contributing federal political committee. **C**

Name of Employer SNELL & WILMER, L.L.P. Occupation PARTNER, ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt MM / DD / YYYY  
01 / 31 / 2016

Transaction ID : SA11.A3099091

Amount of Each Receipt this Period -1000.00

Memo Item CONTRIBUTION  
REATTRIBUTION TO SPOUSE

**SUBTOTAL** of Receipts This Page (optional)..... 500.00

**TOTAL** This Period (last page this line number only).....

201604140200097629



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

Full Name (Last, First, Middle Initial) <b>MS. MICHELE M. FEENEY</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>		
Mailing Address <b>2800 N. CENTRAL AVE.</b>			Transaction ID : <b>SA11.B3100546</b>		
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004-1007</b>	Amount of Each Receipt this Period <b>1000.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>SHERMAN &amp; HOWARD L.L.C.</b>		Occupation <b>ATTORNEY</b>	<b>REATTRIBUTION FROM SPOUSE</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>3600.00</b>			

Full Name (Last, First, Middle Initial) <b>MS. MICHELE M. FEENEY</b>			Date of Receipt MM / DD / YYYY <b>12 / 07 / 2015</b>		
Mailing Address <b>2800 N. CENTRAL AVE.</b>			Transaction ID : <b>SA11.3100546</b>		
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004-1007</b>	Amount of Each Receipt this Period <b>1000.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>SHERMAN &amp; HOWARD L.L.C.</b>		Occupation <b>ATTORNEY</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>3600.00</b>			

Full Name (Last, First, Middle Initial) <b>MS. MICHELE M. FEENEY</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>		
Mailing Address <b>2800 N. CENTRAL AVE.</b>			Transaction ID : <b>SA11.3100546B</b>		
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004-1007</b>	Amount of Each Receipt this Period <b>-900.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>SHERMAN &amp; HOWARD L.L.C.</b>		Occupation <b>ATTORNEY</b>	<b>REDESIGNATION TO GENERAL</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>3600.00</b>			

SUBTOTAL of Receipts This Page (optional).....			<b>0.00</b>		
TOTAL This Period (last page this line number only).....					

201604140200097630

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15		

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

A. Full Name (Last, First, Middle Initial) <b>MS. MICHELE M. FEENEY</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>	
Mailing Address <b>2800 N. CENTRAL AVE.</b>			Transaction ID : <b>SA11.3100548</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004-1007</b>	Amount of Each Receipt this Period <b>900.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>SHERMAN &amp; HOWARD L.L.C.</b>		Occupation <b>ATTORNEY</b>	<b>REDESIGNATION FROM PRIMARY</b>	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>3600.00</b>		

B. Full Name (Last, First, Middle Initial) <b>MR. TOM FELLMAN</b>			Date of Receipt MM / DD / YYYY <b>03 / 08 / 2016</b>	
Mailing Address <b>809 N. 96TH ST.</b>			Transaction ID : <b>SA11.3100900</b>	
City <b>OMAHA</b>	State <b>NE</b>	Zip Code <b>68114-2498</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>BROADMOOR DEVELOPMENT</b>		Occupation <b>OWNER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

C. Full Name (Last, First, Middle Initial) <b>DR. STEPHEN FERRARA</b>			Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>	
Mailing Address <b>4524 32ND ROAD NORTH</b>			Transaction ID : <b>SA11.3101328</b>	
City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22207-4459</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>WALTER REED NATIONAL MILITARY MEDICAL CENTER</b>		Occupation <b>VASCULAR AND INTERVENTIONAL RADIOLOGIST</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097631

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. DIANNE FITZGERALD-VERBONITZ**

Mailing Address **P.O. BOX 3404**

City **CAREFREE** State **AZ** Zip Code **85377-3404**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARIZONA PSYCHOLOGICAL ASSOCIATION** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099975**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL J. FITZPATRICK**

Mailing Address **345 LORTON AVENUE STE. 401**

City **BURLINGAME** State **CA** Zip Code **94010-4137**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BLAST MOTION, INC.** Occupation **CEO/FOUNDER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101332**

Amount of Each Receipt this Period  
**5400.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL J. FITZPATRICK**

Mailing Address **345 LORTON AVENUE STE. 401**

City **BURLINGAME** State **CA** Zip Code **94010-4137**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BLAST MOTION, INC.** Occupation **CEO/FOUNDER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101332B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5650.00**

201604140200097632

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 108 OF 590

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL J. FITZPATRICK**

Mailing Address **345 LORTON AVENUE STE. 401**

City **BURLINGAME** State **CA** Zip Code **94010-4137**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BLAST MOTION, INC.** Occupation **CEO/FOUNDER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 16 / 2016**

Transaction ID : **SA11.3101896**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MS. ROSEMARIE A. FIUMARA**

Mailing Address **1306 LEWIS O GRAY DR.**

City **SAUGUS** State **MA** Zip Code **01906-4408**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102313**

Amount of Each Receipt this Period **100.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. CYNTHIA L. FLEMING**

Mailing Address **4555 EAST MAYO BLVD - #4431**

City **PHOENIX** State **AZ** Zip Code **85050-6968**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101266**

Amount of Each Receipt this Period **500.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **600.00**

**TOTAL** This Period (last page this line number only) .....

201604140200097633

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 109 OF 590  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ALBION R. FLETCHER JR.**

Mailing Address **135 WEST STREET**

City **BRAINTREE** State **MA** Zip Code **02184-3920**

FEC ID number of contributing federal political committee. **C**

Name of Employer **G.E.** Occupation **ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 03 / 2016**

Transaction ID : **SA11.3100143**

Amount of Each Receipt this Period **100.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. ALBION R. FLETCHER JR.**

Mailing Address **135 WEST STREET**

City **BRAINTREE** State **MA** Zip Code **02184-3920**

FEC ID number of contributing federal political committee. **C**

Name of Employer **G.E.** Occupation **ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 25 / 2016**

Transaction ID : **SA11.3101709**

Amount of Each Receipt this Period **200.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MIKE FOLEY**

Mailing Address **1113 WILDERNESS TRAIL**

City **RICHARDSON** State **TX** Zip Code **75080-2353**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEWMARC PETROLEUM** Occupation **OIL COMPANY EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100386**

Amount of Each Receipt this Period **25.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**325.00**

201604140200097634

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 110 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MIKE FOLEY**

Mailing Address **1113 WILDERNESS TRAIL**

City **RICHARDSON** State **TX** Zip Code **75080-2353**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEWMARC PETROLEUM** Occupation **OIL COMPANY EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt **03 / 03 / 2016**  
Transaction ID : **SA11.3101044**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. MIKE FOLEY**

Mailing Address **1113 WILDERNESS TRAIL**

City **RICHARDSON** State **TX** Zip Code **75080-2353**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NEWMARC PETROLEUM** Occupation **OIL COMPANY EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102258**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES D. FORBES**

Mailing Address **50 EAST 72ND STREET**

City **NEW YORK** State **NY** Zip Code **10021-4246**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UBS** Occupation **VICE CHAIR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **01 / 19 / 2016**  
Transaction ID : **SA11.3099880**

Amount of Each Receipt this Period **2700.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **2750.00**

**TOTAL** This Period (last page this line number only)..... **2750.00**

201604140200097635

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 111 OF 590

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**DR. RAMON FRANCO**

Mailing Address **740 N. ISLAND DRIVE**

City **ATLANTA** State **GA** Zip Code **30327-4620**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **02 / 10 / 2016**

Transaction ID : **SA11.3100680**

Amount of Each Receipt this Period **500.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. STANLEY FRANKEL**

Mailing Address **2301 W. BIG BEAVER ROAD  
SUITE 900**

City **TROY** State **MI** Zip Code **48084-3332**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 01 / 2016**

Transaction ID : **SA11.3100855**

Amount of Each Receipt this Period **1000.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. JOYCE L. FRAZIER**

Mailing Address **5161 VILLAGE 5**

City **CAMARILLO** State **CA** Zip Code **93012-6803**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : **SA11.3100405**

Amount of Each Receipt this Period **25.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1525.00**

**TOTAL** This Period (last page this line number only).....

201604140200097636

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 112 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. BOYD W. FREEMAN**

Mailing Address **2801 WHIPPOORWILL LANE**

City **ENID** State **OK** Zip Code **73703-1517**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 14 / 2016**  
Transaction ID : **SA11.3100917**

Amount of Each Receipt this Period **250.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**PAUL FREEMAN**

Mailing Address **88 WEST PACES FERRY RD UNIT 2510**

City **ATLANTA** State **GA** Zip Code **30305-1447**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **01 / 31 / 2016**  
Transaction ID : **SA11.3100513**

Amount of Each Receipt this Period **250.00**  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JIM FREUDENBERG**

Mailing Address **12801 CLAY CENTER ROAD**

City **CARMEL** State **IN** Zip Code **46032-9273**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GRAND PRIX OF BOSTON** Occupation **CHIEF COMMERCIAL OFFICER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 24 / 2016**  
Transaction ID : **SA11.3101678**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **1500.00**

**TOTAL** This Period (last page this line number only).....

201604140200097637



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 113 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA FRIEDMAN**

Mailing Address 1 BEEKMAN PLACE

City: NEW YORK State: NY Zip Code: 10022-8057

FEC ID number of contributing federal political committee: C

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 03 / 08 / 2016  
Transaction ID: SA11.3100891

Amount of Each Receipt this Period: 2700.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA FRIEDMAN**

Mailing Address 1 BEEKMAN PLACE

City: NEW YORK State: NY Zip Code: 10022-8057

FEC ID number of contributing federal political committee: C

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 03 / 08 / 2016  
Transaction ID: SA11.3100891B

Amount of Each Receipt this Period: -2700.00  
 Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA FRIEDMAN**

Mailing Address 1 BEEKMAN PLACE

City: NEW YORK State: NY Zip Code: 10022-8057

FEC ID number of contributing federal political committee: C

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5400.00

Date of Receipt: 03 / 08 / 2016  
Transaction ID: SA11.3101803

Amount of Each Receipt this Period: 2700.00  
 Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... 2700.00

**TOTAL** This Period (last page this line number only).....

201604140200097638

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 114 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. BARRY S. FRIEDBERG**

Mailing Address **134 E. 71ST STREET**

City **NEW YORK** State **NY** Zip Code **10021-5011**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FRIEDBERG MILSTEIN** Occupation **INVESTMENTS**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**02 / 11 / 2016**

Transaction ID : **SA11.3100692**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. HOWARD I. FRIEDMAN**

Mailing Address **16237 MEADOWRIDGE ROAD**

City **ENCINO** State **CA** Zip Code **91436-3604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099936**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JERRY FRIEDMAN**

Mailing Address **251 W. BEACH AVE**

City **INGLEWOOD** State **CA** Zip Code **90302-2904**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MARVIN ENGINEERING** Occupation **C.E.O.**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 30 / 2016**

Transaction ID : **SA11.3101938**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3950.00**

201604140200097639

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS FRIEDMAN, JR.**

Mailing Address **969 PARK AVENUE**

City **NEW YORK** State **NY** Zip Code **10028-0322**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 25 / 2016**

Transaction ID : **SA11.3101769**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. PETER S. FUDGE**

Mailing Address **27 LARUE DRIVE**

City **HUNTINGTON** State **NY** Zip Code **11743-2501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **02 / 03 / 2016**

Transaction ID : **SA11.3100292**

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES L. FULLMER**

Mailing Address **2552 WALNUT AVE. # 230**

City **TUSTIN** State **CA** Zip Code **92780-6983**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101254**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**950.00**

201604140200097640

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 116 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

A. Full Name (Last, First, Middle Initial) <b>MR. PAUL E. GALANTI USN (RET)</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 21MAXWELL RD			Transaction ID : SA11.3102563	
City RICHMOND	State VA	Zip Code 23226-1627	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

B. Full Name (Last, First, Middle Initial) <b>MR. GREGORY W. GALLAGHER</b>			Date of Receipt MM / DD / YYYY 03 / 22 / 2016	
Mailing Address 34 O'BRIEN ROAD			Transaction ID : SA11.3101567	
City MARLBOROUGH	State MA	Zip Code 01752-2791	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 325.00		

C. Full Name (Last, First, Middle Initial) <b>JOHN T. GAROFONO</b>			Date of Receipt MM / DD / YYYY 03 / 16 / 2016	
Mailing Address 6750 E. EXETER BLVD.			Transaction ID : SA11.3101295	
City SCOTTSDALE	State AZ	Zip Code 85251-3128	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer ARIZONA FAMILY FARMS		Occupation FARMER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097641

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 117 OF 590

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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

Full Name (Last, First, Middle Initial) <b>WAYNE GARY GATES</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>	
Mailing Address <b>15418 LAKESIDE PLAZA</b>		Transaction ID : <b>SA11.3101273</b>	
City <b>OMAHA</b>	State <b>NE</b>	Zip Code <b>68137-5169</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>		

Full Name (Last, First, Middle Initial) <b>MS. SYDNEY JANE GEIKLER</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>	
Mailing Address <b>6063 W. MILLAY ST.</b>		Transaction ID : <b>SA11.3100431</b>	
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85743-8260</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>30.00</b>	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1194.00</b>		

Full Name (Last, First, Middle Initial) <b>MS. SYDNEY JANE GEIKLER</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>	
Mailing Address <b>6063 W. MILLAY ST.</b>		Transaction ID : <b>SA11.3101186</b>	
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85743-8260</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>55.00</b>	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1194.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1085.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097642

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>MS. SYDNEY JANE GEIKLER</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>6063 W. MILLAY ST.</b>			Transaction ID : <b>SA11.3102204</b>
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85743-8260</b>	Amount of Each Receipt this Period <b>105.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1194.00</b>		

B. Full Name (Last, First, Middle Initial) <b>MRS. ZOAN GENTNER</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>520 WEST ARROYO AV.</b>			Transaction ID : <b>SA11.3100362</b>
City <b>AJO</b>	State <b>AZ</b>	Zip Code <b>85321-2145</b>	Amount of Each Receipt this Period <b>20.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>MINERALS RESEARCH &amp; RECOVERY INC.</b>	Occupation <b>OFFICE MGR.</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>270.00</b>		

C. Full Name (Last, First, Middle Initial) <b>MRS. ZOAN GENTNER</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>
Mailing Address <b>520 WEST ARROYO AV.</b>			Transaction ID : <b>SA11.3101010</b>
City <b>AJO</b>	State <b>AZ</b>	Zip Code <b>85321-2145</b>	Amount of Each Receipt this Period <b>20.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>MINERALS RESEARCH &amp; RECOVERY INC.</b>	Occupation <b>OFFICE MGR.</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>270.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>145.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097643

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ZOAN GENTNER**

Mailing Address **520 WEST ARROYO AV.**

City **AJO** State **AZ** Zip Code **85321-2145**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MINERALS RESEARCH & RECOVERY INC.** Occupation **OFFICE MGR.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **270.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102257**

Amount of Each Receipt this Period **20.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LARRY GIGERICH**

Mailing Address **11761 DIAMOND POINTE COURT**

City **INDIANAPOLIS** State **IN** Zip Code **46236-9060**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GINOVUS** Occupation **MANAGING DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100512**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL GILBERT**

Mailing Address **26875 CHARLES LN**

City **FRANKLIN** State **MI** Zip Code **48025-1302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **QUICKEN LOANS** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 01 / 2016**

Transaction ID : **SA11.3100843**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1270.00**

**TOTAL** This Period (last page this line number only).....

20160414020097644

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 120 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MARK GILLESPIE**

Mailing Address **835 W HOPI DR.**

City **COOLIDGE** State **AZ** Zip Code **85128-3002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102189**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS F. GILMAN**

Mailing Address **42690 N. 98TH PL.**

City **SCOTTSDALE** State **AZ** Zip Code **85262-3818**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AUTOMOTIVE CAPITAL SERVICES** Occupation **C.E.O.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102709**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES D. GILMUR**

Mailing Address **8027 N.E. 175TH STREET**

City **KENMORE** State **WA** Zip Code **98028-1808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101722**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3050.00**

201604140200097645



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 121 OF 590

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. BEN F. GINGG**

Mailing Address 3877 N. GILA PLAIN TRL

City BUCKEYE State AZ Zip Code 85396-3690

FEC ID number of contributing federal political committee. **C**

Name of Employer TRIPLE G. DAIRY Occupation DAIRY FARMER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt 02 / 09 / 2016

Transaction ID : SA11.3100584

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN A. GOGOLAK**

Mailing Address 5730 N. CASA BLANCA DRIVE

City PARADISE VALLEY State AZ Zip Code 85253-5260

FEC ID number of contributing federal political committee. **C**

Name of Employer AG EDWARDS Occupation FINANCIAL CONSULTANT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 02 / 23 / 2016

Transaction ID : SA11.3100785

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL S. GOLDING**

Mailing Address 2400 S. FINLEY ROAD  
APARTMENT 271

City LOMBARD State IL Zip Code 60148-7023

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 535.00

Date of Receipt 01 / 20 / 2016

Transaction ID : SA11.3099881

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 1600.00

**TOTAL** This Period (last page this line number only).....

201604140200097646

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE 122 OF 590	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. MARK D. GOLDMAN</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>	
Mailing Address <b>7047 E. GREENWAY PARKWAY STE. 150</b>		Transaction ID : <b>SA11.3101322</b>	
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85254-8109</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>GOLDMAN &amp; ZWILLINGER</b>	Occupation <b>LAWYER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. BARRY M. GOLDWATER JR.</b>		Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>	
Mailing Address <b>3219 E. CAMELBACK ROAD STE. 552</b>		Transaction ID : <b>SA11.3099983</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85018-2307</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>B2 SOLUTIONS, INC.</b>	Occupation <b>GOVERNMENT &amp; PUBLIC AFFAIRS CONSUL</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. DAVID P. GONZALES</b>		Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>	
Mailing Address <b>101 WEST MORTEN AVENUE</b>		Transaction ID : <b>SA11.3099954</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85021-7246</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>UNITED STATED DEPT OF JUSTICE</b>	Occupation <b>US MARSHAL</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097647

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. EUNICE ERB GOODAN**

Mailing Address **2550 ABERDEEN AVENUE**

City **LOS ANGELES** State **CA** Zip Code **90027-1220**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 03 / 2016**

Transaction ID : **SA11.3100212**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ADAM K. GOODMAN**

Mailing Address **9829 N. 49TH PLACE**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-1005**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GOODMANS INTERIOR STRUCTURES** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 28 / 2016**

Transaction ID : **SA11.3101821**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JEREMY M. GOODMAN**

Mailing Address **6307 S. 44TH AVENUE**

City **LAVEEN** State **AZ** Zip Code **85339-1964**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GOODMAN LAW, PLLC** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 27 / 2016**

Transaction ID : **SA11.3099989**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1250.00**

**TOTAL** This Period (last page this line number only).....

201604140200097648

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 124 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LESLIE F. GOODMAN JR.**

Mailing Address 7314 SUMMERFIELD MANOR LN.

City SAINT LOUIS      State MO      Zip Code 63129-5738

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2602.00

Date of Receipt  
MM / DD / YYYY  
03 / 21 / 2016

Transaction ID : SA11.3101517

Amount of Each Receipt this Period  
515.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MARK GOODMAN**

Mailing Address 25895 WOODLORE RD

City FRANKLIN      State MI      Zip Code 48025-1259

FEC ID number of contributing federal political committee. **C**

Name of Employer EATON STEEL      Occupation EXECUTIVE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : SA11.3100859

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MELVIN G. GOODWEATHER**

Mailing Address 820 EMERALD DR.

City ALEXANDRIA      State VA      Zip Code 22308-2622

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101730

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1765.00

201604140200097649

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE K. GOSKO**

Mailing Address **9301 PARKWOOD COURT**

City **FORT MYERS** State **FL** Zip Code **33908-2862**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt **03 / 21 / 2016**  
Transaction ID : **SA11.3101452**

Amount of Each Receipt this Period **400.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**LT. COL. DARWIN B. GOSSMAN JR., (RET.)**

Mailing Address **31689 CIENEGA SPRINGS ROAD #4**

City **PARKER** State **AZ** Zip Code **85344-8847**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **03 / 29 / 2016**  
Transaction ID : **SA11.3101871**

Amount of Each Receipt this Period **100.00**  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAY GOULD**

Mailing Address **7485 VICTORY LANE**

City **DELRAY BEACH** State **FL** Zip Code **33446-3104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MAJESTIC PROPERTY** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 29 / 2016**  
Transaction ID : **SA11.3100835**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **1500.00**

**TOTAL** This Period (last page this line number only).....

201604140200097650

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 126 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. CURTIS L. GRAY**

Mailing Address 2309 26TH ST S.

City ARLINGTON State VA Zip Code 22206-2870

FEC ID number of contributing federal political committee. **C**

Name of Employer BAE SYSTEMS, INC. Occupation SVP HUMAN RESOURCES

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt 03 / 25 / 2016  
Transaction ID : SA11.3101739

Amount of Each Receipt this Period 2000.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY A. GREEN**

Mailing Address 9633 EAGLE RIDGE DRIVE

City BETHESDA State MD Zip Code 20817-3920

FEC ID number of contributing federal political committee. **C**

Name of Employer J. A. GREEN & COMPANY Occupation OWNER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 02 / 24 / 2016  
Transaction ID : SA11.3100811

Amount of Each Receipt this Period 1000.00  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES GROSFELD**

Mailing Address ONE TOWNE SQUARE SUITE 1600

City SOUTHFIELD State MI Zip Code 48076-3728

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 01 / 2016  
Transaction ID : SA11.3100841

Amount of Each Receipt this Period 1000.00  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 4000.00

**TOTAL** This Period (last page this line number only).....

201604140200097651

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MS. NANCY E. GROSFELD</b>		Date of Receipt MM / DD / YYYY 03 / 01 / 2016	
Mailing Address <b>420 MARTELL DR.</b>		Transaction ID : <b>SA11.3100858</b>	
City <b>BLOOMFIELD HILLS</b>	State <b>MI</b>	Zip Code <b>48304-3452</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>ACTIVIST</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>DR. LESLIE D. GROSINGER</b>		Date of Receipt MM / DD / YYYY 03 / 30 / 2016	
Mailing Address <b>170 MARBLEHEAD DR.</b>		Transaction ID : <b>SA11.3101933</b>	
City <b>BLOOMFIELD HILLS</b>	State <b>MI</b>	Zip Code <b>48304-3335</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00	
Name of Employer <b>GROSINGER, SPIGELMAN &amp; GREY</b>	Occupation <b>OPHTHALMOLOGIST</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>DR. ROBERT H. GROVES</b>		Date of Receipt MM / DD / YYYY 01 / 27 / 2016	
Mailing Address <b>2237 ENCARTO DRIVE N.E.</b>		Transaction ID : <b>SA11.3099956</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85007-1515</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500.00	
Name of Employer <b>BANNER HEALTH</b>	Occupation <b>PHYSICIAN</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		
<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097652

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MURAT GUZEL**

Mailing Address **3542 STONEGATE DR.**

City **CENTER VALLEY** State **PA** Zip Code **18034-8120**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NATURAL FOOD SOURCE** Occupation **SALES**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101248**

Amount of Each Receipt this Period **200.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MURAT GUZEL**

Mailing Address **3542 STONEGATE DR.**

City **CENTER VALLEY** State **PA** Zip Code **18034-8120**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NATURAL FOOD SOURCE** Occupation **SALES**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 14 / 2016**

Transaction ID : **SA11.3101248B**

Amount of Each Receipt this Period **-100.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. MURAT GUZEL**

Mailing Address **3542 STONEGATE DR.**

City **CENTER VALLEY** State **PA** Zip Code **18034-8120**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NATURAL FOOD SOURCE** Occupation **SALES**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 14 / 2016**

Transaction ID : **SA11.3101280**

Amount of Each Receipt this Period **100.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**200.00**

201604140200097653



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ANGELA HAHN**

Mailing Address **835 OLD POST ROAD**

City **COTUIT** State **MA** Zip Code **02635-2934**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**03 / 24 / 2016**

Transaction ID : **SA11.3101689**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ANGELA HAHN**

Mailing Address **835 OLD POST ROAD**

City **COTUIT** State **MA** Zip Code **02635-2934**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**03 / 24 / 2016**

Transaction ID : **SA11.3101689B**

Amount of Each Receipt this Period  
**-2300.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ANGELA HAHN**

Mailing Address **835 OLD POST ROAD**

City **COTUIT** State **MA** Zip Code **02635-2934**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**03 / 24 / 2016**

Transaction ID : **SA11.3101699**

Amount of Each Receipt this Period  
**2300.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5000.00**

201604140200097654

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. JOANN HAKALA**

Mailing Address **103 E. MAIN STREET**

City **NEGAUNEE** State **MI** Zip Code **49866-1742**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt **01 / 28 / 2016**

Transaction ID : **SA11.3100029**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JEAN E. HALL**

Mailing Address **1010 WALTHAM ST APT 493**

City **LEXINGTON** State **MA** Zip Code **02421-8066**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 21 / 2016**

Transaction ID : **SA11.3101522**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN R. HALL**

Mailing Address **101 IDLE HOUR DR., #4**

City **LEXINGTON** State **KY** Zip Code **40502-1166**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 22 / 2016**

Transaction ID : **SA11.3101576**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **550.00**

**TOTAL** This Period (last page this line number only).....

201604140200097655

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial) <b>MR. KEVIN HALL</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>7828 HOLIDAY DR.</b>			Transaction ID : <b>SA11.3102736</b>
City <b>SARASOTA</b>	State <b>FL</b>	Zip Code <b>34231-5316</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>FIRST UNITED RESTAURANTS</b>	Occupation <b>SR. VICE PRESIDENT OF OPS</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>		

B. Full Name (Last, First, Middle Initial) <b>MR. ROBERT A. HALLER</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>
Mailing Address <b>135 SAINT PAULS AVENUE</b>			Transaction ID : <b>SA11.3099912</b>
City <b>STATEN ISLAND</b>	State <b>NY</b>	Zip Code <b>10301-3232</b>	Amount of Each Receipt this Period <b>10.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>ANTHOLOGY FILM ARCHIVES</b>	Occupation <b>DIRECTOR OF COLLECTIONS</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>243.00</b>		

C. Full Name (Last, First, Middle Initial) <b>MR. ROBERT A. HALLER</b>			Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>135 SAINT PAULS AVENUE</b>			Transaction ID : <b>SA11.3101399</b>
City <b>STATEN ISLAND</b>	State <b>NY</b>	Zip Code <b>10301-3232</b>	Amount of Each Receipt this Period <b>20.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>ANTHOLOGY FILM ARCHIVES</b>	Occupation <b>DIRECTOR OF COLLECTIONS</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>243.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>530.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097656

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**HON. HUGH L. HALLMAN**

Mailing Address **2011 N. CAMPO ALEGRE DRIVE**

City **TEMPE** State **AZ** Zip Code **85281-1101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HALLMAN & AFFILIATES** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099964**

Amount of Each Receipt this Period **250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**HON. HUGH L. HALLMAN**

Mailing Address **2011 N. CAMPO ALEGRE DRIVE**

City **TEMPE** State **AZ** Zip Code **85281-1101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HALLMAN & AFFILIATES** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt **01 / 28 / 2016**

Transaction ID : **SA11.3099964B**

Amount of Each Receipt this Period **-250.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**HON. HUGH L. HALLMAN**

Mailing Address **2011 N. CAMPO ALEGRE DRIVE**

City **TEMPE** State **AZ** Zip Code **85281-1101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HALLMAN & AFFILIATES** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3350.00**

Date of Receipt **01 / 28 / 2016**

Transaction ID : **SA11.3100565**

Amount of Each Receipt this Period **250.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**250.00**

201604140200097657

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. DANIEL HAMBURGER</b>		Date of Receipt MM / DD / YYYY 03 / 14 / 2016	
Mailing Address 3005 HIGHLAND PARKWAY		Transaction ID : SA11.3100914	
City DOWNERS GROVE	State IL	Zip Code 60515-5682	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer DEVRY EDUCATION GROUP	Occupation PRESIDENT & C.E.O.	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. GLENN HAMER</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 13370 N. 91ST STREET		Transaction ID : SA11.3102702	
City SCOTTSDALE	State AZ	Zip Code 85260-7642	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer ARIZONA CHAMBER OF COMMERCE	Occupation PRESIDENT	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MS. MARY E. HAMWAY</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2016	
Mailing Address 7112 E. BRONCO DR.		Transaction ID : SA11.3101320	
City PARADISE VALLEY	State AZ	Zip Code 85253-3186	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer TOWN OF PARADISE VALLEY	Occupation COUNCIL MEMBER	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097658

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 134 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID HANDLEMAN**

Mailing Address **1252 COTTINGHAM ROAD**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48302-2310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 01 / 2016**

Transaction ID : **SA11.3100844**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. RITA HANNAH**

Mailing Address **3202 E. ARROYO CHICO**

City **TUCSON** State **AZ** Zip Code **85716-5811**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 17 / 2016**

Transaction ID : **SA11.3100716**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. THEODORE E. HANSON**

Mailing Address **873 COUNTRY CLUB LANE**

City **NORTHBROOK** State **IL** Zip Code **60062-8603**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
**03 / 23 / 2016**

Transaction ID : **SA11.3101642**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1225.00**

201604140200097659

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 135 OF 590

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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 committees.

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>STEPHEN HARKINS</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address 5186 N MARLIN CANYON PLACE			Transaction ID : SA11.3101250		
City	State	Zip Code	Amount of Each Receipt this Period 250.00		
TUCSON	AZ	85750-6090	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00		
Name of Employer SELF-EMPLOYED		Occupation DENTIST	<input type="checkbox"/> Memo Item CONTRIBUTION		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. JOHN D. HARRIS II</b>			Date of Receipt MM / DD / YYYY 03 / 24 / 2016		
Mailing Address 665 BELLEVUE AVE.			Transaction ID : SA11.3101682		
City	State	Zip Code	Amount of Each Receipt this Period 1000.00		
NEWPORT	RI	02840-4280	<input type="checkbox"/> Memo Item CONTRIBUTION		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 1000.00		
Name of Employer RAYTHEON		Occupation VICE PRESIDENT/BUSINESS DEVELOPMEN	<input type="checkbox"/> Memo Item CONTRIBUTION		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2750.00			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. JOHN D. HARRIS II</b>			Date of Receipt MM / DD / YYYY 03 / 24 / 2016		
Mailing Address 665 BELLEVUE AVE.			Transaction ID : SA11.3101682B		
City	State	Zip Code	Amount of Each Receipt this Period -50.00		
NEWPORT	RI	02840-4280	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION REDESIGNATION TO GENERAL		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period -50.00		
Name of Employer RAYTHEON		Occupation VICE PRESIDENT/BUSINESS DEVELOPMEN	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION REDESIGNATION TO GENERAL		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2750.00			
<b>SUBTOTAL</b> of Receipts This Page (optional).....			1250.00		
<b>TOTAL</b> This Period (last page this line number only).....					

201604140200097660

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 136 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN D. HARRIS II**

Mailing Address **665 BELLEVUE AVE.**

City **NEWPORT** State **RI** Zip Code **02840-4280**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RAYTHEON** Occupation **VICE PRESIDENT/BUSINESS DEVELOPMEN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2750.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101842**

Amount of Each Receipt this Period **50.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD L. HARTMAN**

Mailing Address **2858 E WATFORD COURT**

City **QUEEN CREEK** State **AZ** Zip Code **85142-8422**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101160**

Amount of Each Receipt this Period **50.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD L. HARTMAN**

Mailing Address **2858 E WATFORD COURT**

City **QUEEN CREEK** State **AZ** Zip Code **85142-8422**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102336**

Amount of Each Receipt this Period **50.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **100.00**

**TOTAL** This Period (last page this line number only).....

201604140200097661



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT D. HARTMAN**

Mailing Address **9230 E. DESERT VISTA DR.**

City **SCOTTSDALE** State **AZ** Zip Code **85255-2935**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102569**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**DR. HASHIM J. HASSAN**

Mailing Address **112 GINNALOU DRIVE**

City **DOTHAN** State **AL** Zip Code **36303-2912**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HASSAN ORAL SURGERY** Occupation **ORAL SURGEON**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102259**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROGER L. HATTON**

Mailing Address **1260 E. MANHATTON DR.**

City **TEMPE** State **AZ** Zip Code **85282-5578**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM / DD / YYYY  
**01 / 29 / 2016**

Transaction ID : **SA11.3100047**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**850.00**

201604140200097662

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROGER L. HATTON**

Mailing Address **1260 E. MANHATTON DR.**

City **TEMPE** State **AZ** Zip Code **85282-5578**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 21 / 2016**

Transaction ID : **SA11.3101370**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. GAIL L. HAWRANEY**

Mailing Address **2 AVONDALE DRIVE**

City **NEWTOWN** State **PA** Zip Code **18940-2500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 04 / 2016**

Transaction ID : **SA11.3100307**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS HAYS III**

Mailing Address **401 WYNMERE ROAD**

City **WYNNEWOOD** State **PA** Zip Code **19096-1308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HAYS CORPORATION** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 03 / 2016**

Transaction ID : **SA11.3100298**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

201604140200097663

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. JOHN T. HAZEL JR.</b>			Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>		
Mailing Address <b>6254 HUNTLEY ROAD</b>			Transaction ID : <b>SA11.3101451</b>		
City <b>BROAD RUN</b>	State <b>VA</b>	Zip Code <b>20137-1830</b>	Amount of Each Receipt this Period <b>375.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>BUSINESS OWNER</b>	Election Cycle-to-Date <b>1475.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MR. THOMAS N. HAZEN</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>		
Mailing Address <b>20 BAYON DRIVE, APT#130 APARTMENT 130</b>			Transaction ID : <b>SA11.3101269</b>		
City <b>SOUTH HADLEY</b>	State <b>MA</b>	Zip Code <b>01075-3340</b>	Amount of Each Receipt this Period <b>750.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>FORMER EMPLOYER HAZEN PAPER COMPA</b>		Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>2700.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MR. JAMES P. HEA</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>		
Mailing Address <b>9130 NW 11TH COURT</b>			Transaction ID : <b>SA11.3101204</b>		
City <b>PLANTATION</b>	State <b>FL</b>	Zip Code <b>33322-4902</b>	Amount of Each Receipt this Period <b>100.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>RESOURCE BENEFITS, INC.</b>		Occupation <b>INSURANCE AGENT/BROKER</b>	Election Cycle-to-Date <b>250.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1225.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097664

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 140 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**DEBORAH HEAD**

Mailing Address **1448 E. TORREY PINES CIRCLE**

City **YUMA** State **AZ** Zip Code **85365-3504**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MORNINGSIDE BAPTIST CHURCH** Occupation **SECRETARY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100423**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**DEBORAH HEAD**

Mailing Address **1448 E. TORREY PINES CIRCLE**

City **YUMA** State **AZ** Zip Code **85365-3504**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MORNINGSIDE BAPTIST CHURCH** Occupation **SECRETARY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101240**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES W. HEAVENER**

Mailing Address **3300 UNIVERSITY BLVD STE 218**

City **WINTER PARK** State **FL** Zip Code **32792-7435**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE HEAVENER COMPANY** Occupation **C.E.O.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102072**

Amount of Each Receipt this Period  
**1250.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1375.00**

201604140200097665

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 141 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial) <b>MRS. GUSSIE K. HEBEL</b>		Date of Receipt MM / DD / YYYY <b>02 / 03 / 2016</b>
Mailing Address <b>1815 PARKSIDE LANE</b>		Transaction ID : <b>SA11.3100268</b>
City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78745-3641</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>20.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>235.00</b>	

B. Full Name (Last, First, Middle Initial) <b>MRS. GUSSIE K. HEBEL</b>		Date of Receipt MM / DD / YYYY <b>03 / 23 / 2016</b>
Mailing Address <b>1815 PARKSIDE LANE</b>		Transaction ID : <b>SA11.3101654</b>
City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78745-3641</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>40.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>235.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. ROBERT C. HECKMAN</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>143 MARTIN LANE</b>		Transaction ID : <b>SA11.3101734</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22304-7748</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer <b>CAPITAL CITY PARTNERS</b>	Occupation <b>CONSULTANT</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>4000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>310.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097666

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>MR. ROBERT C. HECKMAN</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>143 MARTIN LANE</b>		Transaction ID : <b>SA11.3101734B</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22304-7748</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-250.00</b>
Name of Employer <b>CAPITAL CITY PARTNERS</b>	Occupation <b>CONSULTANT</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>4000.00</b>	<b>REDESIGNATION TO GENERAL</b>

B. Full Name (Last, First, Middle Initial) <b>MR. ROBERT C. HECKMAN</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>143 MARTIN LANE</b>		Transaction ID : <b>SA11.3101833</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22304-7748</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>CAPITAL CITY PARTNERS</b>	Occupation <b>CONSULTANT</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>4000.00</b>	<b>REDESIGNATION FROM PRIMARY</b>

C. Full Name (Last, First, Middle Initial) <b>MR. ROBERT C. HECKMAN</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>143 MARTIN LANE</b>		Transaction ID : <b>SA11.3102125</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22304-7748</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>CAPITAL CITY PARTNERS</b>	Occupation <b>CONSULTANT</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>4000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097667

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 143 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

Full Name (Last, First, Middle Initial) <b>MR. ROBERT C. HECKMAN</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>143 MARTIN LANE</b>			Transaction ID : <b>SA11.3102125B</b>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22304-7748</b>	Amount of Each Receipt this Period <b>-250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>CAPITAL CITY PARTNERS</b>		Occupation <b>CONSULTANT</b>	<b>REDESIGNATION TO GENERAL</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>4000.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. ROBERT C. HECKMAN</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>143 MARTIN LANE</b>			Transaction ID : <b>SA11.3102996</b>	
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22304-7748</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>CAPITAL CITY PARTNERS</b>		Occupation <b>CONSULTANT</b>	<b>REDESIGNATION FROM PRIMARY</b>	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>4000.00</b>		

Full Name (Last, First, Middle Initial) <b>DR. ANTHONY K. HEDLEY</b>			Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>	
Mailing Address <b>2122 E. HIGHLAND AVENUE STE. 300</b>			Transaction ID : <b>SA11.3101314</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85016-4744</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>PHYSICIAN GROUP OF ARIZONA</b>		Occupation <b>ORTHOPAEDIC SURGEON</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097668

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. LESLIE HEIDEN</b>		Date of Receipt MM / DD / YYYY 02 / 09 / 2016
Mailing Address 490 BIRD LANE		Transaction ID : SA11.3100586
City LITCHFIELD PARK	State AZ	Zip Code 85340-4219
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer LITCHFIELD PARK	Occupation PRODUCTION	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>MR. W. BRUCE HEIDEN</b>		Date of Receipt MM / DD / YYYY 02 / 09 / 2016
Mailing Address P.O. BOX 428		Transaction ID : SA11.3100579
City BUCKEYE	State AZ	Zip Code 85326-0033
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMPLOYED	Occupation FARMER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>MRS. GRACE DE H. HENRY</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2016
Mailing Address 6555 GREEN SPARROW LN		Transaction ID : SA11.3100491
City N. LAS VEGAS	State NV	Zip Code 89084-2235
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097669



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROY A. HERBERGER JR.**

Mailing Address **5834 N. 22ND PLACE**

City **PHOENIX** State **AZ** Zip Code **85016-2707**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BOARD DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102717**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BILLY HICKMAN**

Mailing Address **10707 CASA BLANCA DRIVE**

City **GOODYEAR** State **AZ** Zip Code **85338-5003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HICKMAN FAMILY FARMS** Occupation **AG. BUSINESS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**02 / 09 / 2016**

Transaction ID : **SA11.3100596**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GLENN M. HICKMAN**

Mailing Address **6515 S. JACKRABBIT TRAIL**

City **BUCKEYE** State **AZ** Zip Code **85326-5641**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**02 / 09 / 2016**

Transaction ID : **SA11.3100595**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

201604140200097670

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 146 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**LTC ROBERT WILLARD HICKS (RET)**

Mailing Address **15594 W. FAIRMOUNT AVENUE**

City **GOODYEAR** State **AZ** Zip Code **85395-8567**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 21 / 2016**

Transaction ID : **SA11.3101525**

Amount of Each Receipt this Period  
**300.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. MARIAN S. HIGGINS**

Mailing Address **630 WILLOW VALLEY SQUARE**

City **LANCASTER** State **PA** Zip Code **17602-4868**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
MM / DD / YYYY  
**01 / 26 / 2016**

Transaction ID : **SA11.3099892**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. MARIAN S. HIGGINS**

Mailing Address **630 WILLOW VALLEY SQUARE**

City **LANCASTER** State **PA** Zip Code **17602-4868**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
MM / DD / YYYY  
**01 / 29 / 2016**

Transaction ID : **SA11.3100106**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**350.00**

201604140200097671

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 147 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARIAN S. HIGGINS**

Mailing Address **630 WILLOW VALLEY SQUARE**

City **LANCASTER** State **PA** Zip Code **17602-4868**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 25 / 2016**  
Transaction ID : **SA11.3101717**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ROSEMARY B. HILL**

Mailing Address **801 S. LONGWOOD AVENUE**

City **LOS ANGELES** State **CA** Zip Code **90005-3828**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt **03 / 28 / 2016**  
Transaction ID : **SA11.3101772**

Amount of Each Receipt this Period **50.00**  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MARK HILLIARD**

Mailing Address **8015 E. VISTA BONITA DR.**

City **SCOTTSDALE** State **AZ** Zip Code **85255-4201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO EDUCATION GROUP** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102705**

Amount of Each Receipt this Period **500.00**  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **575.00**

**TOTAL** This Period (last page this line number only).....

201604140200097672

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 148 OF 590

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN J. HILTON**

Mailing Address **10387 E. ROB'S CAMP ROAD**

City **SCOTTSDALE** State **AZ** Zip Code **85255-7165**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MERITAGE HOMES CORPORATION** Occupation **CHAIRMAN & C.E.O.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **01 / 08 / 2016**

Transaction ID : **SA11.3100820**

Amount of Each Receipt this Period **2200.00**

Memo Item  
CONTRIBUTION  
IN-KIND: **CATERING**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. SUZANNE HILTON**

Mailing Address **10387 E. ROB'S CAMP ROAD**

City **SCOTTSDALE** State **AZ** Zip Code **85255-7165**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.01**

Date of Receipt **01 / 08 / 2016**

Transaction ID : **SA11.3100821**

Amount of Each Receipt this Period **2340.16**

Memo Item  
CONTRIBUTION  
IN-KIND: **CATERING**

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM G. HINE**

Mailing Address **10084 PLEASANT RIDGE ROAD**

City **HARRISONVILLE** State **PA** Zip Code **17228-9305**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DOD** Occupation **RETIRED OFFICER USN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101191**

Amount of Each Receipt this Period **75.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **4615.16**

**TOTAL** This Period (last page this line number only).....

201604140200097673

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRITZ HITCHCOCK**

Mailing Address 9101 ALTA DR. #1702

City LAS VEGAS State NV Zip Code 89145-8545

FEC ID number of contributing federal political committee. **C**

Name of Employer HITCHCOCK AUTOMOTIVE RESOURCES Occupation AUTO DEALER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102688**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN P. HOFFERTH**

Mailing Address 7607 W. VILLA THERESA DRIVE

City GLENDALE State AZ Zip Code 85308-8260

FEC ID number of contributing federal political committee. **C**

Name of Employer PINAL FEEDING CO. Occupation C.O.O.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 09 / 2016**

Transaction ID : **SA11.3100588**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD F. HOHLT**

Mailing Address 7901 KENT ROAD

City ALEXANDRIA State VA Zip Code 22308-1328

FEC ID number of contributing federal political committee. **C**

Name of Employer THE HOHLT GROUP Occupation PRINCIPAL

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 14 / 2016**

Transaction ID : **SA11.3100918**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4200.00**

201604140200097674

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 150 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 11d	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>A. MR. RICHARD F. HOHLT</b>		Date of Receipt MM / DD / YYYY <b>03 / 14 / 2016</b>
Mailing Address <b>7901 KENT ROAD</b>		Transaction ID : <b>SA11.3100918B</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22308-1328</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-1000.00</b>
Name of Employer <b>THE HOHLT GROUP</b>	Occupation <b>PRINCIPAL</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	<b>REDESIGNATION TO GENERAL</b>

Full Name (Last, First, Middle Initial) <b>B. MR. RICHARD F. HOHLT</b>		Date of Receipt MM / DD / YYYY <b>03 / 14 / 2016</b>
Mailing Address <b>7901 KENT ROAD</b>		Transaction ID : <b>SA11.3101829</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	Zip Code <b>22308-1328</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>THE HOHLT GROUP</b>	Occupation <b>PRINCIPAL</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	<b>REDESIGNATION FROM PRIMARY</b>

Full Name (Last, First, Middle Initial) <b>C. MR. DOUGLAS J. HOLTZ-EAKIN</b>		Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>
Mailing Address <b>851 N. GLEBE ROAD APT. 1920</b>		Transaction ID : <b>SA11.3099955</b>
City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22203-4162</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>AMERICAN ACTION FORUM</b>	Occupation <b>ECONOMIST</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097675

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. JONATHAN HOLTZMAN</b>			Date of Receipt MM / DD / YYYY <b>03 / 08 / 2016</b>		
Mailing Address <b>3175 BAY SHORE DRIVE</b>			Transaction ID : <b>SA11.3100898</b>		
City <b>ORCHARD LAKE</b>	State <b>MI</b>	Zip Code <b>48324-2381</b>	Amount of Each Receipt this Period <b>1000.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION			
Name of Employer <b>VILLAGE GREEN COMPANY</b>		Occupation <b>PRESIDENT &amp; C.E.O./REAL ESTATE</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>			

Full Name (Last, First, Middle Initial) <b>SETH HOLZMAN</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>3700 N RIVER HILLS DRIVE</b>			Transaction ID : <b>SA11.3102107</b>		
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85750-2052</b>	Amount of Each Receipt this Period <b>2500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION			
Name of Employer <b>GUADALAJARA RESTAURANT GROUP</b>		Occupation <b>BUSINESS OWNER</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>2500.00</b>			

Full Name (Last, First, Middle Initial) <b>MR. WILLIAM HOSKINS</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>		
Mailing Address <b>27 HARVEST CIRCLE</b>			Transaction ID : <b>SA11.3099922</b>		
City <b>LINCOLN</b>	State <b>MA</b>	Zip Code <b>01773-3213</b>	Amount of Each Receipt this Period <b>500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION			
Name of Employer <b>HOSKINS &amp; ASSOCIATES</b>		Occupation <b>EXECUTIVE</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>2400.00</b>			

SUBTOTAL of Receipts This Page (optional).....			<b>4000.00</b>		
TOTAL This Period (last page this line number only).....					

201604140200097676

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM HOSKINS**

Mailing Address **27 HARVEST CIRCLE**

City **LINCOLN** State **MA** Zip Code **01773-3213**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOSKINS & ASSOCIATES** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 03 / 2016**

Transaction ID : **SA11.3100182**

Amount of Each Receipt this Period **800.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. QUIM CHEE HOW**

Mailing Address **43906 W CAREY DR.**

City **MARICOPA** State **AZ** Zip Code **85138-1753**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100354**

Amount of Each Receipt this Period **10.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. QUIM CHEE HOW**

Mailing Address **43906 W CAREY DR.**

City **MARICOPA** State **AZ** Zip Code **85138-1753**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 03 / 2016**

Transaction ID : **SA11.3100948**

Amount of Each Receipt this Period **10.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **820.00**

**TOTAL** This Period (last page this line number only).....

201604140200097677



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. QUIM CHEE HOW**

Mailing Address 43906 W CAREY DR.

City MARICOPA State AZ Zip Code 85138-1753

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 240.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102372

Amount of Each Receipt this Period  
15.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JONATHAN G. HOWARD**

Mailing Address 855 W. SYCAMORE COURT

City LITCHFIELD PARK State AZ Zip Code 85340-6031

FEC ID number of contributing federal political committee. **C**

Name of Employer QUARLES & BRADY LLP Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2016

Transaction ID : SA11.3099953

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. BRIAN A. HOWIE**

Mailing Address 10889 E. RAINTREE DRIVE

City SCOTTSDALE State AZ Zip Code 85255-1801

FEC ID number of contributing federal political committee. **C**

Name of Employer QUARLES & BROADY, L.L.P. Occupation ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 350.00

Date of Receipt  
MM / DD / YYYY  
02 / 23 / 2016

Transaction ID : SA11.3100794

Amount of Each Receipt this Period  
350.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

615.00

201604140200097678

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. C. A. HOWLETT</b>		Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>
Mailing Address <b>7616 E. KRALL STREET</b>		Transaction ID : <b>SA11.3099970</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85250-4657</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>INDIGO PARTNERS, LLC</b>	Occupation <b>INVESTOR</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. C. A. HOWLETT</b>		Date of Receipt MM / DD / YYYY <b>01 / 28 / 2016</b>
Mailing Address <b>7616 E. KRALL STREET</b>		Transaction ID : <b>SA11.3099970B</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85250-4657</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-1000.00</b>
Name of Employer <b>INDIGO PARTNERS, LLC</b>	Occupation <b>INVESTOR</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	<b>REDESIGNATION TO GENERAL</b>

Full Name (Last, First, Middle Initial) <b>MR. C. A. HOWLETT</b>		Date of Receipt MM / DD / YYYY <b>01 / 28 / 2016</b>
Mailing Address <b>7616 E. KRALL STREET</b>		Transaction ID : <b>SA11.3100570</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85250-4657</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>INDIGO PARTNERS, LLC</b>	Occupation <b>INVESTOR</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	<b>REDESIGNATION FROM PRIMARY</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097679

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. WALTER F. HUBBARD</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>	
Mailing Address <b>2701 SOUTHAMPTON RD. 114B</b>		Transaction ID : <b>SA11.3101376</b>	
City <b>PHILADELPHIA</b>	State <b>PA</b>	Zip Code <b>19154-1205</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25.00</b>	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. ROBERT A. HUBER</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>	
Mailing Address <b>13811 N OLD FOREST TRAIL</b>		Transaction ID : <b>SA11.3100492</b>	
City <b>ORO VALLEY</b>	State <b>AZ</b>	Zip Code <b>85755-5786</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>400.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. ROBERT A. HUBER</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>	
Mailing Address <b>13811 N OLD FOREST TRAIL</b>		Transaction ID : <b>SA11.3101224</b>	
City <b>ORO VALLEY</b>	State <b>AZ</b>	Zip Code <b>85755-5786</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>400.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>225.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>225.00</b>

201604140200097680

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT A. HUBER**

Mailing Address **13811 N OLD FOREST TRAIL**

City **ORO VALLEY** State **AZ** Zip Code **85755-5786**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**03 / 21 / 2016**

Transaction ID : **SA11.3101504**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT A. HUBER**

Mailing Address **13811 N OLD FOREST TRAIL**

City **ORO VALLEY** State **AZ** Zip Code **85755-5786**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102536**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID HUGHES**

Mailing Address **11 MARIGOLD WAY**

City **BURLINGTON** State **MA** Zip Code **01803-4164**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOPHOS** Occupation **SOFTWARE EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**02 / 09 / 2016**

Transaction ID : **SA11.3100572**

Amount of Each Receipt this Period  
**150.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**350.00**

201604140200097681

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MRS. JO ANN R. HUNT</b>		Date of Receipt MM / DD / YYYY <b>02 / 03 / 2016</b>
Mailing Address <b>7820 EUINRUDE AVENUE</b> <b>P.O. BOX 6706</b>		Transaction ID : <b>SA11.3100146</b>
City <b>NORTH PORT</b>	State <b>FL</b>	Zip Code <b>34291-6706</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>70.03</b>	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>768.01</b>	

Full Name (Last, First, Middle Initial) <b>MRS. JO ANN R. HUNT</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>7820 EUINRUDE AVENUE</b> <b>P.O. BOX 6706</b>		Transaction ID : <b>SA11.3101393</b>
City <b>NORTH PORT</b>	State <b>FL</b>	Zip Code <b>34291-6706</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>70.23</b>	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>768.01</b>	

Full Name (Last, First, Middle Initial) <b>COL. SENOUR HUNT USAF</b>		Date of Receipt MM / DD / YYYY <b>02 / 04 / 2016</b>
Mailing Address <b>900 N. TAYLOR STREET APT.1204</b>		Transaction ID : <b>SA11.3100308</b>
City <b>ARLINGTON</b>	State <b>VA</b>	Zip Code <b>22203-1872</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>50.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>450.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>190.26</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097682

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 158 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**COL. SENOUR HUNT USAF**

Mailing Address **900 N. TAYLOR STREET APT.1204**

City **ARLINGTON** State **VA** Zip Code **22203-1872**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101870**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. RAYMOND P. HUOT**

Mailing Address **1767 S SUNLIT SAND PL**

City **TUCSON** State **AZ** Zip Code **85748-7753**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **675.00**

Date of Receipt  
**03 / 01 / 2016**

Transaction ID : **SA11.3100837**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. RAYMOND P. HUOT**

Mailing Address **1767 S SUNLIT SAND PL**

City **TUCSON** State **AZ** Zip Code **85748-7753**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **675.00**

Date of Receipt  
**03 / 21 / 2016**

Transaction ID : **SA11.3101527**

Amount of Each Receipt this Period  
**75.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**175.00**

201604140200097683

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 159 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. RAYMOND P. HUOT**

Mailing Address **1767 S SUNLIT SAND PL**

City **TUCSON** State **AZ** Zip Code **85748-7753**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **675.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102490**

Amount of Each Receipt this Period **50.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHNNY H. HUTTO SR.**

Mailing Address **15356 SW FAIRCLOTH ROAD**

City **BLOUNTSTOWN** State **FL** Zip Code **32424-4932**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099925**

Amount of Each Receipt this Period **50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DONALD G. ISAACSON**

Mailing Address **501 W. GLENEAGLES DRIVE**

City **PHOENIX** State **AZ** Zip Code **85023-5257**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ISAACSON & WALSH, P.C.** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2375.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099965**

Amount of Each Receipt this Period **500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **600.00**

**TOTAL** This Period (last page this line number only).....

201604140200097684

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 160 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DONALD G. ISAACSON**

Mailing Address **501 W. GLENEAGLES DRIVE**

City **PHOENIX** State **AZ** Zip Code **85023-5257**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ISAACSON & WALSH, P.C.** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2375.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102725**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MS. JOY A. ISBAN**

Mailing Address **P.O. BOX 5972**

City **PEORIA** State **AZ** Zip Code **85385-5972**

FEC ID number of contributing federal political committee. **C**

Name of Employer **U.S. NAVY RESERVES** Occupation **RESERVE NAVAL OFFICER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100643**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GREG IVERSON**

Mailing Address **2010 E. BARKWOOD RD.**

City **PHOENIX** State **AZ** Zip Code **85048-4244**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO EDUCATION GROUP** Occupation **SENIOR V.P. AND C.F.O.**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102695**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3600.00**

201604140200097685



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>MR. JOHN MICKEY IVERSON</b>			Date of Receipt MM / DD / YYYY <b>01 / 29 / 2016</b>
Mailing Address <b>415 4TH STREET NE</b>			Transaction ID : <b>SA11.3100072</b>
City <b>MEDFORD</b>	State <b>MN</b>	Zip Code <b>55049-9503</b>	Amount of Each Receipt this Period <b>20.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>220.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

B. Full Name (Last, First, Middle Initial) <b>MR. JOHN MICKEY IVERSON</b>			Date of Receipt MM / DD / YYYY <b>03 / 22 / 2016</b>
Mailing Address <b>415 4TH STREET NE</b>			Transaction ID : <b>SA11.3101582</b>
City <b>MEDFORD</b>	State <b>MN</b>	Zip Code <b>55049-9503</b>	Amount of Each Receipt this Period <b>20.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>220.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

C. Full Name (Last, First, Middle Initial) <b>MR. KEITH JACKSON</b>			Date of Receipt MM / DD / YYYY <b>03 / 28 / 2016</b>
Mailing Address <b>11527 E. CHOCHISE DRIVE</b>			Transaction ID : <b>SA11.3101823</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85259-4904</b>	Amount of Each Receipt this Period <b>2700.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>O.N. SEMICONDUCTOR</b>	Occupation <b>C.E.O.</b>	Election Cycle-to-Date <b>2700.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2740.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097686

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**DR. WILLIAM DOUGLAS JACKSON**

Mailing Address **2101 MARKET STREET #122**

City **DENVER** State **CO** Zip Code **80205-2004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PROJECT C.U.R.E.** Occupation **PRESIDENT/CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 23 / 2016**

Transaction ID : **SA11.3100771**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. LILLY JACOBSON**

Mailing Address **125 MARTELL DR.**

City **BLOOMFIELD HILLS** State **MI** Zip Code **48304-3447**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PSYCHOLOGIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102786**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ALEIX JARVIS**

Mailing Address **1306 CLAYBORNE HOUSE CT**

City **MCLEAN** State **VA** Zip Code **22101-2402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FIERCE GOVERNMENT RELATION** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102126**

Amount of Each Receipt this Period **1900.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **3150.00**

**TOTAL** This Period (last page this line number only).....

201604140200097687

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

FOR LINE NUMBER: (check only one)	PAGE 163 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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

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

Full Name (Last, First, Middle Initial) <b>MR. ALEIX JARVIS</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>1306 CLAYBORNE HOUSE CT</b>			Transaction ID : <b>SA11.3102126B</b>		
City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101-2402</b>	Amount of Each Receipt this Period <b>-1900.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>FIERCE GOVERNMENT RELATION</b>		Occupation <b>CONSULTANT</b>	<b>REDESIGNATION TO GENERAL</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5400.00</b>			

Full Name (Last, First, Middle Initial) <b>MR. ALEIX JARVIS</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>1306 CLAYBORNE HOUSE CT</b>			Transaction ID : <b>SA11.3102997</b>		
City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101-2402</b>	Amount of Each Receipt this Period <b>1900.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>FIERCE GOVERNMENT RELATION</b>		Occupation <b>CONSULTANT</b>	<b>REDESIGNATION FROM PRIMARY</b>		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5400.00</b>			

Full Name (Last, First, Middle Initial) <b>DR. VICTOR J. JAWORSKY</b>			Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>		
Mailing Address <b>P.O. BOX 196</b>			Transaction ID : <b>SA11.3101704</b>		
City <b>ORANGEBURG</b>	State <b>NY</b>	Zip Code <b>10962-0196</b>	Amount of Each Receipt this Period <b>70.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>PHYSICIAN</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>350.00</b>			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>70.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200097688

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. C. LEE JOHNSON**

Mailing Address **P.O. BOX 3346**

City **CAREFREE** State **AZ** Zip Code **85377-3346**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 28 / 2016**

Transaction ID : **SA11.3101809**

Amount of Each Receipt this Period  
**300.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. C. LLOYD JOHNSON JR.**

Mailing Address **917 CARDINAL RD.**

City **VIRGINIA BEACH** State **VA** Zip Code **23451-4910**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100456**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. C. LLOYD JOHNSON JR.**

Mailing Address **917 CARDINAL RD.**

City **VIRGINIA BEACH** State **VA** Zip Code **23451-4910**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 03 / 2016**

Transaction ID : **SA11.3101073**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**375.00**

201604140200097689

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. C. LLOYD JOHNSON JR.**

Mailing Address 917 CARDINAL RD.

City VIRGINIA BEACH State VA Zip Code 23451-4910

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 230.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102414

Amount of Each Receipt this Period  
25.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CATHERINE H. JOHNSON**

Mailing Address 1411 EDGEWOOD DR

City PALO ALTO State CA Zip Code 94301-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3200.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102888

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. CATHERINE H. JOHNSON**

Mailing Address 1411 EDGEWOOD DR

City PALO ALTO State CA Zip Code 94301-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3200.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102888B

Amount of Each Receipt this Period  
-500.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

525.00

201604140200097690

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. CATHERINE H. JOHNSON**

Mailing Address **1411 EDGEWOOD DR**

City **PALO ALTO** State **CA** Zip Code **94301-3118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3200.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	6		

Transaction ID : **SA11.3102998**

Amount of Each Receipt this Period  

500.00
--------

Memo Item  
**CONTRIBUTION**

**REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CATHERINE H. JOHNSON**

Mailing Address **1411 EDGEWOOD DR**

City **PALO ALTO** State **CA** Zip Code **94301-3118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3200.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	6		

Transaction ID : **SA11.3102889**

Amount of Each Receipt this Period  

2700.00
---------

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLIN P. JOHNSON JR.**

Mailing Address **1411 EDGEWOOD DRIVE**

City **PALO ALTO** State **CA** Zip Code **94301-3118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ASSET MANAGEMENT COMPANY** Occupation **SOLE PROPRIETOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3200.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3	/	3	1	/	2	0	1	6		

Transaction ID : **SA11.3102890**

Amount of Each Receipt this Period  

2700.00
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Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5400.00**

201604140200097691

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 167 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLIN P. JOHNSON JR.**

Mailing Address 1411 EDGEWOOD DRIVE

City PALO ALTO    State CA    Zip Code 94301-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer ASSET MANAGEMENT COMPANY    Occupation SOLE PROPRIETOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 3200.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102891

Amount of Each Receipt this Period 500.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLIN P. JOHNSON JR.**

Mailing Address 1411 EDGEWOOD DRIVE

City PALO ALTO    State CA    Zip Code 94301-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer ASSET MANAGEMENT COMPANY    Occupation SOLE PROPRIETOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 3200.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102891B

Amount of Each Receipt this Period -500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. FRANKLIN P. JOHNSON JR.**

Mailing Address 1411 EDGEWOOD DRIVE

City PALO ALTO    State CA    Zip Code 94301-3118

FEC ID number of contributing federal political committee. **C**

Name of Employer ASSET MANAGEMENT COMPANY    Occupation SOLE PROPRIETOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 3200.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102999

Amount of Each Receipt this Period 500.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

SUBTOTAL of Receipts This Page (optional)..... 500.00

TOTAL This Period (last page this line number only).....

201604140200097692

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 168 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

<b>A.</b> Full Name (Last, First, Middle Initial) ADM. JAY L. JOHNSON USN (RET)			Date of Receipt MM / DD / YYYY 02 / 10 / 2016	
Mailing Address 4508 HOBAN RD NW			Transaction ID : SA11.3100603	
City WASHINGTON	State DC	Zip Code 20007-2039	Amount of Each Receipt this Period _____ 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer DOMINION RESOURCES, INC.		Occupation EXECUTIVE	Election Cycle-to-Date _____ 1500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

<b>B.</b> Full Name (Last, First, Middle Initial) MR. JERRY V. JOHNSTON			Date of Receipt MM / DD / YYYY 02 / 03 / 2016	
Mailing Address 16570 121ST AVENUE S. E.			Transaction ID : SA11.3100267	
City RENTON	State WA	Zip Code 98058-5371	Amount of Each Receipt this Period _____ 35.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date _____ 260.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

<b>C.</b> Full Name (Last, First, Middle Initial) MR. JERRY V. JOHNSTON			Date of Receipt MM / DD / YYYY 02 / 10 / 2016	
Mailing Address 16570 121ST AVENUE S. E.			Transaction ID : SA11.3100649	
City RENTON	State WA	Zip Code 98058-5371	Amount of Each Receipt this Period _____ 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date _____ 260.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 585.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

201604140200097693



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 169 OF 590

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. RUSSELL L. JOHNSON**

Mailing Address 1810 AVENIDA DEL MUNDO, #503

City CORONADO State CA Zip Code 92118-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1210.00

Date of Receipt 01 / 31 / 2016

Transaction ID : SA11.3100485

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RUSSELL L. JOHNSON**

Mailing Address 1810 AVENIDA DEL MUNDO, #503

City CORONADO State CA Zip Code 92118-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1210.00

Date of Receipt 03 / 03 / 2016

Transaction ID : SA11.3101221

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RUSSELL L. JOHNSON**

Mailing Address 1810 AVENIDA DEL MUNDO, #503

City CORONADO State CA Zip Code 92118-3009

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1210.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11.3102340

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 300.00

**TOTAL** This Period (last page this line number only).....

201604140200097694

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. JOANN JONES**

Mailing Address **12 W. MARCONI AVE.**

City **PHOENIX** State **AZ** Zip Code **85023-3602**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2016**

Transaction ID : **SA11.3100471**

Amount of Each Receipt this Period  
**75.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. JOANN JONES**

Mailing Address **12 W. MARCONI AVE.**

City **PHOENIX** State **AZ** Zip Code **85023-3602**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2016**

Transaction ID : **SA11.3101161**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RUSSELL L. JONES**

Mailing Address **3644 W. BRANDI LANE**

City **YUMA** State **AZ** Zip Code **85364-0714**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUSSJAN MGT.** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 09 / 2016**

Transaction ID : **SA11.3100585**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**625.00**

201604140200097695

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>NORMA KAECKER</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2016		
Mailing Address 4015 E SOLIERE AVE APT #140			Transaction ID : SA11.3100385		
City FLAGSTAFF	State AZ	Zip Code 86004-7672	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer RETIRED		Occupation RETIRED	<input type="checkbox"/> Other (specify)		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 220.00			

Full Name (Last, First, Middle Initial) <b>NORMA KAECKER</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address 4015 E SOLIERE AVE APT #140			Transaction ID : SA11.3101043		
City FLAGSTAFF	State AZ	Zip Code 86004-7672	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer RETIRED		Occupation RETIRED	<input type="checkbox"/> Other (specify)		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 220.00			

Full Name (Last, First, Middle Initial) <b>NORMA KAECKER</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2016		
Mailing Address 4015 E SOLIERE AVE APT #140			Transaction ID : SA11.3102248		
City FLAGSTAFF	State AZ	Zip Code 86004-7672	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer RETIRED		Occupation RETIRED	<input type="checkbox"/> Other (specify)		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 220.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....			_____ 75.00		
<b>TOTAL</b> This Period (last page this line number only) .....			_____		

201604140200097696

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 172 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. RACHEL G. KALMOWITZ**

Mailing Address 4150 SOUTHMOOR LN

City WEST BLOOMFIELD State MI Zip Code 48323-3127

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

Transaction ID : **SA11.3100857**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JONATHAN D. KAPROSY**

Mailing Address 8018 W SAN MIGUEL AVE.

City GLENDALE State AZ Zip Code 85303-5173

FEC ID number of contributing federal political committee. **C**

Name of Employer **VERIDUS** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102148**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THE HON. DAVID K. KARNES**

Mailing Address 9639 OAK CIR

City OMAHA State NE Zip Code 68124-2767

FEC ID number of contributing federal political committee. **C**

Name of Employer **KUTACK ROCK** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 24 / 2016**

Transaction ID : **SA11.3100804**

Amount of Each Receipt this Period  
**1500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

201604140200097697

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. THOMAS W. KEATING</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>		
Mailing Address <b>4729 EAST SUNRISE DRIVE, #384</b>			Transaction ID : <b>SA11.3100534</b>		
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85718-4534</b>	Amount of Each Receipt this Period <b>1000.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		Occupation <b>SEMI-RETIRED EXECUTIVE/VOLUNTEER</b>			
Name of Employer <b>SELF-EMPLOYED</b>		Election Cycle-to-Date <b>3000.00</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<input type="checkbox"/> Memo Item CONTRIBUTION			

Full Name (Last, First, Middle Initial) <b>MR. THOMAS W. KEATING</b>			Date of Receipt MM / DD / YYYY <b>02 / 18 / 2016</b>		
Mailing Address <b>4729 EAST SUNRISE DRIVE, #384</b>			Transaction ID : <b>SA11.3100534B</b>		
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85718-4534</b>	Amount of Each Receipt this Period <b>-300.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		Occupation <b>SEMI-RETIRED EXECUTIVE/VOLUNTEER</b>			
Name of Employer <b>SELF-EMPLOYED</b>		Election Cycle-to-Date <b>3000.00</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<input checked="" type="checkbox"/> Memo Item CONTRIBUTION <b>REDESIGNATION TO GENERAL</b>			

Full Name (Last, First, Middle Initial) <b>MR. THOMAS W. KEATING</b>			Date of Receipt MM / DD / YYYY <b>02 / 18 / 2016</b>		
Mailing Address <b>4729 EAST SUNRISE DRIVE, #384</b>			Transaction ID : <b>SA11.3100743</b>		
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85718-4534</b>	Amount of Each Receipt this Period <b>300.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>		Occupation <b>SEMI-RETIRED EXECUTIVE/VOLUNTEER</b>			
Name of Employer <b>SELF-EMPLOYED</b>		Election Cycle-to-Date <b>3000.00</b>			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		<input checked="" type="checkbox"/> Memo Item CONTRIBUTION <b>REDESIGNATION FROM PRIMARY</b>			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097698

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>LTC ROBERT E. KELSO (RET)</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 640 IVY LANE			Transaction ID : SA11.3102580
City SAN ANTONIO	State TX	Zip Code 78209-2827	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer RETIRED US ARMY RETIRED		Election Cycle-to-Date 1000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL J. KENNEALY</b>			Date of Receipt MM / DD / YYYY 03 / 24 / 2016
Mailing Address 4 BRENT ROAD			Transaction ID : SA11.3101677
City LEXINGTON	State MA	Zip Code 02420-1824	Amount of Each Receipt this Period 2700.00
FEC ID number of contributing federal political committee. C		Occupation ASSISTANT SECRETARY EOHED	<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer COMMONWEALTH OF MASS.		Election Cycle-to-Date 2700.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>JODY KENT</b>			Date of Receipt MM / DD / YYYY 03 / 28 / 2016
Mailing Address 1009 E. BRAEBURN DR.			Transaction ID : SA11.3101822
City PHOENIX	State AZ	Zip Code 85022-3758	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Occupation EXECUTIVE	<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer UTI		Election Cycle-to-Date 1000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4700.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097699

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY KEYSER**

Mailing Address **247 CORLIES AVE**

City **PELHAM** State **NY** Zip Code **10803-1903**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED PARTNER OF DELOITTE LI** Occupation **CPA**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102140**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. KHALIL KHANI**

Mailing Address **1872 E. ALAMEDA DRIVE**

City **TEMPE** State **AZ** Zip Code **85282-2873**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101234**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. KHALIL KHANI**

Mailing Address **1872 E. ALAMEDA DRIVE**

City **TEMPE** State **AZ** Zip Code **85282-2873**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101234B**

Amount of Each Receipt this Period  
**-100.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**350.00**

201604140200097700

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. KHALIL KHANI**

Mailing Address **1872 E. ALAMEDA DRIVE**

City **TEMPE** State **AZ** Zip Code **85282-2873**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101838**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. BOBBIE G. KILBERG**

Mailing Address **6703 WEMBERLY WAY**

City **MCLEAN** State **VA** Zip Code **22101-1529**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORTHERN VIRGINIA TECHNOLOGY COUNCIL** Occupation **CEO**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**02 / 05 / 2016**

Transaction ID : **SA11.3100552**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM J. KILBERG**

Mailing Address **6703 WEMBERLY WAY**

City **MCLEAN** State **VA** Zip Code **22101-1529**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GIBSON DUNN & CRUTCHER** Occupation **SENIOR PARTNER/ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**02 / 05 / 2016**

Transaction ID : **SA11.3100553**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5400.00**

**5400.00**

201604140200097701



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 177 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

A. Full Name (Last, First, Middle Initial) <b>MR. WILLIAM J. KILBERG</b>			Date of Receipt MM / DD / YYYY 02 / 05 / 2016	
Mailing Address 6703 WEMBERLY WAY			Transaction ID : SA11.3100553B	
City MCLEAN	State VA	Zip Code 22101-1529	Amount of Each Receipt this Period -2700.00	
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer GIBSON DUNN & CRUTCHER		Occupation SENIOR PARTNER/ATTORNEY	REDESIGNATION TO GENERAL	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00		

B. Full Name (Last, First, Middle Initial) <b>MR. WILLIAM J. KILBERG</b>			Date of Receipt MM / DD / YYYY 02 / 05 / 2016	
Mailing Address 6703 WEMBERLY WAY			Transaction ID : SA11.3100735	
City MCLEAN	State VA	Zip Code 22101-1529	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer GIBSON DUNN & CRUTCHER		Occupation SENIOR PARTNER/ATTORNEY	REDESIGNATION FROM PRIMARY	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00		

C. Full Name (Last, First, Middle Initial) <b>MR. STEVEN KILLIAN</b>			Date of Receipt MM / DD / YYYY 01 / 27 / 2016	
Mailing Address 4741 E. SOUTHERN AVENUE			Transaction ID : SA11.3099982	
City MESA	State AZ	Zip Code 85206-2757	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer AZ BANKERS ASSOCIATION		Occupation GOVERNMENTAL AFFAIRS		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

201604140200097702

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 178 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>THOMAS KIMBREL</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>5449 CALLE PICO, LAGUNA WOODS, CA</b>		Transaction ID : <b>SA11.3102538</b>
City <b>LAGUNA HILLS</b>	State <b>CA</b>	Zip Code <b>92637-</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>800.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. KEVIN S. KING</b>		Date of Receipt MM / DD / YYYY <b>02 / 10 / 2016</b>
Mailing Address <b>545 FOREST HILLS DRIVE</b>		Transaction ID : <b>SA11.3100687</b>
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30342-2335</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>ATTORNEY</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. VICTOR F. KLATT III</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>9020 ADVANTAGE COURT</b>		Transaction ID : <b>SA11.3102740</b>
City <b>BURKE</b>	State <b>VA</b>	Zip Code <b>22015-4902</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer <b>PENN HILL GROUP</b>	Occupation <b>PRINCIPAL</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097703

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. ROGER M. KLEIN</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address <b>63 BEETHOVEN AVE</b>			Transaction ID : <b>SA11.3101253</b>		
City <b>WABAN</b>	State <b>MA</b>	Zip Code <b>02468-1732</b>	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>VARIOUS</b>		Occupation <b>MANAGER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. ROGER M. KLEIN</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2016		
Mailing Address <b>63 BEETHOVEN AVE</b>			Transaction ID : <b>SA11.3102239</b>		
City <b>WABAN</b>	State <b>MA</b>	Zip Code <b>02468-1732</b>	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>VARIOUS</b>		Occupation <b>MANAGER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MRS. VIRGINIA COMMANDER KNOTT</b>			Date of Receipt MM / DD / YYYY 03 / 30 / 2016		
Mailing Address <b>232 CLEFT RD</b>			Transaction ID : <b>SA11.3101929</b>		
City <b>MILL NECK</b>	State <b>NY</b>	Zip Code <b>11765-1001</b>	Amount of Each Receipt this Period 2800.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Name of Employer <b>HOMEMAKER</b>		Occupation <b>HOMEMAKER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200097704

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 180 OF 590

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. VIRGINIA COMMANDER KNOTT**

Mailing Address 232 CLEFT RD

City MILL NECK State NY Zip Code 11765-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3101929B**

Amount of Each Receipt this Period **-2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL.

**B.** Full Name (Last, First, Middle Initial)  
**MRS. VIRGINIA COMMANDER KNOTT**

Mailing Address 232 CLEFT RD

City MILL NECK State NY Zip Code 11765-1001

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3102046**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. MARTIN KOGON**

Mailing Address 5780 WINTERTHUR LANE

City ATLANTA State GA Zip Code 30328-4624

FEC ID number of contributing federal political committee. **C**

Name of Employer **PULL-A-PART** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 10 / 2016**

Transaction ID : **SA11.3100672**

Amount of Each Receipt this Period **1000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097705

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>ROSS KOGON</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2016		
Mailing Address 4473 TILLY MILL ROAD			Transaction ID : SA11.3100527		
City ATLANTA	State GA	Zip Code 30360-2107	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer PULL A PART LLC		Occupation CEO			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			

Full Name (Last, First, Middle Initial) <b>MR. HERCULES D. KONTOS</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address 302A WEST 12TH ST #246			Transaction ID : SA11.3101233		
City NEW YORK	State NY	Zip Code 10014-7906	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED SELF-EMPLOYED CPA		Occupation RETIRED			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300.00			

Full Name (Last, First, Middle Initial) <b>RICHARD KOPELMAN</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2016		
Mailing Address 4761 MYSTIC DRIVE NE			Transaction ID : SA11.3100509		
City ATLANTA	State GA	Zip Code 30342-2550	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer HABIF, AROGETI & WYNNE		Occupation CEO/MANAGING PARTNER			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097706

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA S. KOUTS**

Mailing Address **249 SOUTH COUNTRY ROAD**

City **BROOKHAVEN** State **NY** Zip Code **11719-9704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **LITERARY AGENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 MM / DD / YYYY  
**02 / 24 / 2016**

Transaction ID : **SA11.3100801**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA S. KOUTS**

Mailing Address **249 SOUTH COUNTRY ROAD**

City **BROOKHAVEN** State **NY** Zip Code **11719-9704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **LITERARY AGENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102762**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DONALD KRAFT**

Mailing Address **1635 STONER AVENUE  
APARTMENT 12**

City **LOS ANGELES** State **CA** Zip Code **90025-1846**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **660.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 21 / 2016**

Transaction ID : **SA11.3101410**

Amount of Each Receipt this Period  
**220.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**320.00**

201604140200097707

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 183 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. RUTH A. KRAMER**

Mailing Address **200 W. SECOND STREET**

City **CASA GRANDE** State **AZ** Zip Code **85122-4409**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CASA GRANDE VALLEY NEWSPAPERS** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **01 / 29 / 2016**  
Transaction ID : **SA11.3100131**

Amount of Each Receipt this Period **75.00**  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LANCE KRIGBAUM**

Mailing Address **26980 ROAD M**

City **CORTEZ** State **CO** Zip Code **81321-9380**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **560.00**

Date of Receipt **01 / 31 / 2016**  
Transaction ID : **SA11.3100381**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. LANCE KRIGBAUM**

Mailing Address **26980 ROAD M**

City **CORTEZ** State **CO** Zip Code **81321-9380**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **560.00**

Date of Receipt **03 / 03 / 2016**  
Transaction ID : **SA11.3101139**

Amount of Each Receipt this Period **50.00**  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **150.00**

**TOTAL** This Period (last page this line number only) .....

201604140200097708

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.**

Full Name (Last, First, Middle Initial)  
**MR. LANCE KRIGBAUM**

Mailing Address **26980 ROAD M**

City **CORTEZ** State **CO** Zip Code **81321-9380**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **560.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102521**

Amount of Each Receipt this Period  
**85.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. VERNA B. KROUT**

Mailing Address **3234 SKILLMAN LANE**

City **PETALUMA** State **CA** Zip Code **94952-8020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **370.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 03 / 2016**

Transaction ID : **SA11.3100258**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**DR. OLENA KSOVRELI**

Mailing Address **145 95 STREET  
APT. B2**

City **BROOKLYN** State **NY** Zip Code **11209-7236**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102770**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**335.00**

201604140200097709



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

FOR LINE NUMBER: (check only one)	PAGE 185 OF 590
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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

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

**A.**

Full Name (Last, First, Middle Initial)  
**MR. KERMIT R. KUBITZ**

Mailing Address **468 LANSDALE AVENUE**

City **SAN FRANCISCO** State **CA** Zip Code **94127-1617**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PACIFIC GAS & ELECTRIC** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 17 / 2016**

Transaction ID : **SA11.3101339**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. PHILIP J. KUDELA**

Mailing Address **10102 JOPPA ROAD**

City **VERMILION** State **OH** Zip Code **44089-9399**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
**MM / DD / YYYY**  
**01 / 28 / 2016**

Transaction ID : **SA11.3100013**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. PHILIP J. KUDELA**

Mailing Address **10102 JOPPA ROAD**

City **VERMILION** State **OH** Zip Code **44089-9399**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
**MM / DD / YYYY**  
**01 / 28 / 2016**

Transaction ID : **SA11.3100013B**

Amount of Each Receipt this Period  
**-100.00**

Memo Item CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2800.00**

201604140200097710

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. PHILIP J. KUDELA**

Mailing Address 10102 JOPPA ROAD

City VERMILION State OH Zip Code 44089-9399

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2800.00

Date of Receipt  
MM / DD / YYYY  
01 / 28 / 2016

Transaction ID : SA11.3100564

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MS. SHERI L. KUHLMAN**

Mailing Address 3608 LINCOLN AVE

City COVINGTON State KY Zip Code 41015-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer ST ELIZABETH HOSPICE Occupation SOCIAL WORKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 220.00

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2016

Transaction ID : SA11.3100351

Amount of Each Receipt this Period  
10.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. SHERI L. KUHLMAN**

Mailing Address 3608 LINCOLN AVE

City COVINGTON State KY Zip Code 41015-1512

FEC ID number of contributing federal political committee. **C**

Name of Employer ST ELIZABETH HOSPICE Occupation SOCIAL WORKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 220.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3100992

Amount of Each Receipt this Period  
10.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

20.00

201604140200097711

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)		PAGE 187 OF 590	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. SHERI L. KUHLMAN**

Mailing Address **3608 LINCOLN AVE**

City **COVINGTON** State **KY** Zip Code **41015-1512**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ST ELIZABETH HOSPICE** Occupation **SOCIAL WORKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  

MM	DD	YYYY
03	31	2016

Transaction ID : **SA11.3102642**

Amount of Each Receipt this Period  

Amount
50.00

 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MS. PAULA WARM LACLARE**

Mailing Address **6400 SWEDE RD**

City **NORTHPORT** State **MI** Zip Code **49670-9595**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  

MM	DD	YYYY
03	01	2016

Transaction ID : **SA11.3100839**

Amount of Each Receipt this Period  

Amount
100.00

 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. PAULA WARM LACLARE**

Mailing Address **6400 SWEDE RD**

City **NORTHPORT** State **MI** Zip Code **49670-9595**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  

MM	DD	YYYY
03	21	2016

Transaction ID : **SA11.3101373**

Amount of Each Receipt this Period  

Amount
150.00

 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Amount
300.00

201604140200097712

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. CHRISTINA LEE LAFEVER**

Mailing Address **1424 NORTH 187TH STREET**

City **ELKHORN** State **NE** Zip Code **68022-3072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **02 / 24 / 2016**

Transaction ID : **SA11.3100805**

Amount of Each Receipt this Period **2500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**FADI LAHLOUH**

Mailing Address **14 WOODLEAF AVENUE**

City **REDWOOD CITY** State **CA** Zip Code **94061-1823**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LAHLOUH** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 16 / 2016**

Transaction ID : **SA11.3101333**

Amount of Each Receipt this Period **5400.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**FADI LAHLOUH**

Mailing Address **14 WOODLEAF AVENUE**

City **REDWOOD CITY** State **CA** Zip Code **94061-1823**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LAHLOUH** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 16 / 2016**

Transaction ID : **SA11.3101333B**

Amount of Each Receipt this Period **-2700.00**

Memo Item  
**REDESIGNATION TO GENERAL**

**SUBTOTAL** of Receipts This Page (optional) ..... **7900.00**

**TOTAL** This Period (last page this line number only) .....

201604140200097713

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>FADI LAHLOUH</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>
Mailing Address <b>14 WOODLEAF AVENUE</b>		Transaction ID : <b>SA11.3101887</b>
City <b>REDWOOD CITY</b>	State <b>CA</b>	Zip Code <b>94061-1823</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2700.00</b>	
Name of Employer <b>LAHLOUH</b>	Occupation <b>PRESIDENT</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5400.00</b>	<b>REDESIGNATION FROM PRIMARY</b>

B. Full Name (Last, First, Middle Initial) <b>THE HON. RAY LAHOOD</b>		Date of Receipt MM / DD / YYYY <b>03 / 14 / 2016</b>
Mailing Address <b>5612 W. GRANDE CIRCLE</b>		Transaction ID : <b>SA11.3100920</b>
City <b>PEORIA</b>	State <b>IL</b>	Zip Code <b>61615-2274</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>D.L.A. PIPER, LLP</b>	Occupation <b>SENIOR POLICY ADVISOR</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

C. Full Name (Last, First, Middle Initial) <b>MR. SAMUEL A. LAHOOD</b>		Date of Receipt MM / DD / YYYY <b>03 / 14 / 2016</b>
Mailing Address <b>4601 WILWYN WAY</b>		Transaction ID : <b>SA11.3100924</b>
City <b>ROCKVILLE</b>	State <b>MD</b>	Zip Code <b>20852-2463</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>INTERNATIONAL REPUBLICAN INSTITUTE</b>	Occupation <b>REGIONAL DEPUTY DIRECTOR, ASIA</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097714

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 190 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. FRANCIS E. LAJBA**

Mailing Address **P.O. BOX 6192**

City **OMAHA** State **NE** Zip Code **68106-0192**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCOLA** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 24 / 2016**

Transaction ID : **SA11.3100813**

Amount of Each Receipt this Period **250.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LIONEL F. LARRIVA**

Mailing Address **2610 E. PRINCE RD.**

City **TUCSON** State **AZ** Zip Code **85716-1122**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102602**

Amount of Each Receipt this Period **100.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. JANET L. LARSON**

Mailing Address **1458 W MATTIE RD**

City **CLEARVILLE** State **PA** Zip Code **15535-7546**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100458**

Amount of Each Receipt this Period **50.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **400.00**

**TOTAL** This Period (last page this line number only).....

201604140200097715

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 191 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JANET L. LARSON**

Mailing Address **1458 W MATTIE RD**

City **CLEARVILLE** State **PA** Zip Code **15535-7546**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **03 / 03 / 2016**  
Transaction ID : **SA11.3101061**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JANET L. LARSON**

Mailing Address **1458 W MATTIE RD**

City **CLEARVILLE** State **PA** Zip Code **15535-7546**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102493**

Amount of Each Receipt this Period **50.00**  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. LOIS JAMES LARSON**

Mailing Address **13509 YORK AVE. S.**

City **BURNSVILLE** State **MN** Zip Code **55337-1844**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **03 / 03 / 2016**  
Transaction ID : **SA11.3101190**

Amount of Each Receipt this Period **75.00**  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **150.00**

**TOTAL** This Period (last page this line number only).....

201604140200097716

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MS. LOIS JAMES LARSON</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 13509 YORK AVE. S.		Transaction ID : SA11.3102339	
City BURNSVILLE	State MN	Zip Code 55337-1844	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 75.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
		<input type="checkbox"/> Memo Item CONTRIBUTION	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. KENNETH R. LARYWON</b>		Date of Receipt MM / DD / YYYY 02 / 10 / 2016	
Mailing Address 44 TULIP LANE		Transaction ID : SA11.3100604	
City NEW ROCHELLE	State NY	Zip Code 10804-1915	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer MARTIN CLEARWATER AND BELL	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		
		<input type="checkbox"/> Memo Item CONTRIBUTION	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. WILLIAM R. LAVIDGE</b>		Date of Receipt MM / DD / YYYY 03 / 28 / 2016	
Mailing Address 5607 N. ECHO CANYON DR.		Transaction ID : SA11.3101817	
City PHOENIX	State AZ	Zip Code 85018-1269	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer THE LAVIDGE COMPANY	Occupation OWNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
		<input type="checkbox"/> Memo Item CONTRIBUTION	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1175.00
<b>TOTAL</b> This Period (last page this line number only).....	1175.00

201604140200097717



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**JUNE D. LAWTON**

Mailing Address **88 PLYMOUTH RD**

City **NEWTON** State **MA** Zip Code **02461-1016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BWFH** Occupation **HEALTH**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2016**

Transaction ID : **SA11.3100444**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. MARVA JEAN LEBLANC**

Mailing Address **214 SUNNY LANE**

City **EMMETT** State **ID** Zip Code **83617-3324**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 19 / 2016**

Transaction ID : **SA11.3100739**

Amount of Each Receipt this Period  
**20.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. MARVA JEAN LEBLANC**

Mailing Address **214 SUNNY LANE**

City **EMMETT** State **ID** Zip Code **83617-3324**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2016**

Transaction ID : **SA11.3101705**

Amount of Each Receipt this Period  
**30.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**100.00**

201604140200097718

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 194 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle initial)  
**MR. WILLIAM E. LEE**

Mailing Address 128 MAPLE STREET

City DANVERS State MA Zip Code 01923-2061

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
HOTWATT INC. PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt 03 / 22 / 2016  
Transaction ID : SA11.3101604

Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL LEFFELL**

Mailing Address 216 EAST 45TH STREET SUITE 1101

City NEW YORK State NY Zip Code 10017-3304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PORTAGE ADVISORS INVESTOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt 03 / 30 / 2016  
Transaction ID : SA11.3101944

Amount of Each Receipt this Period 2700.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DR. STEPHEN S. LEFRAK**

Mailing Address 410 NORTH NEWSTEAD AVE

City ST. LOUIS State MO Zip Code 63108-2637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 600.00

Date of Receipt 03 / 21 / 2016  
Transaction ID : SA11.3101493

Amount of Each Receipt this Period 250.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 3200.00

**TOTAL** This Period (last page this line number only).....

201604140200097719

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 195 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ADAM M. LEIBOWITZ**

Mailing Address **5780 HILDERBRAND DRIVE**

City **ATLANTA** State **GA** Zip Code **30328-5112**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100682**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. LAWRENCE W. LEIGHTON**

Mailing Address **1088 PARK AVENUE #4F**

City **NEW YORK** State **NY** Zip Code **10128-1132**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BENTLEY ASSOCIATES** Occupation **INVESTMENT BANKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101867**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. LISA A. LEIGHTON**

Mailing Address **12980 E. COCHISE RD**

City **SCOTTSDALE** State **AZ** Zip Code **85259-5345**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNITED HEALTHCARE** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101301**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**600.00**

201604140200097720

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 196 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MARK W. LERNER**

Mailing Address **119 HARDCRABBLE LAKE DR.**

City **CHAPPAQUA** State **NY** Zip Code **10514-3040**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KASOWITZ** Occupation **LAWYER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101905**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN CONRAD LESTER**

Mailing Address **19011 N. 94TH PLACE**

City **SCOTTSDALE** State **AZ** Zip Code **85255-5533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LESTER, NORTON & BROZINA, P.C.** Occupation **LAWYER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
**03 / 23 / 2016**

Transaction ID : **SA11.3101641**

Amount of Each Receipt this Period  
**700.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. GRACE LEUNG**

Mailing Address **1701 CORVALLIS TRAIL**

City **ARLINGTON** State **TX** Zip Code **76006-6508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ACC** Occupation **SECRETARY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101182**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

201604140200097721

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 197 OF 590

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

Full Name (Last, First, Middle Initial) <b>MR. ERIC LEVINE</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2016	
Mailing Address 16 RANDOM FARMS CIRCLE		Transaction ID : SA11.3101336	
City CHAPPAQUA	State NY	Zip Code 10514-1000	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer EISEMAN LEVINE LEHRHAUPT & KAKOYIANI		Occupation ATTORNEY	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>KEVIN LEVITAS</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2016	
Mailing Address 2496 GREENGLADE RD NE		Transaction ID : SA11.3100537	
City ATLANTA	State GA	Zip Code 30345-3800	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer HILL MANUFACTURING COMPANY, INC.		Occupation VICE PRESIDENT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>MR. ALAN D. LEVOW</b>		Date of Receipt MM / DD / YYYY 02 / 10 / 2016	
Mailing Address 2891 HOWELL MILL ROAD N.W.		Transaction ID : SA11.3100673	
City ATLANTA	State GA	Zip Code 30327-1333	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00	
Name of Employer SELF-EMPLOYED		Occupation REAL ESTATE DEVELOPER	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	3000.00

201604140200097722

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM M. LEVY**

Mailing Address 105 LA PAIX LANE

City BALTIMORE State MD Zip Code 21204-7506

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 03 / 2016

Transaction ID : SA11.3101249

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. JEANNE LEWIS**

Mailing Address 6701 N. SCOTTSDALE ROAD LOT 24

City SCOTTSDALE State AZ Zip Code 85250-4404

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 MM / DD / YYYY  
 02 / 23 / 2016

Transaction ID : SA11.3100770

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN W. LEWIS**

Mailing Address 513 EAST CAMPBELL AVE

City GILBERT State AZ Zip Code 85234-4613

FEC ID number of contributing federal political committee. **C**

Name of Employer TOWN OF GILBERT Occupation MAYOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 22 / 2016

Transaction ID : SA11.3102892

Amount of Each Receipt this Period  
 -500.00

Memo Item  
CONTRIBUTION  
CHARGED BACK

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

201604140200097723

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 199 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRUCE R. LIEBERMAN**

Mailing Address **P.O. BOX 14166**

City **SCOTTSDALE** State **AZ** Zip Code **85267-4166**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2016**

Transaction ID : **SA11.3101492**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE HON. JOSEPH I. LIEBERMAN**

Mailing Address **3220 ARLINGTON AVENUE  
APARTMENT 12A**

City **RIVERDALE** State **NY** Zip Code **10463-3352**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KASOWITZ BENSEN** Occupation **LAWYER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102071**

Amount of Each Receipt this Period  
**1700.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GAVIN LINDNER**

Mailing Address **32 REMSEN ST**

City **WILLISTON PARK** State **NY** Zip Code **11596-1141**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED CIVIL ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2016**

Transaction ID : **SA11.3100502**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **2000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097724

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 200 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. GAVIN LINDNER**

Mailing Address **32 REMSEN ST**

City **WILLISTON PARK** State **NY** Zip Code **11596-1141**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED CIVIL ENGINEER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102604**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY L. LINDSEY**

Mailing Address **4248 E. EXPEDIATION WAY**

City **PHOENIX** State **AZ** Zip Code **85050-8767**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CENTURYLINK** Occupation **GOVERNMENT RELATATIONS/POLICY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102699**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. LAUREN A. LISS**

Mailing Address **6 ARLINGTON AVENUE**

City **BEVERLY** State **MA** Zip Code **01915-1002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUBIN & RUDMAN, L.L.P.** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 24 / 2016**

Transaction ID : **SA11.3101683**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1600.00**

**TOTAL** This Period (last page this line number only).....

201604140200097725



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 201 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MARY JO LIVINGSTON**

Mailing Address 18311 S. 82ND ST.

City: HICKMAN    State: NE    Zip Code: 68372-7090

FEC ID number of contributing federal political committee: **C**

Name of Employer: SELF-EMPLOYED    Occupation: REAL ESTATE DEVELOPER

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 03 / 03 / 2016

Transaction ID : SA11.3101212

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DOMINICK LARRY LODATO**

Mailing Address 6514 W. CHRISTY DR.

City: GLENDALE    State: AZ    Zip Code: 85304-3621

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED    Occupation: RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 02 / 10 / 2016

Transaction ID : SA11.3100648

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. BETTY B. LONG**

Mailing Address 4389 MALIA STREET APT 437

City: HONOLULU    State: HI    Zip Code: 96821-

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED    Occupation: RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 400.00

Date of Receipt: 02 / 03 / 2016

Transaction ID : SA11.3100296

Amount of Each Receipt this Period: 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

300.00

201604140200097726

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 202 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BETTY B. LONG**

Mailing Address 4389 MALIA STREET APT 437

City HONOLULU      State HI      Zip Code 96821-

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED**      Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102759**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. LAURA E. LONG**

Mailing Address 530 ATLANTIC AVENUE, #403

City BOSTON      State MA      Zip Code 02210-2236

FEC ID number of contributing federal political committee. **C**

Name of Employer **RUBIN AND RUDMAN LLP**      Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2016**

Transaction ID : **SA11.3101771**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MAYOR GEORGIA T. LORD**

Mailing Address 14773 W. PICCADILLY ROAD

City GOODYEAR      State AZ      Zip Code 85395-8829

FEC ID number of contributing federal political committee. **C**

Name of Employer **CITY OF GOODYEAR**      Occupation **MAYOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 23 / 2016**

Transaction ID : **SA11.3100776**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1200.00**

201604140200097727

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 203 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. PHILLIPPE D. LORD</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>	
Mailing Address <b>5401 E. POINSETTIA DRIVE</b>			Transaction ID : <b>SA11.3099980</b>	
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85254-4783</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>MERITAGE HOMES</b>		Occupation <b>COO</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. JOSEPH LOSTRITTO</b>			Date of Receipt MM / DD / YYYY <b>03 / 29 / 2016</b>	
Mailing Address <b>66 MCCOUNS LANE</b>			Transaction ID : <b>SA11.3101904</b>	
City <b>OLD BROOKVILLE</b>	State <b>NY</b>	Zip Code <b>11545-2013</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>STEEL EQUITIES</b>		Occupation <b>REAL ESTATE/EXECUTIVE</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

Full Name (Last, First, Middle Initial) <b>MRS. LINSEY B. LOW</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>	
Mailing Address <b>9 DUCKTRAP ROAD</b>			Transaction ID : <b>SA11.3099920</b>	
City <b>LINCOLNVILLE</b>	State <b>ME</b>	Zip Code <b>04849-5222</b>	Amount of Each Receipt this Period <b>100.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>HOMEMAKER</b>		Occupation <b>HOMEMAKER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097728

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN F. LUND**

Mailing Address **9816 FIELDCREST DRIVE**

City **OMAHA** State **NE** Zip Code **68114-4935**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE LUND COMPANY** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**02 / 24 / 2016**

Transaction ID : **SA11.3100808**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES H. LUNDY**

Mailing Address **1234 W. RUTH AVE**

City **PHOENIX** State **AZ** Zip Code **85021-4447**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ALLIANCE BANK OF ARIZONA** Occupation **BANK EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099967**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ALFRED LUREY**

Mailing Address **1100 PEACHTREE STREET, SUITE 2800**

City **ATLANTA** State **GA** Zip Code **30309-4528**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KILPATRICK TOWNSEND & STOCKTON LLP** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100475**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1350.00**

**TOTAL** This Period (last page this line number only).....

201604140200097729

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 205 OF 590

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

Full Name (Last, First, Middle Initial) <b>MR. ALFRED LUREY</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>	
Mailing Address <b>1100 PEACHTREE STREET, SUITE 2800</b>			Transaction ID : <b>SA11.3101129</b>	
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30309-4528</b>	Amount of Each Receipt this Period <b>50.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>KILPATRICK TOWNSEND &amp; STOCKTON LLP</b>		Occupation <b>ATTORNEY</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>400.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. ROBERT S. LYNCH</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>	
Mailing Address <b>340 E. PALM LANE SUITE 140</b>			Transaction ID : <b>SA11.3099951</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004-4603</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>ATTORNEY</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1750.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. ROBERT S. LYNCH</b>			Date of Receipt MM / DD / YYYY <b>02 / 22 / 2016</b>	
Mailing Address <b>340 E. PALM LANE SUITE 140</b>			Transaction ID : <b>SA11.3100760</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85004-4603</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>ATTORNEY</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1750.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097730

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 206 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS W. LYONS**

Mailing Address **171 EAST GREENWICH AVENUE**

City **WEST WARWICK** State **RI** Zip Code **02893-5413**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STRAUSS, FACTOR, LAING & LYONS** Occupation **LAWYER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101252**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. OTTO W. MAATSCH**

Mailing Address **84 GARFIELD STREET**

City **DUMONT** State **NJ** Zip Code **07628-1306**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100641**

Amount of Each Receipt this Period  
**75.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MS. DORA MACDONALD**

Mailing Address **11259 LEO COLLINS DRIVE**

City **EL PASO** State **TX** Zip Code **79936-4619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101721**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**425.00**

201604140200097731

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 207 OF 590  
(check only one)

11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN P. MACIAS**

Mailing Address **544 W. SOLANO DR.**

City **PHOENIX** State **AZ** Zip Code **85013-1855**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PIVOT MANUFACTURING** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101300**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT MACOMBER**

Mailing Address **25980 VINEDO LANE**

City **LOS ALTOS HILLS** State **CA** Zip Code **94022-4471**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102105**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. PETER A. MAGOWAN**

Mailing Address **100 PINE ST.**

City **SAN FRANCISCO** State **CA** Zip Code **94111-5102**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SF SENTRY** Occupation **INVESTMENTS**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101334**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

201604140200097732

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 208 OF 590
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.**

Full Name (Last, First, Middle Initial)  
**MS. DIANE MARIE MAJOR**

Mailing Address **2232 WESTWOOD PLACE**

City **FALLS CHURCH** State **VA** Zip Code **22043-1619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE D. MAJOR GROUP LLC** Occupation **PRESIDENT & CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 07 / 2016**

Transaction ID : **SA11.3100877**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MRS. CATHERINE ALDEN MALONE**

Mailing Address **149 RANDOLPH AVE.**

City **MILTON** State **MA** Zip Code **02186-3524**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SENIOR MANAGING DIRECTOR** Occupation **CSP ASSOCIATES**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102142**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. JAMES R. MALONEY**

Mailing Address **508 WEST HARMONT DRIVE**

City **PHOENIX** State **AZ** Zip Code **85021-5647**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2016**

Transaction ID : **SA11.3100455**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3250.00**

201604140200097733



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 209 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>DR. PETER MALONE</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>149 RANDOLPH AVE.</b>			Transaction ID : <b>SA11.3102141</b>
City <b>MILTON</b>	State <b>MA</b>	Zip Code <b>02186-3524</b>	Amount of Each Receipt this Period <b>200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>SENIOR MANAGING DIRECTOR</b>	Occupation <b>CSP ASSOCIATES</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5400.00</b>		

Full Name (Last, First, Middle Initial) <b>DR. PETER MALONE</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>149 RANDOLPH AVE.</b>			Transaction ID : <b>SA11.3102141B</b>
City <b>MILTON</b>	State <b>MA</b>	Zip Code <b>02186-3524</b>	Amount of Each Receipt this Period <b>-100.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>SENIOR MANAGING DIRECTOR</b>	Occupation <b>CSP ASSOCIATES</b>		<b>REDESIGNATION TO GENERAL</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5400.00</b>		

Full Name (Last, First, Middle Initial) <b>DR. PETER MALONE</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>149 RANDOLPH AVE.</b>			Transaction ID : <b>SA11.3103001</b>
City <b>MILTON</b>	State <b>MA</b>	Zip Code <b>02186-3524</b>	Amount of Each Receipt this Period <b>100.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>SENIOR MANAGING DIRECTOR</b>	Occupation <b>CSP ASSOCIATES</b>		<b>REDESIGNATION FROM PRIMARY</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5400.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

20160414020097734

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. VIVIAN J. MALTBY**

Mailing Address **1914 RIVIERA DRIVE**

City **BLYTHE** State **CA** Zip Code **92225-4149**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099919**

Amount of Each Receipt this Period  
**150.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. PAUL ROBERT MARCUS**

Mailing Address **260 FRANKLIN ST. STE. 620**

City **BOSTON** State **MA** Zip Code **02110-3180**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MARCUS PARTNERS** Occupation **MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 24 / 2016**

Transaction ID : **SA11.3101686**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD MARGOLIS**

Mailing Address **23405 MALIBU COLONY RD**

City **MALIBU** State **CA** Zip Code **90265-4640**

FEC ID number of contributing federal political committee. **C**

Name of Employer **COLUMBUS PACIFIC PROPERTIES** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101911**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3850.00**

201604140200097735

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. DONALD J. MARSHALL</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 31 KING AVE		Transaction ID : SA11.3102298
City PIEDMONT	State CA	Zip Code 94611-3826
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer CONSULTING ENGINEER & ECONOMIST	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00	

Full Name (Last, First, Middle Initial) <b>MRS. MARIE M. MARSHALL</b>		Date of Receipt MM / DD / YYYY 01 / 29 / 2016
Mailing Address 100 RIDGESIDE ROAD		Transaction ID : SA11.3100092
City CHATTANOOGA	State TN	Zip Code 37411-1829
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00	

Full Name (Last, First, Middle Initial) <b>MR. JAMES PATRICK MARTIN</b>		Date of Receipt MM / DD / YYYY 01 / 29 / 2016
Mailing Address 21919 N. MONTEGO DR.		Transaction ID : SA11.3100088
City SUN CITY WEST	State AZ	Zip Code 85375-2939
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 380.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097736

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. SEAN B. MARTIN**

Mailing Address 145 OXFORD RD.

City KENILWORTH State IL Zip Code 60043-1265

FEC ID number of contributing federal political committee. **C**

Name of Employer APOLLO EDUCATION GROUP, INC. Occupation SR. V.P., GENERAL COUNSEL & SECRETAR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2016

Transaction ID : SA11.3100925

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR MASON**

Mailing Address 3302 ROLLING ROAD

City CHEVY CHASE State MD Zip Code 20815-4034

FEC ID number of contributing federal political committee. **C**

Name of Employer CASSIDY & ASSOCIATES Occupation EXECUTIVE VICE PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2016

Transaction ID : SA11.3100923

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. NORMAN A. MATTHIAS JR.**

Mailing Address 1191 E. AVENIDA GRANDE

City CASA GRANDE State AZ Zip Code 85122-1014

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2016

Transaction ID : SA11.3099910

Amount of Each Receipt this Period  
100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 3600.00

**TOTAL** This Period (last page this line number only).....

201604140200097737

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. NORMAN A. MATTHIAS JR.</b>			Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>		
Mailing Address <b>1191 E. AVENIDA GRANDE</b>			Transaction ID : <b>SA11.3101482</b>		
City <b>CASA GRANDE</b>	State <b>AZ</b>	Zip Code <b>85122-1014</b>	Amount of Each Receipt this Period <b>100.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>300.00</b>			

Full Name (Last, First, Middle Initial) <b>MR. LAWRENCE A. MAZZOTTA</b>			Date of Receipt MM / DD / YYYY <b>02 / 24 / 2016</b>		
Mailing Address <b>209 S. 19TH STREET STE. 100</b>			Transaction ID : <b>SA11.3100814</b>		
City <b>OMAHA</b>	State <b>NE</b>	Zip Code <b>68102-1713</b>	Amount of Each Receipt this Period <b>500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>CORNERSTONE ASSOCIATES, LLC</b>		Occupation <b>CEO</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>			

Full Name (Last, First, Middle Initial) <b>MR. NEILL G. MCBRYDE</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>851 HEMPSTEAD PLACE</b>			Transaction ID : <b>SA11.3102223</b>		
City <b>CHARLOTTE</b>	State <b>NC</b>	Zip Code <b>28207-2323</b>	Amount of Each Receipt this Period <b>600.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>MOORE AND VAN ALLEN PLLC</b>		Occupation <b>LAWYER</b>			
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>600.00</b>			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097738

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MRS. ANNE L. MCCAIN-EARDLEY</b>		Date of Receipt MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address P.O. BOX 2800-299		Transaction ID : <b>SA11.3100577</b>
City <b>CAREFREE</b>	State <b>AZ</b>	Zip Code <b>85377-</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>FRANCHISEE</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000.00</b>	

Full Name (Last, First, Middle Initial) <b>MRS. ANNE L. MCCAIN-EARDLEY</b>		Date of Receipt MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address P.O. BOX 2800-299		Transaction ID : <b>SA11.3100577B</b>
City <b>CAREFREE</b>	State <b>AZ</b>	Zip Code <b>85377-</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>-1000.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>FRANCHISEE</b>	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION <b>REDESIGNATION TO GENERAL</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000.00</b>	

Full Name (Last, First, Middle Initial) <b>MRS. ANNE L. MCCAIN-EARDLEY</b>		Date of Receipt MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address P.O. BOX 2800-299		Transaction ID : <b>SA11.3100736</b>
City <b>CAREFREE</b>	State <b>AZ</b>	Zip Code <b>85377-</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>FRANCHISEE</b>	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION <b>REDESIGNATION FROM PRIMARY</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097739

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 215 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>MR. WALTER B. MCCORMICK JR.</b>		Date of Receipt MM / DD / YYYY <b>01 / 22 / 2016</b>
Mailing Address <b>607 14TH STREET NW SUITE 400 U.S. TELECOM. ASSOCIATIO</b>		Transaction ID : <b>SA11.3099884</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20005-2073</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2700.00</b>
Name of Employer <b>U.S. TELECOM ASSOCIATION</b>	Occupation <b>PRESIDENT &amp; C.E.O.</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. WALTER B. MCCORMICK JR.</b>		Date of Receipt MM / DD / YYYY <b>01 / 28 / 2016</b>
Mailing Address <b>607 14TH STREET NW SUITE 400 U.S. TELECOM. ASSOCIATIO</b>		Transaction ID : <b>SA11.3099884B</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20005-2073</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-1000.00</b>
Name of Employer <b>U.S. TELECOM ASSOCIATION</b>	Occupation <b>PRESIDENT &amp; C.E.O.</b>	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION <b>REDESIGNATION TO GENERAL</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. WALTER B. MCCORMICK JR.</b>		Date of Receipt MM / DD / YYYY <b>01 / 28 / 2016</b>
Mailing Address <b>607 14TH STREET NW SUITE 400 U.S. TELECOM. ASSOCIATIO</b>		Transaction ID : <b>SA11.3100568</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20005-2073</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>U.S. TELECOM ASSOCIATION</b>	Occupation <b>PRESIDENT &amp; C.E.O.</b>	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION <b>REDESIGNATION FROM PRIMARY</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3700.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097740

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

**A.**

Full Name (Last, First, Middle Initial)  
**MR. WILLIAM D. MCINTURFF**

Mailing Address **611 FT. WILLIAMS PKWY**

City **ALEXANDRIA** State **VA** Zip Code **22304-1813**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PUBLIC OPINION STRATEGIES** Occupation **SMALL BUSINESS OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102641**

Amount of Each Receipt this Period  
**200.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. GIBSON T. MCKAY**

Mailing Address **8411 N. 11TH AVENUE**

City **PHOENIX** State **AZ** Zip Code **85021-5514**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SHERPS PUBLIC AFFAIRS** Occupation **BUSINESS OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1900.00**

Date of Receipt  
MM / DD / YYYY  
**01 / 27 / 2016**

Transaction ID : **SA11.3099966**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. CARLTON J. MCLEOD USN (RET)**

Mailing Address **670 W. PEARSON ST.**

City **HERNANDO** State **FL** Zip Code **34442-4879**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **290.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102497**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **500.00**

**TOTAL** This Period (last page this line number only).....

201604140200097741



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 217 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 11d	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>EDWARD E. MCNALLY</b>		Date of Receipt MM / DD / YYYY <b>03 / 24 / 2016</b>
Mailing Address <b>1633 BROADWAY</b>		Transaction ID : <b>SA11.3101667</b>
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10019-6708</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>KASOWITZ BENSON</b>	Occupation <b>ATTORNEY</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. JAMES A. MCRAE</b>		Date of Receipt MM / DD / YYYY <b>02 / 10 / 2016</b>
Mailing Address <b>557 SE VISTA DRIVE</b>		Transaction ID : <b>SA11.3100663</b>
City <b>NEWPORT</b>	State <b>OR</b>	Zip Code <b>97365-4210</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>200.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>260.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. JACKIE A. MECK</b>		Date of Receipt MM / DD / YYYY <b>01 / 29 / 2016</b>
Mailing Address <b>P.O. BOX 98</b>		Transaction ID : <b>SA11.3100118</b>
City <b>BUCKEYE</b>	State <b>AZ</b>	Zip Code <b>85326-0008</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>350.00</b>	
Name of Employer <b>CITY OF BUCKEYE</b>	Occupation <b>MAYOR</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>700.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097742

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 218 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL MEHALKO**

Mailing Address **760 E. 8TH STREET**

City **MESA** State **AZ** Zip Code **85203-6324**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **02 / 03 / 2016**

Transaction ID : **SA11.3100142**

Amount of Each Receipt this Period **50.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MERLE D. MELVIN**

Mailing Address **412 WHITE HERON CIRCLE**

City **FAYETTEVILLE** State **NY** Zip Code **13066-9500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 21 / 2016**

Transaction ID : **SA11.3101417**

Amount of Each Receipt this Period **500.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. DIANE MENDEZ-PADELFORD**

Mailing Address **18104 S. SUMMER AVENUE**

City **ARTESIA** State **CA** Zip Code **90701-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **8431.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : **SA11.3100516**

Amount of Each Receipt this Period **328.00**

Memo Item  
REFUND TO BE ISSUED

**SUBTOTAL** of Receipts This Page (optional)..... **878.00**

**TOTAL** This Period (last page this line number only).....

201604140200097743

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 219 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. DIANE MENDEZ-PADELFORD**

Mailing Address 18104 S. SUMMER AVENUE

City: ARTESIA State: CA Zip Code: 90701-

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 8431.00

Date of Receipt: 03 / 03 / 2016

Transaction ID : SA11.3101259

Amount of Each Receipt this Period: 251.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. DIANE MENDEZ-PADELFORD**

Mailing Address 18104 S. SUMMER AVENUE

City: ARTESIA State: CA Zip Code: 90701-

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 8431.00

Date of Receipt: 03 / 03 / 2016

Transaction ID : SA11.3101259B

Amount of Each Receipt this Period: -29.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MRS. DIANE MENDEZ-PADELFORD**

Mailing Address 18104 S. SUMMER AVENUE

City: ARTESIA State: CA Zip Code: 90701-

FEC ID number of contributing federal political committee: **C**

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 8431.00

Date of Receipt: 03 / 03 / 2016

Transaction ID : SA11.3101844

Amount of Each Receipt this Period: 29.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional) ..... 251.00

**TOTAL** This Period (last page this line number only) .....

201604140200097744

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>MRS. DIANE MENDEZ-PADEL FORD</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>18104 S. SUMMER AVENUE</b>			Transaction ID : <b>SA11.3102665</b>
City <b>ARTESIA</b>	State <b>CA</b>	Zip Code <b>90701-</b>	Amount of Each Receipt this Period <b>302.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>8431.00</b>		

B. Full Name (Last, First, Middle Initial) <b>MRS. DIANE MENDEZ-PADEL FORD</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>18104 S. SUMMER AVENUE</b>			Transaction ID : <b>SA11.3102665B</b>
City <b>ARTESIA</b>	State <b>CA</b>	Zip Code <b>90701-</b>	Amount of Each Receipt this Period <b>-302.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>		<b>REDESIGNATION TO GENERAL</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>8431.00</b>		

C. Full Name (Last, First, Middle Initial) <b>MRS. DIANE MENDEZ-PADEL FORD</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>18104 S. SUMMER AVENUE</b>			Transaction ID : <b>SA11.3103004</b>
City <b>ARTESIA</b>	State <b>CA</b>	Zip Code <b>90701-</b>	Amount of Each Receipt this Period <b>302.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>		<b>REDESIGNATION FROM PRIMARY</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>8431.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>302.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097745

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 221 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN D. MENDELSON**

Mailing Address **25870 IVANHOE RD**

City **HUNTINGTON WOODS** State **MI** Zip Code **48070-1608**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MENDELSON ORTHOPEDICS** Occupation **FOUNDER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 01 / 2016**

Transaction ID : **SA11.3100853**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERTO MERCADE**

Mailing Address **5121 NW 93 DORAL WAY**

City **DORAL** State **FL** Zip Code **33178-2056**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCHERING-PLOUGH** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3102581**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. CLOVIS H. MESSICK**

Mailing Address **13806 N. SILVERBELL DRIVE**

City **SUN CITY** State **AZ** Zip Code **85351-2550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 10 / 2016**

Transaction ID : **SA11.3100639**

Amount of Each Receipt this Period  
**60.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1160.00**

201604140200097746

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. CLOVIS H. MESSICK**

Mailing Address **13806 N. SILVERBELL DRIVE**

City **SUN CITY** State **AZ** Zip Code **85351-2550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 17 / 2016**

Transaction ID : **SA11.3100715**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. CLOVIS H. MESSICK**

Mailing Address **13806 N. SILVERBELL DRIVE**

City **SUN CITY** State **AZ** Zip Code **85351-2550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 18 / 2016**

Transaction ID : **SA11.3101361**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**HON. LLOYD W. MEYER**

Mailing Address **P.O. BOX 3440**

City **CAREFREE** State **AZ** Zip Code **85377-3440**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **FORMER MAYOR OF CAREFREE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 23 / 2016**

Transaction ID : **SA11.3100791**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1075.00**

201604140200097747

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA B. MILLER**

Mailing Address **3700 BELLINGER LANE**  
**SPACE 55**

City **MEDFORD** State **OR** Zip Code **97501-9556**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **305.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 03 / 2016**

Transaction ID : **SA11.3100238**

Amount of Each Receipt this Period  
**60.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LARRY M. MILLER**

Mailing Address **720 ATLANTA COUNTRY CLUB DRIVE S.E**

City **MARIETTA** State **GA** Zip Code **30067-4718**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 10 / 2016**

Transaction ID : **SA11.3100683**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MATT H. MILLER**

Mailing Address **3402 E. GEORGIA AVENUE**

City **PHOENIX** State **AZ** Zip Code **85018-1501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SJS INVESTMENT SERVICES** Occupation **WEALTH MANAGEMENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 23 / 2016**

Transaction ID : **SA11.3100779**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1310.00**

201604140200097748

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 224 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JEAN-PIERRE MILLON**

Mailing Address **3908 E. SAN MIGUEL AVENUE**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-5059**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102701**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**DR. HARVEY MINKIN**

Mailing Address **1639 APPLE LN**

City **BLOOMFIELD TOWNSHI** State **MI** Zip Code **48302-1304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **RADIOLOGIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 01 / 2016**

Transaction ID : **SA11.3100852**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**JONATHAN MINSKER**

Mailing Address **1100 BISWAYNE BLVD**

City **MIAMI** State **FL** Zip Code **33132-1717**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KASOWITZ BENSON** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102052**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

20160414020097749



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. DENNIS E. MITCHEM</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address 1616 W. GLENDALE AVE., APT. 588			Transaction ID : SA11.3101225		
City PHOENIX	State AZ	Zip Code 85021-8948	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date 3450.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MR. DENNIS E. MITCHEM</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address 1616 W. GLENDALE AVE., APT. 588			Transaction ID : SA11.3101225B		
City PHOENIX	State AZ	Zip Code 85021-8948	Amount of Each Receipt this Period -100.00		
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date 3450.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		REDESIGNATION TO GENERAL			

Full Name (Last, First, Middle Initial) <b>MR. DENNIS E. MITCHEM</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address 1616 W. GLENDALE AVE., APT. 588			Transaction ID : SA11.3103003		
City PHOENIX	State AZ	Zip Code 85021-8948	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			<input checked="" type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date 3450.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		REDESIGNATION FROM PRIMARY			

SUBTOTAL of Receipts This Page (optional).....			100.00		
TOTAL This Period (last page this line number only).....					

201604140200097750

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS E. MITCHEM**

Mailing Address 1616 W. GLENDALE AVE., APT. 588

City PHOENIX      State AZ      Zip Code 85021-8948

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3450.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102564

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS E. MITCHEM**

Mailing Address 1616 W. GLENDALE AVE., APT. 588

City PHOENIX      State AZ      Zip Code 85021-8948

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3450.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102564B

Amount of Each Receipt this Period  
-250.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. DENNIS E. MITCHEM**

Mailing Address 1616 W. GLENDALE AVE., APT. 588

City PHOENIX      State AZ      Zip Code 85021-8948

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED      Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3450.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3103002

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

250.00

250.00

201604140200097751

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. JOHN W. MITCHELL</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016
Mailing Address 250 E. 54TH STREET APT. 38D		Transaction ID : SA11.3101255
City NEW YORK	State NY	Zip Code 10022-
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00	

Full Name (Last, First, Middle Initial) <b>MR. JOHN W. MITCHELL</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 250 E. 54TH STREET APT. 38D		Transaction ID : SA11.3102567
City NEW YORK	State NY	Zip Code 10022-
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 350.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00	

Full Name (Last, First, Middle Initial) <b>MR. KEVIN M. MODANY</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2016
Mailing Address 10369 CHARTER OAKS		Transaction ID : SA11.3101346
City CARMEL	State IN	Zip Code 46032-8304
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer I.T.T. TECHNICAL INSTITUTE	Occupation CHAIRMAN & C.E.O.	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097752

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 228 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) <b>A. JAIME A. MOLERA</b>			Date of Receipt MM / DD / YYYY <b>02 / 23 / 2016</b>	
Mailing Address <b>1030 E. HIDDENVIEW DR.</b>			Transaction ID : <b>SA11.3100769</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85048-1901</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>MOLERA ALVAREZ GROUP</b>		Occupation <b>CONSULTANT/DEVELOPER/PARTNER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>2000.00</b>		

Full Name (Last, First, Middle Initial) <b>B. MR. BRIAN K. MOLL</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>	
Mailing Address <b>18436 N. 92ND STREET</b>			Transaction ID : <b>SA11.3099996</b>	
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85255-6204</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>QUARLES BRADY LLP</b>		Occupation <b>ATTORNEY</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>C. MR. ROBERT L. MONTAGUE III</b>			Date of Receipt MM / DD / YYYY <b>02 / 17 / 2016</b>	
Mailing Address <b>P.O. BOX 327</b>			Transaction ID : <b>SA11.3100725</b>	
City <b>URBANNA</b>	State <b>VA</b>	Zip Code <b>23175-0327</b>	Amount of Each Receipt this Period <b>100.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>375.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097753

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. JAMES W. MONTGOMERY</b>		Date of Receipt MM / DD / YYYY <b>03 / 28 / 2016</b>
Mailing Address <b>11943 KEARSARGE ST</b>		Transaction ID : <b>SA11.3101820</b>
City <b>LOS ANGELES</b>	State <b>CA</b>	Zip Code <b>90049-4121</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2700.00</b>
Name of Employer <b>MARCH CAPITAL PARTNERS</b>	Occupation <b>INVESTOR</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2700.00</b>	

Full Name (Last, First, Middle Initial) <b>MRS. REBECCA MONTGOMERY</b>		Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>
Mailing Address <b>4588 S. BENNING DRIVE</b>		Transaction ID : <b>SA11.3099962</b>
City <b>GILBERT</b>	State <b>AZ</b>	Zip Code <b>85297-5256</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>LEWIS ROCA, ROTHGERBER CHRISTIE</b>	Occupation <b>HR EXECUTIVE</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. MONTY MOODY</b>		Date of Receipt MM / DD / YYYY <b>02 / 23 / 2016</b>
Mailing Address <b>8140 WEST COUNTRY GABLE DRIVE</b>		Transaction ID : <b>SA11.3100798</b>
City <b>PEORIA</b>	State <b>AZ</b>	Zip Code <b>85381-4335</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>PASTOR</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4950.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097754

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 230 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

A. Full Name (Last, First, Middle Initial)  
**MR. NICHOLAS G. MOORE**

Mailing Address **24520 BELLA LADERA DR.**

City State Zip Code  
**LOS ALTOS HILLS CA 94024-4763**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**1000.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 29 / 2016**  
Transaction ID : **SA11.3101907**

Amount of Each Receipt this Period  
**1000.00**  
 Memo Item  
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)  
**ROSELEEN L. MOORE**

Mailing Address **5140 KACHEMAK DR.**

City State Zip Code  
**HOMER AK 99603-**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF-EMPLOYED COMMERCIAL FISHING**

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**250.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**  
Transaction ID : **SA11.3102122**

Amount of Each Receipt this Period  
**250.00**  
 Memo Item  
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)  
**MS. SUSAN W. MOORE**

Mailing Address **1030 INDIGO COURT**

City State Zip Code  
**LINCOLNTON GA 30817-4710**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**2000.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 03 / 2016**  
Transaction ID : **SA11.3100236**

Amount of Each Receipt this Period  
**250.00**  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**  
**1500.00**

201604140200097755

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 231 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

A. Full Name (Last, First, Middle Initial) <b>MS. GEORGIA MORGAN</b>		Date of Receipt MM / DD / YYYY 02 / 03 / 2016
Mailing Address <b>P.O. BOX 2747</b>		Transaction ID : <b>SA11.3100254</b>
City <b>HARLINGEN</b>	State <b>TX</b>	
Zip Code <b>78551-2747</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 725.00	

B. Full Name (Last, First, Middle Initial) <b>MR. ROGER MORRIS</b>		Date of Receipt MM / DD / YYYY 01 / 27 / 2016
Mailing Address <b>5849 EAST JUSTINE ROAD</b>		Transaction ID : <b>SA11.3099998</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	
Zip Code <b>85254-1830</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00
Name of Employer <b>QUARLES &amp; BRADY</b>	Occupation <b>ATTORNEY</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

C. Full Name (Last, First, Middle Initial) <b>DR. ANTHONY J. MORTELLITI</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016
Mailing Address <b>8481 WOODBOX ROAD</b>		Transaction ID : <b>SA11.3101045</b>
City <b>MANLIUS</b>	State <b>NY</b>	
Zip Code <b>13104-9420</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 25.00
Name of Employer <b>SUNY UPSTATE MEDICAL UNIVERSITY</b>	Occupation <b>PHYSICIAN</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 215.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	625.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097756

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>DR. ANTHONY J. MORTELLITI</b>			Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>8481 WOODBOX ROAD</b>			Transaction ID : <b>SA11.3101416</b>
City <b>MANLIUS</b>	State <b>NY</b>	Zip Code <b>13104-9420</b>	Amount of Each Receipt this Period <b>40.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>SUNY UPSTATE MEDICAL UNIVERSITY</b>	Occupation <b>PHYSICIAN</b>	Election Cycle-to-Date <b>215.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

B. Full Name (Last, First, Middle Initial) <b>MR. BRENT R. MOSER</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>5445 E. VIA BUENA VISTA</b>			Transaction ID : <b>SA11.3102738</b>
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253-2123</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFF</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>	Election Cycle-to-Date <b>500.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

C. Full Name (Last, First, Middle Initial) <b>COL GEORGE L. MOSES USA, RET.</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>
Mailing Address <b>101 NW FT SILL BLVD</b>			Transaction ID : <b>SA11.3101120</b>
City <b>LAWTON</b>	State <b>OK</b>	Zip Code <b>73507-6611</b>	Amount of Each Receipt this Period <b>35.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>RETIRED MILITARY</b>	Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>435.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>575.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097757



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MIKE MULCAHY**

Mailing Address **2615 N. CAMINO PRINCIPAL**

City **TUCSON** State **AZ** Zip Code **85715-3108**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102697**

Amount of Each Receipt this Period  
**1250.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DONALD E. MUMMERT**

Mailing Address **8134 E. 6TH STREET**

City **TUCSON** State **AZ** Zip Code **85710-2416**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 21 / 2016**

Transaction ID : **SA11.3101441**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES R. MURDOCH**

Mailing Address **1000 FIVE FORKS ROAD**

City **VIRGINIA BEACH** State **VA** Zip Code **23455-4808**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RET, NAVAL AVIATOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102294**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1450.00**

201604140200097758

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 234 OF 590

(check only one)

11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ED NACHAZEL**

Mailing Address **20001 LAKEWINDS DRIVE**

City **RESTON** State **VA** Zip Code **20191-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1350.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100627**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VINESH NAIDOO**

Mailing Address **5132 N. 31ST WAY #142**

City **PHOENIX** State **AZ** Zip Code **85016-4507**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO** Occupation **AUDITOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102739**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAY A. NEAL**

Mailing Address **13075 EVENING CREEK DRIVE S. #246**

City **SAN DIEGO** State **CA** Zip Code **92128-8101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101262**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

201604140200097759

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 235 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAY A. NEAL**

Mailing Address 13075 EVENING CREEK DRIVE S. #246

City SAN DIEGO State CA Zip Code 92128-8101

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 1050.00

Date of Receipt 03 / 25 / 2016

Transaction ID : SA11.3101727

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ETHAN S. NELSON**

Mailing Address 3330 W. DESERT INN RD

City LAS VEGAS State NV Zip Code 89102-8441

FEC ID number of contributing federal political committee. **C**

Name of Employer STEELMAN PARTNERS, INC. Occupation PRESIDENT

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 03 / 30 / 2016

Transaction ID : SA11.3101936

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GLEN D. NELSON**

Mailing Address 301 CARLSON PARKWAY STE. 275

City MINNETONKA State MN Zip Code 55305-5386

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt 03 / 08 / 2016

Transaction ID : SA11.3101285

Amount of Each Receipt this Period 5400.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 6500.00

**TOTAL** This Period (last page this line number only) .....

201604140200097760

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 236 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GLEN D. NELSON**

Mailing Address **301 CARLSON PARKWAY STE. 275**

City **MINNETONKA** State **MN** Zip Code **55305-5386**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 08 / 2016**

Transaction ID : **SA11.3101285B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
**CONTRIBUTION**

**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MR. GLEN D. NELSON**

Mailing Address **301 CARLSON PARKWAY STE. 275**

City **MINNETONKA** State **MN** Zip Code **55305-5386**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 08 / 2016**

Transaction ID : **SA11.3101287**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. MARILYN CARLSON NELSON**

Mailing Address **301 CARLSON PARKWAY SUITE 275**

City **MINNETONKA** State **MN** Zip Code **55305-5386**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHILANTHROPIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**02 / 24 / 2016**

Transaction ID : **SA11.3100809**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

**500.00**

201604140200097761

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 237 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARILYN CARLSON NELSON**

Mailing Address **301 CARLSON PARKWAY  
SUITE 275**

City **MINNETONKA** State **MN** Zip Code **55305-5386**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHILANTHROPIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3101284**

Amount of Each Receipt this Period  
**4900.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. MARILYN CARLSON NELSON**

Mailing Address **301 CARLSON PARKWAY  
SUITE 275**

City **MINNETONKA** State **MN** Zip Code **55305-5386**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHILANTHROPIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3101284B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. MARILYN CARLSON NELSON**

Mailing Address **301 CARLSON PARKWAY  
SUITE 275**

City **MINNETONKA** State **MN** Zip Code **55305-5386**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHILANTHROPIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 08 / 2016**

Transaction ID : **SA11.3101289**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4900.00**

201604140200097762

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. SUSAN M. NEMER-HADDIX**

Mailing Address 1538 S. 105TH STREET

City OMAHA State NE Zip Code 68124-1012

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**02 / 24 / 2016**

Transaction ID : **SA11.3100812**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAN J. NERONE**

Mailing Address 4141 N. S. HERRERA WAY C271

City PHOENIX State AZ Zip Code 85012-1814

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**01 / 29 / 2016**

Transaction ID : **SA11.3100068**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD H. NETHERCUTT**

Mailing Address 4310 PERIWINKLE LANE

City WOODBRIDGE State VA Zip Code 22192-5108

FEC ID number of contributing federal political committee. **C**

Name of Employer **WOODBRIDGE GLASS COMPANY** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 10 / 2016**

Transaction ID : **SA11.3100605**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**650.00**

201604140200097763

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MS. CONSTANCE NEWMAN</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2016	
Mailing Address 114 DUDDINGTON PLS.E.		Transaction ID : SA11.3100506	
City WASHINGTON	State DC	Zip Code 20003-	Amount of Each Receipt this Period _____ 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. <b>C</b>		Election Cycle-to-Date _____ 500.00	
Name of Employer CEBNEWMAN LTD	Occupation SENIOR FELLOW, ATLANTIC COUNCIL		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>MS. CONSTANCE NEWMAN</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016	
Mailing Address 114 DUDDINGTON PLS.E.		Transaction ID : SA11.3101241	
City WASHINGTON	State DC	Zip Code 20003-	Amount of Each Receipt this Period _____ 100.00 <input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. <b>C</b>		Election Cycle-to-Date _____ 500.00	
Name of Employer CEBNEWMAN LTD	Occupation SENIOR FELLOW, ATLANTIC COUNCIL		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. FREDERICK J. NEWTON</b>		Date of Receipt MM / DD / YYYY 03 / 14 / 2016	
Mailing Address 2 BILTMORE EST. DR. #313		Transaction ID : SA11.3100933	
City PHOENIX	State AZ	Zip Code 85016-2855	Amount of Each Receipt this Period _____ 2500.00 <input type="checkbox"/> Memo Item CONTRIBUTION
FEC ID number of contributing federal political committee. <b>C</b>		Election Cycle-to-Date _____ 2500.00	
Name of Employer APOLLO EDUCATION GROUP	Occupation SENIOR V.P., H.R.		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2700.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

201604140200097764

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 240 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>MR. BRYAN L. NEWVILLE</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address P.O. BOX 19195		Transaction ID : SA11.3102773	
City <b>BOULDER</b>	State <b>CO</b>	Zip Code <b>80308-2195</b>	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>NORTHROP GRUMMAN</b>	Occupation <b>ENGINEER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>LONG NGUYEN</b>		Date of Receipt MM / DD / YYYY 03 / 21 / 2016	
Mailing Address 2365 W SHANNON ST		Transaction ID : SA11.3101471	
City <b>CHANDLER</b>	State <b>AZ</b>	Zip Code <b>85224-3471</b>	Amount of Each Receipt this Period 375.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>DASH DESIGNS</b>	Occupation <b>DESIGNER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 625.00		

Full Name (Last, First, Middle Initial) <b>MRS. MARY E. NICHOLSON</b>		Date of Receipt MM / DD / YYYY 02 / 25 / 2016	
Mailing Address 10900 HARPER AVENUE		Transaction ID : SA11.3100831	
City <b>DETROIT</b>	State <b>MI</b>	Zip Code <b>48213-3364</b>	Amount of Each Receipt this Period 5200.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5825.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097765



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 241 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARY E. NICHOLSON**

Mailing Address 10900 HARPER AVENUE

City: DETROIT State: MI Zip Code: 48213-3364

FEC ID number of contributing federal political committee: **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5400.00**

Date of Receipt: **MM / DD / YYYY**  
**02 / 25 / 2016**

Transaction ID : **SA11.3100831B**

Amount of Each Receipt this Period: **-2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. MARY E. NICHOLSON**

Mailing Address 10900 HARPER AVENUE

City: DETROIT State: MI Zip Code: 48213-3364

FEC ID number of contributing federal political committee: **C**

Name of Employer: **HOMEMAKER** Occupation: **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5400.00**

Date of Receipt: **MM / DD / YYYY**  
**02 / 25 / 2016**

Transaction ID : **SA11.3100833**

Amount of Each Receipt this Period: **2700.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL P. NOBLE**

Mailing Address 3031 N. CIVIC CENTER PLZ UNIT 330

City: SCOTTSDALE State: AZ Zip Code: 85251-7912

FEC ID number of contributing federal political committee: **C**

Name of Employer: **SELF-EMPLOYED** Occupation: **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **MM / DD / YYYY**  
**03 / 16 / 2016**

Transaction ID : **SA11.3101321**

Amount of Each Receipt this Period: **250.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**250.00**

**250.00**

20160414020097766

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. SARAH J. NOLAN**

Mailing Address **6803 E. MAIN**

City **SCOTTSDALE** State **AZ** Zip Code **85251-4307**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  

MM	DD	YYYY
03	16	2016

Transaction ID : **SA11.3101315**

Amount of Each Receipt this Period  

1000.00
---------

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. JACQUELINE R. NORTON**

Mailing Address **300 E. UNIVERSITY DR.  
P.O. BOX 2260**

City **TEMPE** State **AZ** Zip Code **85281-2061**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RODEL FOUNDATION** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750.00**

Date of Receipt  

MM	DD	YYYY
03	16	2016

Transaction ID : **SA11.3101308**

Amount of Each Receipt this Period  

250.00
--------

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES H. NORTON JR.**

Mailing Address **131 PIQUA CIRCLE**

City **BERWYN** State **PA** Zip Code **19312-2072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  

MM	DD	YYYY
03	28	2016

Transaction ID : **SA11.3101799**

Amount of Each Receipt this Period  

150.00
--------

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1400.00**

**1400.00**

201604140200097767

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 243 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT NOVICK**

Mailing Address **69 RAVONE STREET**

City **CLIFTON** State **NJ** Zip Code **07012-1526**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KASOWITZ** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101670**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT C. NUSBAUM**

Mailing Address **1699 STUTZ DR.**

City **TROY** State **MI** Zip Code **48084-4501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EURO AMERICA DESIGN** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 01 / 2016**

Transaction ID : **SA11.3100851**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. CARL G. O'BERRY**

Mailing Address **10159 N 119TH PLACE**

City **SCOTTSDALE** State **AZ** Zip Code **85259-5075**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : **SA11.3100523**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1500.00**

**TOTAL** This Period (last page this line number only).....

201604140200097768

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 244 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. CARL G. O'BERRY**

Mailing Address **10159 N 119TH PLACE**

City **SCOTTSDALE** State **AZ** Zip Code **85259-5075**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101256**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM O'KEEFE**

Mailing Address **820 LAGUNA HONDA BLVD.**

City **SAN FRANCISCO** State **CA** Zip Code **94127-1024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SAFTI** Occupation **CEO**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100520**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM O'KEEFE**

Mailing Address **820 LAGUNA HONDA BLVD.**

City **SAN FRANCISCO** State **CA** Zip Code **94127-1024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SAFTI** Occupation **CEO**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101261**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1250.00**

201604140200097769

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. KEVIN E. O'MALLEY</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>
Mailing Address <b>6116 N. 38TH PLACE</b>		Transaction ID : <b>SA11.3101317</b>
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253-3804</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>GALLAGHER &amp; KENNEDY</b>	Occupation <b>ATTORNEY</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500.00</b>	

Full Name (Last, First, Middle Initial) <b>MS. SARA E. O'MEARA</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>
Mailing Address <b>6135 E. MC DONALD DRIVE</b>		Transaction ID : <b>SA11.3101022</b>
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253-5222</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25.00</b>
Name of Employer <b>CHILDHELP</b>	Occupation <b>CEO</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>950.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. BERNARD ROBERT OKUN</b>		Date of Receipt MM / DD / YYYY <b>02 / 26 / 2016</b>
Mailing Address <b>6612 MAUGH ROAD</b>		Transaction ID : <b>SA11.3100827</b>
City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101-4021</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>THE O GROUP</b>	Occupation <b>PRESIDENT</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1025.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097770

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 246 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) <b>A. STEVE OPPENHEIMER</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>	
Mailing Address <b>5815 PINE BROOK RD</b>			Transaction ID : <b>SA11.3100510</b>	
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30328-5225</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>ENERGY CONSULTING</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>B. MR. RONALD E. OSIMO</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>185 THOMAS ROAD</b>			Transaction ID : <b>SA11.3102543</b>	
City <b>RINDGE</b>	State <b>NH</b>	Zip Code <b>03461-5488</b>	Amount of Each Receipt this Period <b>100.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>450.00</b>		

Full Name (Last, First, Middle Initial) <b>C. MR. WALTER OVDIYENKO</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>	
Mailing Address <b>24 HILLCREST RD</b>			Transaction ID : <b>SA11.3100410</b>	
City <b>BARTO</b>	State <b>PA</b>	Zip Code <b>19504-8852</b>	Amount of Each Receipt this Period <b>25.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>235.00</b>		

SUBTOTAL of Receipts This Page (optional).....			<b>375.00</b>	
TOTAL This Period (last page this line number only).....				

201604140200097771

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 247 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. WALTER OVDIYENKO**

Mailing Address **24 HILLCREST RD**

City **BARTO** State **PA** Zip Code **19504-8852**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3100978**

Amount of Each Receipt this Period  
**10.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WALTER OVDIYENKO**

Mailing Address **24 HILLCREST RD**

City **BARTO** State **PA** Zip Code **19504-8852**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102469**

Amount of Each Receipt this Period  
**35.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**LYNN OVES**

Mailing Address **55 SOUTH BATTERY PL**

City **ATLANTA** State **GA** Zip Code **30342-2443**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RIO CONNECTION, INC.** Occupation **CFO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100525**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**545.00**

201604140200097772

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)	PAGE 248 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ASHLEY D. PACE JR.**

Mailing Address **615 BAYSHORE DRIVE**  
**APARTMENT 1001**

City **PENSACOLA** State **FL** Zip Code **32507-3571**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101700**

Amount of Each Receipt this Period  
**20.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CYNTHIA S. PADGETT**

Mailing Address **111 CASTLEWOOD RD.**

City **BALTIMORE** State **MD** Zip Code **21210-1360**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100500**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM PANNILL**

Mailing Address **3709 PIPING ROCK**

City **HOUSTON** State **TX** Zip Code **77027-4031**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102559**

Amount of Each Receipt this Period  
**150.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**270.00**

201604140200097773



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 249 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID F. PAWLOWSKI**

Mailing Address **P.O. BOX 1109**

City **MIDLAND** State **MI** Zip Code **48641-1109**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt **01 / 31 / 2016**  
Transaction ID : **SA11.3100507**

Amount of Each Receipt this Period **150.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVID F. PAWLOWSKI**

Mailing Address **P.O. BOX 1109**

City **MIDLAND** State **MI** Zip Code **48641-1109**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt **03 / 03 / 2016**  
Transaction ID : **SA11.3101136**

Amount of Each Receipt this Period **50.00**  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID F. PAWLOWSKI**

Mailing Address **P.O. BOX 1109**

City **MIDLAND** State **MI** Zip Code **48641-1109**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102276**

Amount of Each Receipt this Period **200.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **400.00**

**TOTAL** This Period (last page this line number only).....

20160414020009777A

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 250 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MRS. CINDI PEARSON</b>		Date of Receipt MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address <b>7319 S. JOSHUA TREE</b>		Transaction ID : <b>SA11.3100578</b>
City <b>QUEEN CREEK</b>	State <b>AZ</b>	Zip Code <b>85142-3238</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SANTA ROSA</b>	Occupation <b>FARMER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. JOSE ANTONIO PENA JR.</b>		Date of Receipt MM / DD / YYYY <b>02 / 10 / 2016</b>
Mailing Address <b>5061 S.W. 144 COURT</b>		Transaction ID : <b>SA11.3100660</b>
City <b>MIAMI</b>	State <b>FL</b>	Zip Code <b>33175-5750</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25.00</b>
Name of Employer <b>INFORMATION REQUESTED PER BEST EFF</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>205.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. SANFORD PENSLER</b>		Date of Receipt MM / DD / YYYY <b>03 / 08 / 2016</b>
Mailing Address <b>15420 WINDMILL POINTE DRIVE</b>		Transaction ID : <b>SA11.3100901</b>
City <b>GROSSE POINTE PARK</b>	State <b>MI</b>	Zip Code <b>48230-1746</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>PENSLER CAPITAL</b>	Occupation <b>OWNER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1025.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020009775

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**JERROLD PERCHIK**

Mailing Address **20 ASHEWORTH CT NW**

City **ATLANTA** State **GA** Zip Code **30327-1531**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BENEVIS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100526**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. BRADLEY W. PETERSEN**

Mailing Address **48 N. COUNTRY CLUB DRIVE**

City **PHOENIX** State **AZ** Zip Code **85014-5441**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SLATTERY PETERSEN, PLLC** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099985**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. EARL A. PETZNICK JR.**

Mailing Address **3920 E. SIERRA VISTA DR.**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-3277**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PINAL FEEDINGS COMPANY** Occupation **VP/CO-OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**02 / 09 / 2016**

Transaction ID : **SA11.3100582**

Amount of Each Receipt this Period  
**2000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3500.00**

201604140200097776

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 252 OF 590  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. EARL A. PETZNICK SR.**

Mailing Address **48 BILTMORE EST**

City **PHOENIX** State **AZ** Zip Code **85016-2825**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORTHSIDE HAY COMPANY** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **02 / 09 / 2016**  
Transaction ID : **SA11.3100580**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. OLEN J. PETZNICK**

Mailing Address **4891 E. BUTLER DRIVE**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-2038**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NORTHSIDE HAY COMPANY** Occupation **BROKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **02 / 09 / 2016**  
Transaction ID : **SA11.3100581**

Amount of Each Receipt this Period **500.00**  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES ALAN PEYSER**

Mailing Address **7 ARROWOOD TERRACE**

City **BETHESDA** State **MD** Zip Code **20817-2829**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102133**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **2500.00**

**TOTAL** This Period (last page this line number only) .....

201604140200097777

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 253 OF 590

(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**CARY P. PFEFFER**

Mailing Address **3217 E. SHEA BLVD. #222**

City **PHOENIX** State **AZ** Zip Code **85028-3381**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **COMMUNICATOR CONSULTANT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 27 / 2016**

Transaction ID : **SA11.3099997**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOSEPH B. PHAIR**

Mailing Address **120 SAN BENITO WAY**

City **SAN FRANCISCO** State **CA** Zip Code **94127-2016**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 31 / 2016**

Transaction ID : **SA11.3100486**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD PHILLIPS**

Mailing Address **22449 SYLVAN STREET**

City **WOODLAND HILLS** State **CA** Zip Code **91367-1743**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA11.3102518**

Amount of Each Receipt this Period  
**75.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**425.00**

20160414020009778

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

FOR LINE NUMBER: (check only one)	PAGE 254 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. GREG PIERCE**

Mailing Address **3617 N. GRANITE RIDGE ROAD**

City **BUCKEYE** State **AZ** Zip Code **85396-3576**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 09 / 2016**

Transaction ID : **SA11.3100593**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEPHEN M. PIERCE**

Mailing Address **14000 N. 7V RANCH ROAD**

City **PRESCOTT** State **AZ** Zip Code **86305-9407**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LAS VEGAS RANCH** Occupation **CATTLE RANCHER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 27 / 2016**

Transaction ID : **SA11.3099974**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**DR. DAVID E. PIRRUNG**

Mailing Address **4725 APACHE AVENUE**

City **JACKSONVILLE** State **FL** Zip Code **32210-7611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 07 / 2016**

Transaction ID : **SA11.3099840**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**600.00**

20160414020009779

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. LOUIS PIZZONE**

Mailing Address **28 TULANE AVENUE**

City **LAWRENCE TOWNSHIP** State **NJ** Zip Code **08648-3837**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **01 / 28 / 2016**

Transaction ID : **SA11.3100026**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD C. PLACEK**

Mailing Address **110 WHITAKER ROAD**

City **WESTFIELD** State **MA** Zip Code **01085-4030**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt **02 / 03 / 2016**

Transaction ID : **SA11.3100197**

Amount of Each Receipt this Period **200.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN D. PLATT**

Mailing Address **3 OLD WELL LANE**

City **DALLAS** State **PA** Zip Code **18612-1733**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102545**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**350.00**

20160414020097780

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 256 OF 590

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. LAWRENCE A. POBUDA</b>			Date of Receipt MM / DD / YYYY 03 / 16 / 2016		
Mailing Address 8149 E. WINGSPAN WAY			Transaction ID : SA11.3101293		
City SCOTTSDALE	State AZ	Zip Code 85255-6451	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer THE OPUS GROUP		Occupation SENIOR VICE PRESIDENT OF DEVELOPEMEI	Election Cycle-to-Date _____ 750.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. GEROLD E. POKORNY</b>			Date of Receipt MM / DD / YYYY 01 / 29 / 2016		
Mailing Address 1046 E BUENA VISTA DR.			Transaction ID : SA11.3100036		
City TEMPE	State AZ	Zip Code 85284-2402	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date _____ 1150.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. GEROLD E. POKORNY</b>			Date of Receipt MM / DD / YYYY 03 / 03 / 2016		
Mailing Address 1046 E BUENA VISTA DR.			Transaction ID : SA11.3101192		
City TEMPE	State AZ	Zip Code 85284-2402	Amount of Each Receipt this Period _____ 85.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED		Occupation RETIRED	Election Cycle-to-Date _____ 1150.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 685.00		
<b>TOTAL</b> This Period (last page this line number only).....			_____		

201604140200097781



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 257 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. GEROLD E. POKORNY**

Mailing Address 1046 E BUENA VISTA DR.

City TEMPE State AZ Zip Code 85284-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1150.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102502

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GEROLD E. POKORNY**

Mailing Address 1046 E BUENA VISTA DR.

City TEMPE State AZ Zip Code 85284-2402

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1150.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102749

Amount of Each Receipt this Period  
250.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LINDA POLACK**

Mailing Address 5537 OLD STILL ROAD

City WAKE FOREST State NC Zip Code 27587-9768

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 375.00

Date of Receipt  
MM / DD / YYYY  
01 / 31 / 2016

Transaction ID : SA11.3100495

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

400.00

201604140200097782

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 258 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**LINDA POLACK**

Mailing Address **5537 OLD STILL ROAD**

City **WAKE FOREST** State **NC** Zip Code **27587-9768**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 03 / 2016**

Transaction ID : **SA11.3101170**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DICK POLLARD**

Mailing Address **6609 NORFOLK AVENUE**

City **LUBBOCK** State **TX** Zip Code **79413-5902**

FEC ID number of contributing federal political committee. **C**

Name of Employer **POLLARD FRIENDLY FORD** Occupation **AUTO DEALER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 29 / 2016**

Transaction ID : **SA11.3100070**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN B. POMERLEAU**

Mailing Address **707 SABLE OAKS DR. STE 150**

City **SOUTH PORTLAND** State **ME** Zip Code **04106-6954**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GLOBAL ENVIRONMENTAL SOLUTIONS, INC** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 30 / 2016**

Transaction ID : **SA11.3101932**

Amount of Each Receipt this Period  
**5400.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5550.00**

201604140200097783

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

FOR LINE NUMBER: (check only one)	PAGE 259 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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

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

Full Name (Last, First, Middle Initial)  
**MR. KEVIN B. POMERLEAU**

Mailing Address **707 SABLE OAKS DR. STE 150**

City State Zip Code  
**SOUTH PORTLAND ME 04106-6954**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**GLOBAL ENVIRONMENTAL SOLUTIONS, INC PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3101932B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item CONTRIBUTION  
**REDESIGNATION TO GENERAL**

Full Name (Last, First, Middle Initial)  
**MR. KEVIN B. POMERLEAU**

Mailing Address **707 SABLE OAKS DR. STE 150**

City State Zip Code  
**SOUTH PORTLAND ME 04106-6954**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**GLOBAL ENVIRONMENTAL SOLUTIONS, INC PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA11.3101958**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION  
**REDESIGNATION FROM PRIMARY**

Full Name (Last, First, Middle Initial)  
**MR. JOHN W. PORTER**

Mailing Address **P.O. BOX 235**

City State Zip Code  
**PERU NY 12972-0235**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**RETIRED RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**230.00**

Date of Receipt  
MM / DD / YYYY  
**01 / 31 / 2016**

Transaction ID : **SA11.3100432**

Amount of Each Receipt this Period  
**30.00**

Memo Item CONTRIBUTION

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

**30.00**

201604140200097784

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 260 OF 590	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN W. PORTER**

Mailing Address **P.O. BOX 235**

City **PERU** State **NY** Zip Code **12972-0235**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101006**

Amount of Each Receipt this Period  
**15.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN W. PORTER**

Mailing Address **P.O. BOX 235**

City **PERU** State **NY** Zip Code **12972-0235**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102376**

Amount of Each Receipt this Period  
**15.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JACQUES A. PRINDIVILLE**

Mailing Address **1550 WORCESTER ROAD UNIT 508**

City **FRAMINGHAM** State **MA** Zip Code **01702-8931**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101715**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**130.00**

201604140200097785

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 261 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY N. PRITZKER**

Mailing Address 11150 SANTA MONICA BLVD. STE 1500

City LOS ANGELES State CA Zip Code 90025-0490

FEC ID number of contributing federal political committee. **C**

Name of Employer THE PRITZKER GROUP Occupation MANAGING PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5300.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3101955

Amount of Each Receipt this Period 2700.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY N. PRITZKER**

Mailing Address 11150 SANTA MONICA BLVD. STE 1500

City LOS ANGELES State CA Zip Code 90025-0490

FEC ID number of contributing federal political committee. **C**

Name of Employer THE PRITZKER GROUP Occupation MANAGING PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5300.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3101955B

Amount of Each Receipt this Period -2600.00  
 Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY N. PRITZKER**

Mailing Address 11150 SANTA MONICA BLVD. STE 1500

City LOS ANGELES State CA Zip Code 90025-0490

FEC ID number of contributing federal political committee. **C**

Name of Employer THE PRITZKER GROUP Occupation MANAGING PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5300.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3101956

Amount of Each Receipt this Period 2600.00  
 Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... 2700.00

**TOTAL** This Period (last page this line number only).....

201604140200097786

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 262 OF 590		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. ANDREW PUZDER</b>			Date of Receipt MM / DD / YYYY <b>03 / 30 / 2016</b>	
Mailing Address <b>570 MEADOW WOOD LN</b>			Transaction ID : <b>SA11.3101939</b>	
City <b>MONTECITO</b>	State <b>CA</b>	Zip Code <b>93108-2027</b>	Amount of Each Receipt this Period <b>2700.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>CKE RESTAURANTS</b>		Occupation <b>CEO</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>2700.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. RONALD QUAIN JR.</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>	
Mailing Address <b>P.O. BOX 83731</b>			Transaction ID : <b>SA11.3099994</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85071-3731</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>AMERICAN TITLE SERVICES AGENCY</b>		Occupation <b>CEO</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. NORMAN J. RADOW</b>			Date of Receipt MM / DD / YYYY <b>02 / 10 / 2016</b>	
Mailing Address <b>1333 PEACHTREE BATTLE AVENUE N.W.</b>			Transaction ID : <b>SA11.3100688</b>	
City <b>ATLANTA</b>	State <b>GA</b>	Zip Code <b>30327-1423</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>RADCO DEVELOPLMENT LLC</b>		Occupation <b>FOUNDER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3950.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097787

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 263 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. JOHN F. RASOR</b>		Date of Receipt MM / DD / YYYY 12 / 07 / 2015
Mailing Address 6038 EAST SUNNYSIDE DRIVE		Transaction ID : SA11.3099100
City SCOTTSDALE	State AZ	Zip Code 85254-4980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer WDP PARTNERS	Occupation BUSINESSMAN	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>MR. JOHN F. RASOR</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2016
Mailing Address 6038 EAST SUNNYSIDE DRIVE		Transaction ID : SA11.3099100B
City SCOTTSDALE	State AZ	Zip Code 85254-4980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2300.00
Name of Employer WDP PARTNERS	Occupation BUSINESSMAN	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION REDESIGNATION TO GENERAL
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>MR. JOHN F. RASOR</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2016
Mailing Address 6038 EAST SUNNYSIDE DRIVE		Transaction ID : SA11.3100545
City SCOTTSDALE	State AZ	Zip Code 85254-4980
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer WDP PARTNERS	Occupation BUSINESSMAN	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION REDESIGNATION FROM PRIMARY
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097788

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 264 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JULIE A. REES**

Mailing Address 1820 PALMCROFT DR. NW

City PHOENIX      State AZ      Zip Code 85007-1734

FEC ID number of contributing federal political committee.  C

Name of Employer TRIADVOCATES, L.L.C.      Occupation PRINCIPAL

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt: MM / DD / YYYY  
01 / 27 / 2016

Transaction ID : SA11.3099973

Amount of Each Receipt this Period: 350.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**RANDI REID**

Mailing Address 1631 HOBART STREET NW

City WASHINGTON      State DC      Zip Code 20009-3704

FEC ID number of contributing federal political committee.  C

Name of Employer KOUNToupES DENHAM      Occupation LOBBYIST

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt: MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102226

Amount of Each Receipt this Period: 500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DAVID REIN**

Mailing Address 1 COVE LANCE

City NEW YORK      State NY      Zip Code 11024-

FEC ID number of contributing federal political committee.  C

Name of Employer SULLIVAN & CROMWELL      Occupation LEGAL

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt: MM / DD / YYYY  
02 / 11 / 2016

Transaction ID : SA11.3100693

Amount of Each Receipt this Period: 1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1850.00

201604140200097789



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 265 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JERRY M. REINSORF**

Mailing Address **333 W. 35TH STREET**

City **CHICAGO** State **IL** Zip Code **60616-3621**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101679**

Amount of Each Receipt this Period **2900.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JERRY M. REINSORF**

Mailing Address **333 W. 35TH STREET**

City **CHICAGO** State **IL** Zip Code **60616-3621**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101679B**

Amount of Each Receipt this Period **-2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. JERRY M. REINSORF**

Mailing Address **333 W. 35TH STREET**

City **CHICAGO** State **IL** Zip Code **60616-3621**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE EXECUTIVE**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 24 / 2016**

Transaction ID : **SA11.3101695**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... **2900.00**

**TOTAL** This Period (last page this line number only).....

201604140200097790

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 266 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MS. DORIS J. RETTGER</b>		Date of Receipt MM / DD / YYYY <b>01 / 29 / 2016</b>	
Mailing Address <b>15125 W. GREYSTONE DRIVE</b>		Transaction ID : <b>SA11.3100100</b>	
City <b>SUN CITY WEST</b>	State <b>AZ</b>	Zip Code <b>85375-6613</b>	Amount of Each Receipt this Period <b>100.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>700.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>JIM REVIE</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>	
Mailing Address <b>388 RIVER ROAD</b>		Transaction ID : <b>SA11.3101200</b>	
City <b>PIPERSVILLE</b>	State <b>PA</b>	Zip Code <b>18947-9331</b>	Amount of Each Receipt this Period <b>100.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>STRATEGIC LITIGATION RESEARCH</b>	Occupation <b>CONSULTANT</b>	Election Cycle-to-Date <b>300.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. DONALD V. RHODES</b>		Date of Receipt MM / DD / YYYY <b>02 / 10 / 2016</b>	
Mailing Address <b>3544 SUNSET BEACH DRIVE N.W.</b>		Transaction ID : <b>SA11.3100656</b>	
City <b>OLYMPIA</b>	State <b>WA</b>	Zip Code <b>98502-3536</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Memo Item CONTRIBUTION	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>500.00</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>450.00</b>

201604140200097791

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 267 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) <b>MS. PATRICIA C. RICE</b>		Date of Receipt MM / DD / YYYY <b>03 / 18 / 2016</b>
Mailing Address <b>3922 ANTIGUA DRIVE</b>		Transaction ID : <b>SA11.3101354</b>
City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75244-6605</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. JEFFREY A. RICH</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>
Mailing Address <b>6000 WHITTINGHAM DRIVE</b>		Transaction ID : <b>SA11.3101316</b>
City <b>DUBLIN</b>	State <b>OH</b>	Zip Code <b>43017-9617</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>ROSE LAW GROUP</b>	Occupation <b>ATTORNEY</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>GABRIELLE RIFE</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>9820 E THOMPSON PEAK PKWY UNIT 716</b>		Transaction ID : <b>SA11.3100519</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85255-6657</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>CORPORATE TELESIS ADVISORS LLC</b>	Occupation <b>MANAGER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097792

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>ROBERT RIFE</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>8757 E. VIA DE COMMERCIO FL 100</b>		Transaction ID : <b>SA11.3100539</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85258-3359</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2700.00</b>
Name of Employer <b>BROADBAND DYNAMICS LLC</b>	Occupation <b>OWNER/CEO</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2700.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. JAMES F. RILL</b>		Date of Receipt MM / DD / YYYY <b>03 / 17 / 2016</b>
Mailing Address <b>1299 PENNSYLVANIA AVE., NW</b>		Transaction ID : <b>SA11.3101342</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20004-2400</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>BAKER BOTTS L.L.P.</b>	Occupation <b>ATTORNEY</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3500.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. JAMES F. RILL</b>		Date of Receipt MM / DD / YYYY <b>03 / 17 / 2016</b>
Mailing Address <b>1299 PENNSYLVANIA AVE., NW</b>		Transaction ID : <b>SA11.3101342B</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20004-2400</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-800.00</b>
Name of Employer <b>BAKER BOTTS L.L.P.</b>	Occupation <b>ATTORNEY</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3500.00</b>	<b>REDESIGNATION TO GENERAL</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097793

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)	PAGE 269 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>MR. JAMES F. RILL</b>		Date of Receipt MM / DD / YYYY <b>03 / 17 / 2016</b>
Mailing Address <b>1299 PENNSYLVANIA AVE., NW</b>		Transaction ID : <b>SA11.3101837</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20004-2400</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>800.00</b>	
Name of Employer <b>BAKER BOTTS L.L.P.</b>	Occupation <b>ATTORNEY</b>	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3500.00</b>	<b>REDESIGNATION FROM PRIMARY</b>

Full Name (Last, First, Middle Initial) <b>MR. FRANK C. RIVERA</b>		Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>
Mailing Address <b>147 E. MARYLAND AVENUE</b>		Transaction ID : <b>SA11.3099911</b>
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85012-1125</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>200.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>SMALL BUSINESS OWNER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>750.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. EDWARD B. ROBERTS</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>
Mailing Address <b>300 BOYLSTON STREET, #1102 APARTMENT 1102</b>		Transaction ID : <b>SA11.3101267</b>
City <b>BOSTON</b>	State <b>MA</b>	Zip Code <b>02116-3966</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>MIT</b>	Occupation <b>PROFESSOR</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097794

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JACK H. ROBERTS**

Mailing Address **1110 WILSON HOLLOW ROAD**

City **WAITSBURG** State **WA** Zip Code **99361-8790**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 03 / 2016**

Transaction ID : **SA11.3100304**

Amount of Each Receipt this Period **400.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES ROBERTSON**

Mailing Address **2143 E. ZION WAY**

City **CHANDLER** State **AZ** Zip Code **85249-3487**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE COCA-COLA COMPANY** Occupation **DIRECTOR OF SALES**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102694**

Amount of Each Receipt this Period **250.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. ROBERTA F. ROGERS**

Mailing Address **14515 W. GRANITE VALLEY DRIVE  
APARTMENT E567**

City **SUN CITY WEST** State **AZ** Zip Code **85375-6024**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2100.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 10 / 2016**

Transaction ID : **SA11.3100620**

Amount of Each Receipt this Period **500.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1150.00**

201604140200097795

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>MS. ROBERTA F. ROGERS</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>14515 W. GRANITE VALLEY DRIVE</b> <b>APARTMENT E567</b>		Transaction ID : <b>SA11.3101446</b>
City <b>SUN CITY WEST</b> State <b>AZ</b> Zip Code <b>85375-6024</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>600.00</b>
Name of Employer <b>HOMEMAKER</b> Occupation <b>HOMEMAKER</b>	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Election Cycle-to-Date <b>2100.00</b>		

B. Full Name (Last, First, Middle Initial) <b>MRS. LORI C. ROGICH</b>		Date of Receipt MM / DD / YYYY <b>03 / 29 / 2016</b>
Mailing Address <b>11847 OAKLAND HILLS DR.</b>		Transaction ID : <b>SA11.3101901</b>
City <b>LAS VEGAS</b> State <b>NV</b> Zip Code <b>89141-6014</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>ROGICH LAW FIRM</b> Occupation <b>LAWYER</b>	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Election Cycle-to-Date <b>5400.00</b>		

C. Full Name (Last, First, Middle Initial) <b>MRS. LORI C. ROGICH</b>		Date of Receipt MM / DD / YYYY <b>03 / 30 / 2016</b>
Mailing Address <b>11847 OAKLAND HILLS DR.</b>		Transaction ID : <b>SA11.3101928</b>
City <b>LAS VEGAS</b> State <b>NV</b> Zip Code <b>89141-6014</b>	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2700.00</b>
Name of Employer <b>ROGICH LAW FIRM</b> Occupation <b>LAWYER</b>	Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Election Cycle-to-Date <b>5400.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3400.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097796

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 272 OF 590

(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. LORI C. ROGICH**

Mailing Address 11847 OAKLAND HILLS DR.

City LAS VEGAS State NV Zip Code 89141-6014

FEC ID number of contributing federal political committee. **C**

Name of Employer ROGICH LAW FIRM Occupation LAWYER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt MM / DD / YYYY  
03 / 30 / 2016

Transaction ID : SA11.3101928B

Amount of Each Receipt this Period -2700.00

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MRS. LORI C. ROGICH**

Mailing Address 11847 OAKLAND HILLS DR.

City LAS VEGAS State NV Zip Code 89141-6014

FEC ID number of contributing federal political committee. **C**

Name of Employer ROGICH LAW FIRM Occupation LAWYER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt MM / DD / YYYY  
03 / 30 / 2016

Transaction ID : SA11.3102047

Amount of Each Receipt this Period 2700.00

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**AMB. SIGMUND A. ROGICH**

Mailing Address 11920 SOUTHERN HIGHLANDS PKWY.  
SUITE 301

City LAS VEGAS State NV Zip Code 89141-3275

FEC ID number of contributing federal political committee. **C**

Name of Employer LAS VEGAS PR Occupation CHAIRMAN/FOUNDER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt MM / DD / YYYY  
03 / 29 / 2016

Transaction ID : SA11.3101900

Amount of Each Receipt this Period 500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 500.00

**TOTAL** This Period (last page this line number only).....

201604140200097797



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 273 OF 590

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**AMB. SIGMUND A. ROGICH**

Mailing Address **11920 SOUTHERN HIGHLANDS PKWY.  
SUITE 301**

City **LAS VEGAS** State **NV** Zip Code **89141-3275**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LAS VEGAS PR** Occupation **CHAIRMAN/FOUNDER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 29 / 2016**

Transaction ID : **SA11.3101900B**

Amount of Each Receipt this Period **-500.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**AMB. SIGMUND A. ROGICH**

Mailing Address **11920 SOUTHERN HIGHLANDS PKWY.  
SUITE 301**

City **LAS VEGAS** State **NV** Zip Code **89141-3275**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LAS VEGAS PR** Occupation **CHAIRMAN/FOUNDER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 29 / 2016**

Transaction ID : **SA11.3102048**

Amount of Each Receipt this Period **500.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MR. ANDRZEJ K. ROJEK**

Mailing Address **20 REMSEN STREET**

City **BROOKLYN** State **NY** Zip Code **11201-4106**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101272**

Amount of Each Receipt this Period **1000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **1000.00**

**TOTAL** This Period (last page this line number only)..... **1000.00**

20160414020097798

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. JASON D. ROSE</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2016
Mailing Address 5630 E. NAUNI VALLEY DR.		Transaction ID : SA11.3101290
City PARADISE VALLEY	State AZ	Zip Code 85253-5125
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer ROSE LAW GROUP	Occupation FOUNDER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) <b>MR. JASON D. ROSE</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2016
Mailing Address 5630 E. NAUNI VALLEY DR.		Transaction ID : SA11.3101311
City PARADISE VALLEY	State AZ	Zip Code 85253-5125
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer ROSE LAW GROUP	Occupation FOUNDER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	

Full Name (Last, First, Middle Initial) <b>MRS. JORDAN J. ROSE</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2016
Mailing Address 5630 E. NAUNI VALLEY DR.		Transaction ID : SA11.3101310
City PARADISE VALLEY	State AZ	Zip Code 85253-5125
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4400.00
Name of Employer ROSE LAW GROUP	Occupation FOUNDER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9800.00
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097799

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JORDAN J. ROSE**

Mailing Address 5630 E. NAUNI VALLEY DR.

City PARADISE VALLEY State AZ Zip Code 85253-5125

FEC ID number of contributing federal political committee. **C**

Name of Employer ROSE LAW GROUP Occupation FOUNDER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4900.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2016

Transaction ID : SA11.3101310B

Amount of Each Receipt this Period  
-2200.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MRS. JORDAN J. ROSE**

Mailing Address 5630 E. NAUNI VALLEY DR.

City PARADISE VALLEY State AZ Zip Code 85253-5125

FEC ID number of contributing federal political committee. **C**

Name of Employer ROSE LAW GROUP Occupation FOUNDER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4900.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2016

Transaction ID : SA11.3101898

Amount of Each Receipt this Period  
2200.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID ROSENZWEIG**

Mailing Address 10 BALSAM CT

City BEDFORD State NH Zip Code 03110-4855

FEC ID number of contributing federal political committee. **C**

Name of Employer VERIZON Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 375.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2016

Transaction ID : SA11.3101178

Amount of Each Receipt this Period  
50.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

50.00

201604140200097800

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 276 OF 590

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. IAN KURT ROSEN</b>			Date of Receipt MM / DD / YYYY 03 / 22 / 2016		
Mailing Address 440 MID OAK DRIVE			Transaction ID : SA11.3101566		
City NORTH MUSKEGON	State MI	Zip Code 49445-2726	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer AMERICAN GREASE STICK CO.		Occupation EXECUTIVE	Election Cycle-to-Date 750.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. JERRY ROSENBERG</b>			Date of Receipt MM / DD / YYYY 02 / 10 / 2016		
Mailing Address 4500 GARMON ROAD			Transaction ID : SA11.3100684		
City ATLANTA	State GA	Zip Code 30327-3835	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer NATIONAL DISTRIBUTING COMPANY, INC.		Occupation VICE CHAIRMAN	Election Cycle-to-Date 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. DOUG M. ROSS</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2016		
Mailing Address 5765 LONG GROVE DRIVE			Transaction ID : SA11.3100529		
City SANDY SPRINGS	State GA	Zip Code 30328-6209	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer MORGAN STANLEY		Occupation FINANCIAL ADVISOR	Election Cycle-to-Date 1000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>SUBTOTAL</b> of Receipts This Page (optional).....			2100.00		
<b>TOTAL</b> This Period (last page this line number only).....			_____		

201604140200097801

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 277 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT P. ROTH**

Mailing Address **35108 QUAKER WAY**

City **FARMINGTON HILLS** State **MI** Zip Code **48331-2036**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PORTNOY AND ROTH P.C.** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 01 / 2016**  
Transaction ID : **SA11.3100845**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILL ROUSSEAU**

Mailing Address **3216 N. MANOR DRIVE**

City **WEST PHOENIX** State **AZ** Zip Code **85014-5527**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2657.66**

Date of Receipt **01 / 22 / 2016**  
Transaction ID : **SA11.3100819**

Amount of Each Receipt this Period **2657.66**  
 Memo Item  
**CONTRIBUTION**  
**IN-KIND: CATERING**

**C.** Full Name (Last, First, Middle Initial)  
**MR. HOWARD S. ROWEN**

Mailing Address **521 TOYOPA DRIVE**

City **PACIFIC PALISADES** State **CA** Zip Code **90272-4470**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MERRILL LYNCH** Occupation **MANAGING DIRECTOR**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 30 / 2016**  
Transaction ID : **SA11.3101943**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **4657.66**

**TOTAL** This Period (last page this line number only).....

201604140200097802

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 278 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. JASON ROWLEY</b>		Date of Receipt MM / DD / YYYY <b>02 / 23 / 2016</b>
Mailing Address <b>4132 E. PARADISE DRIVE</b>		Transaction ID : <b>SA11.3100777</b>
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85028-1510</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>THE PHOENIX SUNS</b>	Occupation <b>PRESIDENT</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>J. P. ROY</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>4710 E FALCON DR. SUITE 125</b>		Transaction ID : <b>SA11.3100515</b>
City <b>MESA</b>	State <b>AZ</b>	Zip Code <b>85215-2504</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>CHRC CREATIVE HUMAN RESOURCES CON</b>	Occupation <b>TECHNICAL CONSULTANT</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL J. RUSING</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>6262 N. SWAN RD. #200</b>		Transaction ID : <b>SA11.3102686</b>
City <b>TUCSON</b>	State <b>AZ</b>	Zip Code <b>85718-3600</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500.00</b>
Name of Employer <b>RUSING &amp; LOPEZ, P.L.L.C.</b>	Occupation <b>ATTORNEY</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097803

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 279 OF 590		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>A. BARRY RUTCOFSKY</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 445 EAST 86TH STREET		Transaction ID : SA11.3102054
City NEW YORK	State NY	Zip Code 10028-6433
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer KASOWITZ BENSON	Occupation ATTORNEY	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. WARREN L. RUTHERFORD</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016
Mailing Address 8600 SKYLINE DR. #1149		Transaction ID : SA11.3101227
City DALLAS	State TX	Zip Code 75243-4170
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) <b>C. MR. WARREN L. RUTHERFORD</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 8600 SKYLINE DR. #1149		Transaction ID : SA11.3102562
City DALLAS	State TX	Zip Code 75243-4170
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097804

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 280 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL JOSEPH RYAN**

Mailing Address 25 BYRON ST

City WATERBURY State CT Zip Code 06704-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 575.00

Date of Receipt 03 / 03 / 2016  
Transaction ID : SA11.3101228

Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL JOSEPH RYAN**

Mailing Address 25 BYRON ST

City WATERBURY State CT Zip Code 06704-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 575.00

Date of Receipt 03 / 03 / 2016  
Transaction ID : SA11.3101229

Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL JOSEPH RYAN**

Mailing Address 25 BYRON ST

City WATERBURY State CT Zip Code 06704-1702

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 575.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102547

Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 300.00

**TOTAL** This Period (last page this line number only) .....

201604140200097805



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS A. RYAN**

Mailing Address **301 COLIN CT.**

City **WINCHESTER** State **VA** Zip Code **22601-6224**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102548**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GERALD M. RYGG**

Mailing Address **1 ROSE RUN**

City **LAMBERTVILLE** State **NJ** Zip Code **08530-3521**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **UNEMPLOYED MECHANICAL ENGINEER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101258**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. CHARLES W. SAMPLE**

Mailing Address **800 FRONTAGE ROAD**

City **NORTHFIELD** State **IL** Zip Code **60093-1205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **02 / 23 / 2016**

Transaction ID : **SA11.3100792**

Amount of Each Receipt this Period **2000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **2350.00**

**TOTAL** This Period (last page this line number only).....

201604140200097806

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 282 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. LEE C. SAMSON**

Mailing Address 9200 W. SUNSET BLVD.  
SUITE 1100

City WEST HOLLYWOOD State CA Zip Code 90069-3606

FEC ID number of contributing federal political committee. **C**

Name of Employer S.N.F. MANAGEMENT Occupation PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : SA11.3101942

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LEE C. SAMSON**

Mailing Address 9200 W. SUNSET BLVD.  
SUITE 1100

City WEST HOLLYWOOD State CA Zip Code 90069-3606

FEC ID number of contributing federal political committee. **C**

Name of Employer S.N.F. MANAGEMENT Occupation PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : SA11.3101942B

Amount of Each Receipt this Period **-1000.00**

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. LEE C. SAMSON**

Mailing Address 9200 W. SUNSET BLVD.  
SUITE 1100

City WEST HOLLYWOOD State CA Zip Code 90069-3606

FEC ID number of contributing federal political committee. **C**

Name of Employer S.N.F. MANAGEMENT Occupation PRESIDENT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3700.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : SA11.3102044

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... **2700.00**

**TOTAL** This Period (last page this line number only).....

201604140200097807

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 283 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DON P. SANDERS**

Mailing Address **17331 MASTERS POINTE CT**

City **BATON ROUGE** State **LA** Zip Code **70810-5917**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ORION INSTRUMENTS, LLC** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102146**

Amount of Each Receipt this Period **250.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**HEATHER SANDSTROM**

Mailing Address **3730 E. HUBER STREET**

City **MESA** State **AZ** Zip Code **85205-3901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **01 / 25 / 2016**  
Transaction ID : **SA11.3100763**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
**CONTRIBUTION**  
**IN-KIND: CATERING AND MUSIC**

**C.** Full Name (Last, First, Middle Initial)  
**MR. LEONARD SANDS**

Mailing Address **321 ST. PIERRE RD**

City **LOS ANGELES** State **CA** Zip Code **90077-3432**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CAPITAL BRANDS, LLC** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 30 / 2016**  
Transaction ID : **SA11.3101925**

Amount of Each Receipt this Period **2700.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **3950.00**

**TOTAL** This Period (last page this line number only).....

201604140200097808

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

**A.** Full Name (Last, First, Middle Initial)  
**DR. PAUL R. SANDSTROM**

Mailing Address **3730 E. HUBER STREET**

City **MESA** State **AZ** Zip Code **85205-3901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **DENTIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **01 / 25 / 2016**

Transaction ID : **SA11.3100762**

Amount of Each Receipt this Period **1000.00**

Memo Item  
**CONTRIBUTION**

**IN-KIND: CATERING & RENTALS**

**B.** Full Name (Last, First, Middle Initial)  
**JAN SAPERSTEIN**

Mailing Address **19 CONIFER CIRCLE**

City **ATLANTA** State **GA** Zip Code **30342-4303**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SEAM, INC.** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : **SA11.3100514**

Amount of Each Receipt this Period **250.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE A. SAWYER**

Mailing Address **404 NORTH UNION STREET  
SUITE 607**

City **ALEXANDRIA** State **VA** Zip Code **22314-2304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SAWYER WEEMS LLC** Occupation **EXECUTIVE CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : **SA11.3100443**

Amount of Each Receipt this Period **50.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **1300.00**

**TOTAL** This Period (last page this line number only).....

201604140200097809

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. GEORGE A. SAWYER**

Mailing Address **404 NORTH UNION STREET  
SUITE 607**

City **ALEXANDRIA** State **VA** Zip Code **22314-2304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SAWYER WEEMS LLC** Occupation **EXECUTIVE CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102187**

Amount of Each Receipt this Period **350.00**  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GARY SCARAMAZZO**

Mailing Address **4524 N 36TH PLACE**

City **PHOENIX** State **AZ** Zip Code **85018-3503**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GARY SCARAMAZZO & ASSOCIATES** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 03 / 2016**  
Transaction ID : **SA11.3101109**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. ELIZABETH ALDEN SCHACHER**

Mailing Address **3579 13TH ST NW #6**

City **WASHINGTON** State **DC** Zip Code **20010-2001**

FEC ID number of contributing federal political committee. **C**

Name of Employer **APOLLO EDUCATION GROUP** Occupation **LOBBYIST**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102698**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1375.00**

**TOTAL** This Period (last page this line number only).....

201604140200097810

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT J. SCHAFFER**

Mailing Address **5713 W. PINNACLE HILL DRIVE**

City **GLENDALE** State **AZ** Zip Code **85310-3632**

FEC ID number of contributing federal political committee. **C**

Name of Employer **USAA** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**02 / 23 / 2016**

Transaction ID : **SA11.3100796**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ABE SCHEAR**

Mailing Address **1011 NAWENCH DRIVE**

City **ATLANTA** State **GA** Zip Code **30327-1339**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ARNALL GOLDEN GREGORY** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100517**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL J. SCHEUNEMANN**

Mailing Address **206 ELK HIGHLANDS DRIVE**

City **WHITEFISH** State **MT** Zip Code **59937-8838**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ORION STRATEGIES** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102129**

Amount of Each Receipt this Period  
**1900.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2650.00**

20160414020097811

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL J. SCHEUNEMANN**

Mailing Address 206 ELK HIGHLANDS DRIVE

City WHITEFISH State MT Zip Code 59937-8838

FEC ID number of contributing federal political committee. **C**

Name of Employer ORION STRATEGIES Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102129B

Amount of Each Receipt this Period -1900.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MR. RANDALL J. SCHEUNEMANN**

Mailing Address 206 ELK HIGHLANDS DRIVE

City WHITEFISH State MT Zip Code 59937-8838

FEC ID number of contributing federal political committee. **C**

Name of Employer ORION STRATEGIES Occupation CONSULTANT

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3103005

Amount of Each Receipt this Period 1900.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS SCHICK**

Mailing Address 1110 EAST 22ND STREET

City BROOKLYN State NY Zip Code 11210-3620

FEC ID number of contributing federal political committee. **C**

Name of Employer NEW YORK UNIVERSITY Occupation EXEC IN RESIDENCE

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt 03 / 24 / 2016  
Transaction ID : SA11.3101669

Amount of Each Receipt this Period 2700.00  
 Memo Item  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 2700.00

**TOTAL** This Period (last page this line number only).....

201604140200097812

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 288 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>MR. JOHN E. SCHLANG</b>		Date of Receipt MM / DD / YYYY <b>02 / 03 / 2016</b>
Mailing Address <b>P.O. BOX 173</b>		Transaction ID : <b>SA11.3100219</b>
City <b>NORTHWOOD</b>	State <b>NH</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>60.00</b>
Name of Employer <b>SANBORN MILLS FARM</b>	Occupation <b>HORSE TRAINER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>295.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. WILLIAM SCHMUS</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>
Mailing Address <b>19755 KILLARNEY WAY</b>		Transaction ID : <b>SA11.3101222</b>
City <b>BROOKFIELD</b>	State <b>WI</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. PHILIP F. SCHNEIDER</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>
Mailing Address <b>5245 E. ARROYO ROAD</b>		Transaction ID : <b>SA11.3101298</b>
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>INVESTMENTS</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>660.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097813



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT G. SCHUCHARDT**

Mailing Address 2827 UNION STREET

City SAN FRANCISCO State CA Zip Code 94123-3809

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 03 / 2016**

Transaction ID : SA11.3101162

Amount of Each Receipt this Period  
**50.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JACK N. SCHULMAN**

Mailing Address 2 OLDE LANTERN CT

City MONTVALE State NJ Zip Code 07645-1014

FEC ID number of contributing federal political committee. **C**

Name of Employer KASOWITZ BENSON Occupation ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : SA11.3102785

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD H. SCHWARTZ**

Mailing Address 500 WEST MADISON STREET SUITE 270

City CHICAGO State IL Zip Code 60661-4568

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 03 / 2016**

Transaction ID : SA11.3101083

Amount of Each Receipt this Period  
**25.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**325.00**

201604140200097814

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 290 OF 590

(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY A. SCHWARTZ**

Mailing Address **8701 E. SAN FELIPE DRIVE**

City **SCOTTSDALE** State **AZ** Zip Code **85258-2626**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCHWARTZ GROUP** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099952**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY A. SCHWARTZ**

Mailing Address **8701 E. SAN FELIPE DRIVE**

City **SCOTTSDALE** State **AZ** Zip Code **85258-2626**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCHWARTZ GROUP** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **02 / 05 / 2016**

Transaction ID : **SA11.3099952B**

Amount of Each Receipt this Period **-2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY A. SCHWARTZ**

Mailing Address **8701 E. SAN FELIPE DRIVE**

City **SCOTTSDALE** State **AZ** Zip Code **85258-2626**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCHWARTZ GROUP** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **02 / 05 / 2016**

Transaction ID : **SA11.3100550**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... **2700.00**

**TOTAL** This Period (last page this line number only).....

201604140200097815

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 291 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL SCHWARZ</b>		Date of Receipt MM / DD / YYYY 02 / 10 / 2016	
Mailing Address 1134 SWATHMORE DRIVE N.E.		Transaction ID : SA11.3100669	
City ATLANTA    State GA    Zip Code 30327-3742	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee.    C	<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer SELF-EMPLOYED    Occupation PHOTOGRAPHER	Election Cycle-to-Date 250.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MR. LARRY W. SEAY</b>		Date of Receipt MM / DD / YYYY 01 / 27 / 2016	
Mailing Address 802 W. EL CAMINITO DRIVE		Transaction ID : SA11.3099971	
City PHOENIX    State AZ    Zip Code 85021-5538	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee.    C	<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer MERITAGE HOMES    Occupation ACCOUNTANT	Election Cycle-to-Date 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MR. MERTON J. SEGAL</b>		Date of Receipt MM / DD / YYYY 03 / 08 / 2016	
Mailing Address 2532 NW 59TH STREET		Transaction ID : SA11.3100902	
City BOCA RATON    State FL    Zip Code 33496-2223	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee.    C	<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer RETIRED    Occupation RETIRED	Election Cycle-to-Date 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097816

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 292 OF 590

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN HENRY SEITER**

Mailing Address **335 W BELLEVUE DR.**

City **PASADENA** State **CA** Zip Code **91105-1804**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1450.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101230**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MILLARD R. SELDIN**

Mailing Address **8160 N. HAYDEN ROAD STE. J208**

City **SCOTTSDALE** State **AZ** Zip Code **85258-4361**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELDIN REAL ESTATE, INC.** Occupation **CO-OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **02 / 24 / 2016**

Transaction ID : **SA11.3100815**

Amount of Each Receipt this Period **5000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. MILLARD R. SELDIN**

Mailing Address **8160 N. HAYDEN ROAD STE. J208**

City **SCOTTSDALE** State **AZ** Zip Code **85258-4361**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELDIN REAL ESTATE, INC.** Occupation **CO-OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **02 / 24 / 2016**

Transaction ID : **SA11.3100815B**

Amount of Each Receipt this Period **-2300.00**

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5100.00**

201604140200097817

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 293 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MILLARD R. SELDIN**

Mailing Address **8160 N. HAYDEN ROAD STE. J208**

City **SCOTTSDALE** State **AZ** Zip Code **85258-4361**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELDIN REAL ESTATE, INC.** Occupation **CO-OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **02 / 24 / 2016**  
Transaction ID : **SA11.3100886**

Amount of Each Receipt this Period **2300.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT A. SELDIN**

Mailing Address **8160 N. HAYDEN ROAD STE. J208**

City **SCOTTSDALE** State **AZ** Zip Code **85258-4361**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELDIN REAL ESTATE, INC.** Occupation **CO-OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **02 / 24 / 2016**  
Transaction ID : **SA11.3100816**

Amount of Each Receipt this Period **5000.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. SCOTT A. SELDIN**

Mailing Address **8160 N. HAYDEN ROAD STE. J208**

City **SCOTTSDALE** State **AZ** Zip Code **85258-4361**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELDIN REAL ESTATE, INC.** Occupation **CO-OWNER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **02 / 24 / 2016**  
Transaction ID : **SA11.3100816B**

Amount of Each Receipt this Period **-2300.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional)..... **5000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097818

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)		PAGE 294 OF 590	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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

Full Name (Last, First, Middle Initial) <b>MR. SCOTT A. SELDIN</b>		Date of Receipt MM / DD / YYYY 02 / 24 / 2016	
Mailing Address 8160 N. HAYDEN ROAD STE. J208		Transaction ID : SA11.3100888	
City SCOTTSDALE	State AZ	Zip Code 85258-4361	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C	Memo Item CONTRIBUTION REDESIGNATION FROM PRIMARY		
Name of Employer SELDIN REAL ESTATE, INC.	Occupation CO-OWNER	Election Cycle-to-Date 5000.00	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MRS. HILLA SFERRUZZA</b>		Date of Receipt MM / DD / YYYY 01 / 27 / 2016	
Mailing Address 5506 E. DUANE LANE		Transaction ID : SA11.3099995	
City CAVE CREEK	State AZ	Zip Code 85331-2236	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	Memo Item CONTRIBUTION		
Name of Employer MERITAGE HOMES CORP	Occupation SVP, CORP CONTROLLER	Election Cycle-to-Date 500.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>FRED SHAFTMAN</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2016	
Mailing Address 10 HIGHLAND VALLEY COURT		Transaction ID : SA11.3100533	
City ATLANTA	State GA	Zip Code 30327-4880	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C	Memo Item CONTRIBUTION		
Name of Employer RETIRED	Occupation RETIRED	Election Cycle-to-Date 1000.00	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097819

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 295 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. KATHLEEN M. SHANAHAN**

Mailing Address **2625 W. SUNSET DRIVE**

City **TAMPA** State **FL** Zip Code **33629-5340**

FEC ID number of contributing federal political committee. **C**

Name of Employer **URETEK HOLDINGS, INC.** Occupation **CHAIR & C.E.O.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 14 / 2016**  
Transaction ID : **SA11.3100919**

Amount of Each Receipt this Period **1000.00**  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. SHEILA K. SHAPIRO**

Mailing Address **1727 E. MYRTLE AVENUE**

City **PHOENIX** State **AZ** Zip Code **85020-5529**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNITED HEALTHCARE** Occupation **NATIONAL VICE PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 16 / 2016**  
Transaction ID : **SA11.3101318**

Amount of Each Receipt this Period **250.00**  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVENS K. SHEGRUD**

Mailing Address **P.O. BOX 11730**

City **ST THOMAS** State **VI** Zip Code **00801-4730**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PR/IUSVI HIDTA** Occupation **CONTRACTOR GS14 LEVEL**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102137**

Amount of Each Receipt this Period **100.00**  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1350.00**

**TOTAL** This Period (last page this line number only).....

201604140200097820

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT S. SHER**

Mailing Address 17800 ALUREL PARK DR. N. STE 200C

City LIVONIA State MI Zip Code 48152-3985

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 01 / 2016

Transaction ID : SA11.3100863

Amount of Each Receipt this Period  
 1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. VIRGINIA P. SHIELDS**

Mailing Address 6740 EPPING FOREST WAY N. #107

City JACKSONVILLE State FL Zip Code 32217-2676

FEC ID number of contributing federal political committee. **C**

Name of Employer COPYTRONICS INFORMATION SYSTEMS Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 800.00

Date of Receipt  
 MM / DD / YYYY  
 01 / 29 / 2016

Transaction ID : SA11.3100134

Amount of Each Receipt this Period  
 200.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. VIRGINIA P. SHIELDS**

Mailing Address 6740 EPPING FOREST WAY N. #107

City JACKSONVILLE State FL Zip Code 32217-2676

FEC ID number of contributing federal political committee. **C**

Name of Employer COPYTRONICS INFORMATION SYSTEMS Occupation EXECUTIVE

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 800.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 21 / 2016

Transaction ID : SA11.3101476

Amount of Each Receipt this Period  
 200.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 1400.00

**TOTAL** This Period (last page this line number only) .....

201604140200097821



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)	PAGE 297 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. JANE R. SHIFF**

Mailing Address **236 FOUNTAIN RD**

City **ENGLEWOOD** State **NJ** Zip Code **07631-4403**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 29 / 2016**

Transaction ID : **SA11.3101906**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN T. SIEFERT**

Mailing Address **5 GLEN CREEK LANE**

City **SAINT LOUIS** State **MO** Zip Code **63124-1505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RENAISSANCE FINANCIAL** Occupation **FINANCIAL ADVISOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**02 / 24 / 2016**

Transaction ID : **SA11.3100817**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BENJAMIN SILLINS**

Mailing Address **750 PARK AVENUE NE APT 35E**

City **ATLANTA** State **GA** Zip Code **30326-3276**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE BLASS GROUP, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100528**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

201604140200097822

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:		PAGE 298 OF 590	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. WILLIAM S. SIMON</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>	
Mailing Address <b>24 W. PINNACLE DR.</b>		Transaction ID : <b>SA11.3100524</b>	
City <b>ROGERS</b>	State <b>AR</b>	Zip Code <b>72758-8831</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>W.S.S. CONSULTING</b>	Occupation <b>CONSULTANT</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>4100.00</b>		
		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	

Full Name (Last, First, Middle Initial) <b>MRS. VIRGINIA SIMPSON</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>	
Mailing Address <b>6022 N. 51ST PLACE</b>		Transaction ID : <b>SA11.3101299</b>	
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253-5144</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		
		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	

Full Name (Last, First, Middle Initial) <b>MRS. MARINA I. SLAYTON</b>		Date of Receipt MM / DD / YYYY <b>03 / 16 / 2016</b>	
Mailing Address <b>480 MAIN STREET</b>		Transaction ID : <b>SA11.3101338</b>	
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10044-0412</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>HOMEMAKER</b>	Occupation <b>HOMEMAKER</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>		
		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097823

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 299 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. LYDIA B. SLOAN**

Mailing Address **2886 WAVERLEY STREET**

City **PALO ALTO** State **CA** Zip Code **94306-2442**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **420.00**

Date of Receipt  
**01 / 28 / 2016**

Transaction ID : **SA11.3100021**

Amount of Each Receipt this Period  
**25.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. LYDIA B. SLOAN**

Mailing Address **2886 WAVERLEY STREET**

City **PALO ALTO** State **CA** Zip Code **94306-2442**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **420.00**

Date of Receipt  
**03 / 21 / 2016**

Transaction ID : **SA11.3101408**

Amount of Each Receipt this Period  
**40.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. SHAWN H. SMEALLIE**

Mailing Address **1310 BISHOP LN**

City **ALEXANDRIA** State **VA** Zip Code **22302-3401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ACG ADVOCACY** Occupation **MANAGING DIRECTOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**03 / 07 / 2016**

Transaction ID : **SA11.3100876**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**565.00**

201604140200097824

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 300 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**BRAM SMITH**

Mailing Address **14 BROOK HILLS CIRCLE**

City **WHITE PLAINS** State **NY** Zip Code **10605-5004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LSTA** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102159**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**EDDIE C. SMITH**

Mailing Address **6374 E. AMBER SUN DR.**

City **SCOTTSDALE** State **AZ** Zip Code **85266-7223**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED - PRO BONO ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102597**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROWAN SMITH**

Mailing Address **232 E. LAS PALMARITAS DRIVE**

City **PHOENIX** State **AZ** Zip Code **85020-3467**

FEC ID number of contributing federal political committee. **C**

Name of Employer **QUARLES & BRADY** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099957**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **850.00**

**TOTAL** This Period (last page this line number only) .....

201604140200097825

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 301 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**COL ROWLAND D. SMITH JR. USAF (**

Mailing Address **685 S. LA POSADA CIRCLE  
UNIT 2001**

City **GREEN VALLEY** State **AZ** Zip Code **85614-5143**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
**03 / 21 / 2016**

Transaction ID : **SA11.3101494**

Amount of Each Receipt this Period  
**200.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SAMUEL SMITH**

Mailing Address **5155 BURNT PINE DR.**

City **CONWAY** State **AR** Zip Code **72034-7497**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102565**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LCDR GERALD R. SOBECK USN (RET)**

Mailing Address **1055 RIDGEMONT DR.**

City **MILPITAS** State **CA** Zip Code **95035-7838**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SONIC MANUFACTURING** Occupation **SENIOR QUALITY ENGINEER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102637**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**550.00**

201604140200097826

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 302 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL S. SOIMAR</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>		
Mailing Address <b>3670 HENRY STR.</b>			Transaction ID : <b>SA11.3100466</b>		
City <b>NORTON SHORES</b>	State <b>MI</b>	Zip Code <b>49441-4706</b>	Amount of Each Receipt this Period <b>50.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>MICOR TECHNOLOGIES</b>		Occupation <b>ENGINEERIING</b>	Election Cycle-to-Date <b>350.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL S. SOIMAR</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>		
Mailing Address <b>3670 HENRY STR.</b>			Transaction ID : <b>SA11.3101125</b>		
City <b>NORTON SHORES</b>	State <b>MI</b>	Zip Code <b>49441-4706</b>	Amount of Each Receipt this Period <b>50.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>MICOR TECHNOLOGIES</b>		Occupation <b>ENGINEERIING</b>	Election Cycle-to-Date <b>350.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL S. SOIMAR</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>3670 HENRY STR.</b>			Transaction ID : <b>SA11.3102178</b>		
City <b>NORTON SHORES</b>	State <b>MI</b>	Zip Code <b>49441-4706</b>	Amount of Each Receipt this Period <b>100.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>MICOR TECHNOLOGIES</b>		Occupation <b>ENGINEERIING</b>	Election Cycle-to-Date <b>350.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Recelpts This Page (optional).....	<b>200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097827

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MONROE SONNENBORN**

Mailing Address **79 WEST 12TH STREET**  
**14F**

City **NEW YORK** State **NY** Zip Code **10011-8565**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102096**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOHN D. SOURS**

Mailing Address **3171 PALISADES COURT SE**

City **MARIETTA** State **GA** Zip Code **30067-5130**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STATE OF GEORGIA** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099900**

Amount of Each Receipt this Period  
**50.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KAREN SPENCER**

Mailing Address **33304 N 71ST ST**

City **SCOTTSDALE** State **AZ** Zip Code **85266-7194**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102566**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**350.00**

20160414020097828

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 304 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRYAN R. SPERBER**

Mailing Address **6235 N. 31ST PLACE**

City **PHOENIX** State **AZ** Zip Code **85016-2337**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PHOENIX INTERNATIONAL RACEWAY** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101319**

Amount of Each Receipt this Period  
**500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DR. RICHARD M. SPIEGEL**

Mailing Address **5502 E. CALLE DEL NORTE**

City **PHOENIX** State **AZ** Zip Code **85018-4553**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FAMILY MENTAL HEALTH** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 21 / 2016**

Transaction ID : **SA11.3101447**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN SPIELMAN**

Mailing Address **4001 S. DECATUR BLVD #37445**

City **LAS VEGAS** State **NV** Zip Code **89103-5860**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JASMIN SOLAR** Occupation **C.E.O.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 30 / 2016**

Transaction ID : **SA11.3101935**

Amount of Each Receipt this Period  
**2700.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3450.00**

201604140200097829



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 305 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. NATHAN D. SPROUL**

Mailing Address **6152 W. VICTORIA PL**

City **CHANDLER** State **AZ** Zip Code **85226-1278**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LINCOLN STRATEGY GROUP** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **03 / 16 / 2016**  
Transaction ID : **SA11.3101309**

Amount of Each Receipt this Period **500.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. R. L. SPURGEON**

Mailing Address **1951 S. BEECH STREET**

City **WICHITA** State **KS** Zip Code **67207-6611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **01 / 29 / 2016**  
Transaction ID : **SA11.3100114**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. R. L. SPURGEON**

Mailing Address **1951 S. BEECH STREET**

City **WICHITA** State **KS** Zip Code **67207-6611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 28 / 2016**  
Transaction ID : **SA11.3101793**

Amount of Each Receipt this Period **25.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **550.00**

**TOTAL** This Period (last page this line number only).....

201604140200097830

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 306 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**K. R. SRIDHAR**

Mailing Address **150 FARM RD**

City **WOODSIDE** State **CA** Zip Code **94062-1239**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BLOOM ENERGY** Occupation **CEO**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 28 / 2016**

Transaction ID : **SA11.3101818**

Amount of Each Receipt this Period **1000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. ANNA K. STACHOWICZ**

Mailing Address **206 S. MICHIGAN AVENUE**

City **KENILWORTH** State **NJ** Zip Code **07033-1728**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt **02 / 10 / 2016**

Transaction ID : **SA11.3100606**

Amount of Each Receipt this Period **100.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD STADIN**

Mailing Address **969 PARK AVENUE APT 8F**

City **NEW YORK** State **NY** Zip Code **10028-0322**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 29 / 2016**

Transaction ID : **SA11.3101903**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **3800.00**

**TOTAL** This Period (last page this line number only).....

201604140200097831

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. JAMES PETER STAMAS</b>		Date of Receipt MM / DD / YYYY 01 / 27 / 2016
Mailing Address 6251 E. NISBET ROAD		Transaction ID : SA11.3099993
City SCOTTSDALE	State AZ	Zip Code 85254-2565
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer AMERICAN TITLE SERVICE AGENCY	Occupation PRESIDENT/OWNER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>MRS. SHARON B. STANFILL</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 43 HUCKLEBERRY HILL ROAD		Transaction ID : SA11.3102573
City LINCOLN	State MA	Zip Code 01773-3508
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2700.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2800.00	

Full Name (Last, First, Middle Initial) <b>COL. JOSEPH S. STANTON USAF (RET.)</b>		Date of Receipt MM / DD / YYYY 01 / 27 / 2016
Mailing Address 446 MOUND AVENUE		Transaction ID : SA11.3099939
City MIAMISBURG	State OH	Zip Code 45342-2962
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 645.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097832

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**COL. JOSEPH S. STANTON USAF (RET.)**

Mailing Address **446 MOUND AVENUE**

City **MIAMISBURG** State **OH** Zip Code **45342-2962**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **645.00**

Date of Receipt  
**01 / 27 / 2016**

Transaction ID : **SA11.3099945**

Amount of Each Receipt this Period  
**115.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. BRUCE R. STEFANY**

Mailing Address **24 SCHOOL STREET APT 6**

City **HANOVER** State **NH** Zip Code **03755-2052**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LEDYARD FINANCIAL** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102185**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. AVY H. STEIN**

Mailing Address **57 MAPLE HILL RD**

City **GLENCOE** State **IL** Zip Code **60022-1308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WILLIS STEIN & PARTNERS** Occupation **MANAGING PARTNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101732**

Amount of Each Receipt this Period  
**2500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **2865.00**

**TOTAL** This Period (last page this line number only).....

20160414020097833

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 309 OF 590

11a    11b    11c    11d  
 12    13a    13b    14    15

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MRS. ANDREA CRYSTAL STEWART-PRITCHETT</b>			Date of Receipt MM / DD / YYYY 03 / 16 / 2016		
Mailing Address 7016 E. SUNNYVALE ROAD			Transaction ID : SA11.3101324		
City PARADISE VALLEY	State AZ	Zip Code 85253-2322	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer EVENT SERVICES OF AMERICA		Occupation EVENT PLANNER	<input type="checkbox"/> Election Cycle-to-Date _____ 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. MICHAEL C. STINSON</b>			Date of Receipt MM / DD / YYYY 03 / 31 / 2016		
Mailing Address 1201 SHADY OAKS LANE			Transaction ID : SA11.3102215		
City FT WORTH	State TX	Zip Code 76107-3557	Amount of Each Receipt this Period _____ 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer SELF-EMPLOYED		Occupation INVESTMENTS	<input type="checkbox"/> Election Cycle-to-Date _____ 1500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MS. JANE C. STRAIN</b>			Date of Receipt MM / DD / YYYY 01 / 31 / 2016		
Mailing Address 1801 BELLA VISTA DR.			Transaction ID : SA11.3100473		
City SIERRA VISTA	State AZ	Zip Code 85635-2115	Amount of Each Receipt this Period _____ 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer U S ARMY		Occupation RETIRED	<input type="checkbox"/> Election Cycle-to-Date _____ 750.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					
<b>SUBTOTAL</b> of Receipts This Page (optional).....			_____ 1075.00		
<b>TOTAL</b> This Period (last page this line number only).....			_____		

201604140200097834

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)	PAGE 310 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MS. JANE C. STRAIN</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016
Mailing Address 1801 BELLA VISTA DR.		Transaction ID : SA11.3101244
City SIERRA VISTA	State AZ	Zip Code 85635-2115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 130.00
Name of Employer U S ARMY	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) <b>MS. JANE C. STRAIN</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1801 BELLA VISTA DR.		Transaction ID : SA11.3102588
City SIERRA VISTA	State AZ	Zip Code 85635-2115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
Name of Employer U S ARMY	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750.00	

Full Name (Last, First, Middle Initial) <b>MR. LUTHER M. STRAYER III</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016
Mailing Address 2 WILD LAUREL LANE		Transaction ID : SA11.3101216
City HILTON HEAD ISLAND	State SC	Zip Code 29926-2649
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	310.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097835

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 311 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN H. STREICKER**

Mailing Address **45 TRUMBULL AVE**

City **MILFORD** State **CT** Zip Code **06460-6461**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SENTINEL REAL ESTATE CORPORATION** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  

MM	DD	YYYY
03	29	2016

Transaction ID : **SA11.3101908**

Amount of Each Receipt this Period  

2000.00
---------

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ELIZABETH STRICKLIN**

Mailing Address **231 E DUNOON PL**

City **SHELTON** State **WA** Zip Code **98584-7505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  

MM	DD	YYYY
01	31	2016

Transaction ID : **SA11.3100497**

Amount of Each Receipt this Period  

100.00
--------

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELIZABETH STRICKLIN**

Mailing Address **231 E DUNOON PL**

City **SHELTON** State **WA** Zip Code **98584-7505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  

MM	DD	YYYY
03	03	2016

Transaction ID : **SA11.3101231**

Amount of Each Receipt this Period  

100.00
--------

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2200.00**

201604140200097836

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 OF 590
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. PREDRAG SUBOTIC**

Mailing Address **8662 MIDLAND PARKWAY**

City **JAMAICA** State **NY** Zip Code **11432-3042**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PROPERTY OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **340.00**

Date of Receipt  
**01 / 29 / 2016**

Transaction ID : **SA11.3100045**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. PREDRAG SUBOTIC**

Mailing Address **8662 MIDLAND PARKWAY**

City **JAMAICA** State **NY** Zip Code **11432-3042**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PROPERTY OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **340.00**

Date of Receipt  
**03 / 21 / 2016**

Transaction ID : **SA11.3101379**

Amount of Each Receipt this Period  
**25.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM A. SUERMANN**

Mailing Address **310 HELLERMAN STREET**

City **PHILADELPHIA** State **PA** Zip Code **19111-5212**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FEDERAL GOVERNMENT** Occupation **ACCOUNTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt  
**03 / 18 / 2016**

Transaction ID : **SA11.3101356**

Amount of Each Receipt this Period  
**30.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**80.00**

201604140200097837



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 313 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

Full Name (Last, First, Middle Initial) <b>MR. BURT SUGARMAN</b>			Date of Receipt MM / DD / YYYY <b>03 / 30 / 2016</b>	
Mailing Address <b>9440 SANTA MONICA BLVD 16TH FLOOR</b>			Transaction ID : <b>SA11.3101922</b>	
City <b>BEVERLY HILLS</b>	State <b>CA</b>	Zip Code <b>90210-4607</b>	Amount of Each Receipt this Period <b>2700.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>GIANT GROUP, LTD</b>		Occupation <b>CHAIRMAN</b>		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>2700.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. JAMES P. SULLER</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>4025 S. RIVERPOINT PKWY.</b>			Transaction ID : <b>SA11.3102741</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85040-0723</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>APOLLO EDUCATION GROUP</b>		Occupation <b>ACCOUNTING</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. JAMES T. SWANSON</b>			Date of Receipt MM / DD / YYYY <b>02 / 23 / 2016</b>	
Mailing Address <b>6903 E. MONTREAL PLACE</b>			Transaction ID : <b>SA11.3100772</b>	
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85254-2146</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>KITCHELL</b>		Occupation <b>EXECUTIVE</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

SUBTOTAL of Receipts This Page (optional).....			<b>3700.00</b>	
TOTAL This Period (last page this line number only).....				

20160414020097838

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 314 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES BENNETT SWIRE**

Mailing Address **4 MILL POND LN**

City **NEW ROCHELLE** State **NY** Zip Code **10805-2128**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **380.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099902**

Amount of Each Receipt this Period **25.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES BENNETT SWIRE**

Mailing Address **4 MILL POND LN**

City **NEW ROCHELLE** State **NY** Zip Code **10805-2128**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **380.00**

Date of Receipt **01 / 31 / 2016**

Transaction ID : **SA11.3100434**

Amount of Each Receipt this Period **35.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES BENNETT SWIRE**

Mailing Address **4 MILL POND LN**

City **NEW ROCHELLE** State **NY** Zip Code **10805-2128**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **380.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101122**

Amount of Each Receipt this Period **40.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **100.00**

**TOTAL** This Period (last page this line number only).....

201604140200097839

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 315 OF 590
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
		<input type="checkbox"/> 11d
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. JAMES BENNETT SWIRE</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>4 MILL POND LN</b>		Transaction ID : <b>SA11.3101383</b>
City <b>NEW ROCHELLE</b>	State <b>NY</b>	Zip Code <b>10805-2128</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>35.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>380.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. JAMES BENNETT SWIRE</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>4 MILL POND LN</b>		Transaction ID : <b>SA11.3102315</b>
City <b>NEW ROCHELLE</b>	State <b>NY</b>	Zip Code <b>10805-2128</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>195.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>380.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. STEVE SYMMS</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>517 C. STREET NE</b>		Transaction ID : <b>SA11.3101731</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20002-5809</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>PARRY, ROMANI, DE CONCINI &amp; SYMMS</b>	Occupation <b>PARTNER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>730.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097840

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 316 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

A. Full Name (Last, First, Middle Initial) <b>CAROL F. SZUL</b>			Date of Receipt MM / DD / YYYY <b>01 / 29 / 2016</b>	
Mailing Address <b>133 GRAF AVENUE</b>			Transaction ID : <b>SA11.3100061</b>	
City <b>LAWRENCE TOWNSHIP</b>	State <b>NJ</b>	Zip Code <b>08648-4317</b>	Amount of Each Receipt this Period <b>100.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>BROADRIDGE FINANCIAL SOLUTIONS</b>		Occupation <b>SENIOR EXECUTIVE SECRETARY</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>300.00</b>		

B. Full Name (Last, First, Middle Initial) <b>REBECCA TALLENT</b>			Date of Receipt MM / DD / YYYY <b>03 / 15 / 2016</b>	
Mailing Address <b>70 I STREET, SE, APT. 822</b>			Transaction ID : <b>SA11.3101282</b>	
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20003-4828</b>	Amount of Each Receipt this Period <b>500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>DROPBOX</b>		Occupation <b>GOVERNMENT AFFAIRS</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

C. Full Name (Last, First, Middle Initial) <b>H. RUSSELL TAUB</b>			Date of Receipt MM / DD / YYYY <b>03 / 10 / 2016</b>	
Mailing Address <b>50 ADELPHI AVE</b>			Transaction ID : <b>SA11.3100912</b>	
City <b>PROVIDENCE</b>	State <b>RI</b>	Zip Code <b>02906-4526</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Memo Item CONTRIBUTION <input type="checkbox"/>		
Name of Employer <b>SELF-EMPLOYED</b>		Occupation <b>CONSULTANT</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

SUBTOTAL of Receipts This Page (optional).....			<b>1600.00</b>	
TOTAL This Period (last page this line number only).....				

201604140200097841

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 317 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

Full Name (Last, First, Middle Initial)  
**MR. ROBERT S. TAUBMAN**

Mailing Address **200 E. LONG LAKE ROAD**

City State Zip Code  
**BLOOMFIELD HILLS MI 48304-**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**TAUBMAN COMPANY PRESIDENT & CEO**

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 01 / 2016**

Transaction ID : **SA11.3100848**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**LINDA TAVLARIOS**

Mailing Address **15 WRENFIELD LANE**

City State Zip Code  
**DARIEN CT 06820-2201**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**HOMEMAKER HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **2700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 25 / 2016**

Transaction ID : **SA11.3100823**

Amount of Each Receipt this Period  
**1700.00**

Memo Item CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MS. KARRIN KUNASEK TAYLOR**

Mailing Address **7600 E. DOUBLETREE RANCH ROAD SUITE 300**

City State Zip Code  
**SCOTTSDALE AZ 85258-2137**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**DMB ASSOCIATES EXECUTIVE V.P.**

Receipt For: 2016  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **1484.75**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 27 / 2016**

Transaction ID : **SA11.3099976**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **2950.00**  
**TOTAL** This Period (last page this line number only).....

201604140200097842

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 318 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**DR. PAUL E. TESCHAN**

Mailing Address **11 BURTON HILLS BLVD**  
**S-455**

City **NASHVILLE** State **TN** Zip Code **37215-6297**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **03 / 03 / 2016**  
Transaction ID : **SA11.3101217**

Amount of Each Receipt this Period **100.00**  
 Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**DR. PAUL E. TESCHAN**

Mailing Address **11 BURTON HILLS BLVD**  
**S-455**

City **NASHVILLE** State **TN** Zip Code **37215-6297**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **03 / 31 / 2016**  
Transaction ID : **SA11.3102552**

Amount of Each Receipt this Period **100.00**  
 Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAN W. THELANDER**

Mailing Address **922 EAST RANCH ROAD**

City **TEMPE** State **AZ** Zip Code **85284-3225**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TEMPE FARMING** Occupation **FARMER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **02 / 09 / 2016**  
Transaction ID : **SA11.3100590**

Amount of Each Receipt this Period **250.00**  
 Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional)..... **450.00**

**TOTAL** This Period (last page this line number only).....

201604140200097843

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 319 OF 590

11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRIAN D. THIESSEN**

Mailing Address 100 LOS BALCONES

City ALAMO State CA Zip Code 94507-2035

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt MM / DD / YYYY  
02 / 10 / 2016

Transaction ID : SA11.3100597

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. BRIAN D. THIESSEN**

Mailing Address 100 LOS BALCONES

City ALAMO State CA Zip Code 94507-2035

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102220

Amount of Each Receipt this Period 50.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. HARLAN H. THOMPSON**

Mailing Address 790 EAST COLORADO BLVD

City PASADENA State CA Zip Code 91101-2113

FEC ID number of contributing federal political committee. **C**

Name of Employer HOLLY STREET WEALTH Occupation MANAGING DIRECTOR

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt MM / DD / YYYY  
03 / 30 / 2016

Transaction ID : SA11.3101934

Amount of Each Receipt this Period 500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 650.00

**TOTAL** This Period (last page this line number only).....

201604140200097844

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

FOR LINE NUMBER: (check only one)	PAGE 320 OF 590
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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

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

**A.**

Full Name (Last, First, Middle Initial)  
**MR. WILLIAM J. TIERNEY II**

Mailing Address **638 E. ELGIN STREET**

City **GILBERT** State **AZ** Zip Code **85295-2076**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GOOD EARTH CAPITAL** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 16 / 2016**

Transaction ID : **SA11.3101323**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. JOHN W. TIMMONS**

Mailing Address **1730 RHODE ISLAND AVE NW  
SUITE 317**

City **WASHINGTON** State **DC** Zip Code **20036-3119**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE CORMAC GROUP, LLC** Occupation **LOBBYIST/CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 03 / 2016**

Transaction ID : **SA11.3101274**

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. JOHN W. TIMMONS**

Mailing Address **1730 RHODE ISLAND AVE NW  
SUITE 317**

City **WASHINGTON** State **DC** Zip Code **20036-3119**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE CORMAC GROUP, LLC** Occupation **LOBBYIST/CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 03 / 2016**

Transaction ID : **SA11.3101274B**

Amount of Each Receipt this Period **-2700.00**

Memo Item CONTRIBUTION  
**REDESIGNATION TO GENERAL**

**SUBTOTAL** of Receipts This Page (optional)..... **2950.00**

**TOTAL** This Period (last page this line number only).....

20160414020097845



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 321 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN W. TIMMONS**

Mailing Address **1730 RHODE ISLAND AVE NW  
SUITE 317**

City **WASHINGTON** State **DC** Zip Code **20036-3119**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE CORMAC GROUP, LLC** Occupation **LOBBYIST/CONSULTANT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 03 / 2016**

Transaction ID : **SA11.3101832**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**FARRO TOFIGHI**

Mailing Address **949 GRANGER FARM WAY**

City **LAS VEGAS** State **NV** Zip Code **89145-8619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DESIMONE CONSULTING ENGINEER** Occupation **MANAGING PRINCIPAL**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3101924**

Amount of Each Receipt this Period **1000.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. FRANK E. TOLBERT**

Mailing Address **2600 E. BROADWAY**

City **LOGANSPORT** State **IN** Zip Code **46947-2004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **465.00**

Date of Receipt **01 / 27 / 2016**

Transaction ID : **SA11.3099927**

Amount of Each Receipt this Period **25.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1025.00**

**TOTAL** This Period (last page this line number only).....

201604140200097846

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 322 OF 590		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MR. FRANK E. TOLBERT</b>		Date of Receipt MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>2600 E. BROADWAY</b>		Transaction ID : <b>SA11.3101402</b>
City <b>LOGANSPORT</b>	State <b>IN</b>	Zip Code <b>46947-2004</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>40.00</b>	
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>465.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. BRUCE E. TOLL</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>250 GIBRALTAR ROAD</b>		Transaction ID : <b>SA11.3102144</b>
City <b>HORSHAM</b>	State <b>PA</b>	Zip Code <b>19044-2323</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2700.00</b>	
Name of Employer <b>TOLL BROTHERS</b>	Occupation <b>DEVELOPER</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2700.00</b>	

Full Name (Last, First, Middle Initial) <b>ANTHONY TOPAZI</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>7341 KINGS MTN ROAD</b>		Transaction ID : <b>SA11.3102587</b>
City <b>VESTAVIA</b>	State <b>AL</b>	Zip Code <b>35242-2596</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer <b>SOUTHERN COMPANY</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>750.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2990.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097847

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>TIM TREANOR</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>		
Mailing Address <b>4030 DR. SAMUEL MUDD RD.</b>			Transaction ID : <b>SA11.3101247</b>		
City <b>WALDORF</b>	State <b>MD</b>	Zip Code <b>20601-4220</b>	Amount of Each Receipt this Period <b>200.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>US SMALL BUSINESS ADMINISTRATION</b>		Occupation <b>LAWYWER</b>	Election Cycle-to-Date <b>325.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>TIM TREANOR</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>4030 DR. SAMUEL MUDD RD.</b>			Transaction ID : <b>SA11.3102224</b>		
City <b>WALDORF</b>	State <b>MD</b>	Zip Code <b>20601-4220</b>	Amount of Each Receipt this Period <b>50.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>US SMALL BUSINESS ADMINISTRATION</b>		Occupation <b>LAWYWER</b>	Election Cycle-to-Date <b>325.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MS. MELANIE TRENT</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>8212 E. TORTUGA VIEW LN.</b>			Transaction ID : <b>SA11.3102744</b>		
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85266-1911</b>	Amount of Each Receipt this Period <b>5400.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>5400.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....			<b>5650.00</b>		
TOTAL This Period (last page this line number only).....					

20160414020097848

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 324 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>RAMIE TRITT</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>5362 HALLFORD DRIVE</b>		Transaction ID : <b>SA11.3100521</b>
City <b>DUNWOODY</b>	State <b>GA</b>	Zip Code <b>30338-3610</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>ATLANTA ENT</b>	Occupation <b>PHYSICIAN</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500.00</b>	

Full Name (Last, First, Middle Initial) <b>DR. TRUEMAN E. TRYHUS JR.</b>		Date of Receipt MM / DD / YYYY <b>01 / 29 / 2016</b>
Mailing Address <b>8623 CLUBHOUSE WAY</b>		Transaction ID : <b>SA11.3100067</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85255-4228</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>650.00</b>	

Full Name (Last, First, Middle Initial) <b>DR. TRUEMAN E. TRYHUS JR.</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>8623 CLUBHOUSE WAY</b>		Transaction ID : <b>SA11.3102554</b>
City <b>SCOTTSDALE</b>	State <b>AZ</b>	Zip Code <b>85255-4228</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>650.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097849

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 325 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ANDREA TUMIALAN**

Mailing Address **5713 N. SOLANO CIRCLE**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-5926**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 16 / 2016**

Transaction ID : **SA11.3101303**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JESS TYLER**

Mailing Address **P.O. BOX 4030**

City **COTTONWOOD** State **AZ** Zip Code **86326-2612**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100461**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT VAN HOFWEGEN**

Mailing Address **9801 W. BROADWAY RD**

City **TOLLESON** State **AZ** Zip Code **85353-9231**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DAIRYMAN** Occupation **OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 09 / 2016**

Transaction ID : **SA11.3100583**

Amount of Each Receipt this Period **500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1050.00**

**TOTAL** This Period (last page this line number only).....

201604140200097850

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 326 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN VAN HORN**

Mailing Address 1275 PICKETT ST.

City SONOMA State CA Zip Code 95476-7547

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation SELF-EMPLOYED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 550.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102633

Amount of Each Receipt this Period 550.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CECILIA S. VANDERHEIDE**

Mailing Address 1160 PARK AVENUE

City NEW YORK State NY Zip Code 10128-1212

FEC ID number of contributing federal political committee. **C**

Name of Employer GENEVA TRADING Occupation FINANCE

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt 03 / 24 / 2016  
Transaction ID : SA11.3101668

Amount of Each Receipt this Period 2000.00  
 Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. DOROTHY DYER VANEK**

Mailing Address 13500 N. RANCHO VISTOSO BLVD.  
APARTMENT 345

City TUCSON State AZ Zip Code 85755-5963

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 600.00

Date of Receipt 01 / 29 / 2016  
Transaction ID : SA11.3100086

Amount of Each Receipt this Period 200.00  
 Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 2750.00

**TOTAL** This Period (last page this line number only).....

201604140200097851

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 327 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. DOROTHY DYER VANEK**

Mailing Address 13500 N. RANCHO VISTOSO BLVD.  
APARTMENT 345

City TUCSON State AZ Zip Code 85755-5963

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 600.00

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2016

Transaction ID : SA11.3101779

Amount of Each Receipt this Period  
100.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL C. VARGAS**

Mailing Address 3247 E. ROMA AVE.

City PHOENIX State AZ Zip Code 85018-3919

FEC ID number of contributing federal political committee. **C**

Name of Employer PINNACLE WEST CAPITAL CORPORATION/A Occupation GOVERNMENT AFFAIRS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102196

Amount of Each Receipt this Period  
50.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GREGORY V. VAUGHAN**

Mailing Address 2725 SAND HILL ROAD STE. 100

City MENLO PARK State CA Zip Code 94025-7058

FEC ID number of contributing federal political committee. **C**

Name of Employer MORGAN STANLEY & COMPANY, INC. Occupation INVESTMENTS

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2016

Transaction ID : SA11.3101335

Amount of Each Receipt this Period  
2700.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

2850.00

20160414020097852

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 328 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID R. VICTOR**

Mailing Address **401 S. OLD WOODWARD AVENUE  
SUITE 333**

City **BIRMINGHAM** State **MI** Zip Code **48009-6612**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AEI** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 01 / 2016**

Transaction ID : **SA11.3100850**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROSS A. VOGT**

Mailing Address **4449 E. ENCINAS AVE.**

City **GILBERT** State **AZ** Zip Code **85234-7476**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WESTACO/TACO BELL** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102735**

Amount of Each Receipt this Period **250.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD VROMAN**

Mailing Address **2183 JOSHUA LANE**

City **SUFFOLK** State **VA** Zip Code **23434-7430**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **02 / 11 / 2016**

Transaction ID : **SA11.3100690**

Amount of Each Receipt this Period **50.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

201604140200097853



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. RICHARD VROMAN</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>		
Mailing Address <b>2183 JOSHUA LANE</b>			Transaction ID : <b>SA11.3102512</b>		
City <b>SUFFOLK</b>	State <b>VA</b>	Zip Code <b>23434-7430</b>	Amount of Each Receipt this Period <b>50.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>225.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MR. ROBERT H. WADSWORTH</b>			Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>		
Mailing Address <b>4101 E LAKESIDE LN</b>			Transaction ID : <b>SA11.3100499</b>		
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253-2826</b>	Amount of Each Receipt this Period <b>100.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>RETIRED</b>		Occupation <b>RETIRED</b>	Election Cycle-to-Date <b>2700.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MS. CHERYL H. WALDEN-KENNEDY</b>			Date of Receipt MM / DD / YYYY <b>01 / 27 / 2016</b>		
Mailing Address <b>6177 N. 29TH PL.</b>			Transaction ID : <b>SA11.3099992</b>		
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85016-2159</b>	Amount of Each Receipt this Period <b>500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>U.S. DEPARTMENT OF COMMERCE</b>		Occupation <b>SR. INTERNATIONAL TRADE SPECIALIST</b>	Election Cycle-to-Date <b>1000.00</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>650.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097854

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. FRANCES ANN WALKER**

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON State AZ Zip Code 85718-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA Occupation RETIRED CHEMISTRY PROFESSOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2195.00

Date of Receipt 01 / 31 / 2016  
 Transaction ID : SA11.3100501

Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. FRANCES ANN WALKER**

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON State AZ Zip Code 85718-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA Occupation RETIRED CHEMISTRY PROFESSOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2195.00

Date of Receipt 03 / 03 / 2016  
 Transaction ID : SA11.3101238

Amount of Each Receipt this Period 100.00  
 Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. FRANCES ANN WALKER**

Mailing Address 5920 N CAMINO PADRE ISIDORO

City TUCSON State AZ Zip Code 85718-4032

FEC ID number of contributing federal political committee. **C**

Name of Employer THE UNIVERSITY OF ARIZONA Occupation RETIRED CHEMISTRY PROFESSOR

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2195.00

Date of Receipt 03 / 31 / 2016  
 Transaction ID : SA11.3102603

Amount of Each Receipt this Period 175.00  
 Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 375.00

**TOTAL** This Period (last page this line number only).....

20160414020097855

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 331 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOE G. WALSH**

Mailing Address 1096 BEGIER

City SAN LEANDRO State CA Zip Code 94577-3024

FEC ID number of contributing federal political committee. **C**

Name of Employer GOLDEN GATE UNIVERSITY Occupation PROFESSOR OF TAXATION

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 700.00

Date of Receipt 03 / 03 / 2016

Transaction ID : SA11.3101208

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JOE G. WALSH**

Mailing Address 1096 BEGIER

City SAN LEANDRO State CA Zip Code 94577-3024

FEC ID number of contributing federal political committee. **C**

Name of Employer GOLDEN GATE UNIVERSITY Occupation PROFESSOR OF TAXATION

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 700.00

Date of Receipt 03 / 03 / 2016

Transaction ID : SA11.3101209

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOE G. WALSH**

Mailing Address 1096 BEGIER

City SAN LEANDRO State CA Zip Code 94577-3024

FEC ID number of contributing federal political committee. **C**

Name of Employer GOLDEN GATE UNIVERSITY Occupation PROFESSOR OF TAXATION

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 700.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA11.3102278

Amount of Each Receipt this Period 100.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 300.00

**TOTAL** This Period (last page this line number only).....

201604140200097856

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 332 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. ELIZABETH H. WANG**

Mailing Address **4393 ALLGOOD PLACE**

City **STONE MOUNTAIN** State **GA** Zip Code **30083-6138**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3101916**

Amount of Each Receipt this Period **25.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RODGER D. WASSERMAN**

Mailing Address **450 ALTON RD APT 1407**

City **MIAMI BEACH** State **FL** Zip Code **33139-6717**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 01 / 2016**

Transaction ID : **SA11.3100847**

Amount of Each Receipt this Period **250.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. CYNTHIA A. WATTS**

Mailing Address **5701 N. YUCCA ROAD**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-5254**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3103007**

Amount of Each Receipt this Period **200.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **475.00**

**TOTAL** This Period (last page this line number only).....

201604140200097857

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 333 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. CYNTHIA A. WATTS**

Mailing Address **5701 N. YUCCA ROAD**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-5254**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3103007B**

Amount of Each Receipt this Period  
**-100.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MRS. CYNTHIA A. WATTS**

Mailing Address **5701 N. YUCCA ROAD**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-5254**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3103011**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MIKE L. WATTS**

Mailing Address **5701 N. YUCCA ROAD**

City **PARADISE VALLEY** State **AZ** Zip Code **85253-5254**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SUNSTATE EQUIPMENT CO.** Occupation **BUSINESS OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3103008**

Amount of Each Receipt this Period  
**1800.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1800.00**

201604140200097858

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 334 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>MR. MIKE L. WATTS</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>5701 N. YUCCA ROAD</b>			Transaction ID : <b>SA11.3103008B</b>	
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253-5254</b>	Amount of Each Receipt this Period <b>-1800.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>SUNSTATE EQUIPMENT CO.</b>		Occupation <b>BUSINESS OWNER</b>	<b>REDESIGNATION TO GENERAL</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5400.00</b>		

Full Name (Last, First, Middle Initial) <b>MR. MIKE L. WATTS</b>			Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>5701 N. YUCCA ROAD</b>			Transaction ID : <b>SA11.3103009</b>	
City <b>PARADISE VALLEY</b>	State <b>AZ</b>	Zip Code <b>85253-5254</b>	Amount of Each Receipt this Period <b>1800.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>SUNSTATE EQUIPMENT CO.</b>		Occupation <b>BUSINESS OWNER</b>	<b>REDESIGNATION FROM PRIMARY</b>	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5400.00</b>		

Full Name (Last, First, Middle Initial) <b>MS. JOAN B. WEAVER</b>			Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>	
Mailing Address <b>P.O. BOX 5251</b>			Transaction ID : <b>SA11.3101180</b>	
City <b>BELMONT</b>	State <b>CA</b>	Zip Code <b>94002-5251</b>	Amount of Each Receipt this Period <b>50.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>	
Name of Employer <b>UNITED AIRLINES</b>		Occupation <b>RETIRED FLIGHT ATTENDANT</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>310.00</b>		

SUBTOTAL of Receipts This Page (optional).....			<b>50.00</b>	
TOTAL This Period (last page this line number only).....				

201604140200097859

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 335 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MS. JOAN B. WEAVER**

Mailing Address **P.O. BOX 5251**

City **BELMONT** State **CA** Zip Code **94002-5251**

FEC ID number of contributing federal political committee. **C**

Name of Employer **UNITED AIRLINES** Occupation **RETIRED FLIGHT ATTENDANT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **310.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102609**

Amount of Each Receipt this Period  
**50.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. VIN WEBER**

Mailing Address **7701 RIDGECREST DRIVE**

City **ALEXANDRIA** State **VA** Zip Code **22308-1052**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MERCURY** Occupation **LOBBYIST**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102227**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. LYNN H. WEIDNER**

Mailing Address **9711 ORIENT EXPRESS COURT**

City **LAS VEGAS** State **NV** Zip Code **89145-8702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MISS AMERICA, INC.** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**03 / 30 / 2016**

Transaction ID : **SA11.3101931**

Amount of Each Receipt this Period  
**5400.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6450.00**

201604140200097860

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 336 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. LYNN H. WEIDNER**

Mailing Address **9711 ORIENT EXPRESS COURT**

City **LAS VEGAS** State **NV** Zip Code **89145-8702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MISS AMERICA, INC.** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3101931B**

Amount of Each Receipt this Period **-2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**MRS. LYNN H. WEIDNER**

Mailing Address **9711 ORIENT EXPRESS COURT**

City **LAS VEGAS** State **NV** Zip Code **89145-8702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MISS AMERICA, INC.** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3102040**

Amount of Each Receipt this Period **2700.00**

Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM P. WEIDNER**

Mailing Address **9711 ORIENT EXPRESS COURT**

City **LAS VEGAS** State **NV** Zip Code **89145-8702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **LAS VEGAS SANDS, INCORPORATED** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 30 / 2016**

Transaction ID : **SA11.3101941**

Amount of Each Receipt this Period **5400.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **5400.00**

**TOTAL** This Period (last page this line number only) .....

201604140200097861



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 337 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM P. WEIDNER**

Mailing Address **9711 ORIENT EXPRESS COURT**

City <b>LAS VEGAS</b>	State <b>NV</b>	Zip Code <b>89145-8702</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>LAS VEGAS SANDS, INCORPORATED</b>	Occupation <b>PRESIDENT</b>
--	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 30 / 2016**

Transaction ID : **SA11.3101941B**

Amount of Each Receipt this Period  
**-2700.00**

Memo Item  
CONTRIBUTION

**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM P. WEIDNER**

Mailing Address **9711 ORIENT EXPRESS COURT**

City <b>LAS VEGAS</b>	State <b>NV</b>	Zip Code <b>89145-8702</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>LAS VEGAS SANDS, INCORPORATED</b>	Occupation <b>PRESIDENT</b>
--	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 30 / 2016**

Transaction ID : **SA11.3102038**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MR. S. EVAN WEINER**

Mailing Address **8800 DIX AVE**

City <b>DETROIT</b>	State <b>MI</b>	Zip Code <b>48209-1093</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>EDW. C. LEVY CO.</b>	Occupation <b>CORPORATE EXECUTIVE</b>
---	--

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 01 / 2016**

Transaction ID : **SA11.3100849**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

**500.00**

201604140200097862

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 338 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. ELIOT R. WEINSTEIN</b>		Date of Receipt MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>5328 W PENSACOLA AVE</b>		Transaction ID : <b>SA11.3100370</b>
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60641-1308</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>25.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>BUSINESS OWNER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>340.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. ELIOT R. WEINSTEIN</b>		Date of Receipt MM / DD / YYYY <b>03 / 03 / 2016</b>
Mailing Address <b>5328 W PENSACOLA AVE</b>		Transaction ID : <b>SA11.3100999</b>
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60641-1308</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>15.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>BUSINESS OWNER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>340.00</b>	

Full Name (Last, First, Middle Initial) <b>MR. ELIOT R. WEINSTEIN</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>5328 W PENSACOLA AVE</b>		Transaction ID : <b>SA11.3102108</b>
City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60641-1308</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>BUSINESS OWNER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>340.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>90.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097863

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 339 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MOSES WEITZMAN**

Mailing Address **15187 WEST GUNSIGHT DRIVE**

City **SUN CITY WEST** State **AZ** Zip Code **85375-2928**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 03 / 2016**

Transaction ID : **SA11.3101257**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN B. WERTHEIM**

Mailing Address **70 OLD STRATTON CHASE**

City **ATLANTA** State **GA** Zip Code **30328-3652**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RESURGENS** Occupation **M.D.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**01 / 31 / 2016**

Transaction ID : **SA11.3100530**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MS. DORTHEA WESTFALL**

Mailing Address **467 RETREAT LANE N.**

City **POWELL** State **OH** Zip Code **43065-7609**

FEC ID number of contributing federal political committee. **C**

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 16 / 2016**

Transaction ID : **SA11.3101327**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

20160414020097864

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 340 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. MRS. DIANE DOROTHEA WHITE</b>		Date of Receipt MM / DD / YYYY <b>02 / 10 / 2016</b>
Mailing Address <b>376 NASSAU AVENUE</b>		Transaction ID : <b>SA11.3100625</b>
City <b>MANHASSET</b>	State <b>NY</b>	Zip Code <b>11030-2046</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>20.00</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>240.00</b>	

Full Name (Last, First, Middle Initial) <b>B. MRS. DIANE DOROTHEA WHITE</b>		Date of Receipt MM / DD / YYYY <b>03 / 23 / 2016</b>
Mailing Address <b>376 NASSAU AVENUE</b>		Transaction ID : <b>SA11.3101631</b>
City <b>MANHASSET</b>	State <b>NY</b>	Zip Code <b>11030-2046</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>20.00</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>240.00</b>	

Full Name (Last, First, Middle Initial) <b>C. MRS. KATHERINE C. WHITEHOUSE</b>		Date of Receipt MM / DD / YYYY <b>01 / 14 / 2016</b>
Mailing Address <b>1912 EDNOR ROAD</b>		Transaction ID : <b>SA11.3099857</b>
City <b>SILVER SPRING</b>	State <b>MD</b>	Zip Code <b>20905-5132</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>150.00</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>450.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>190.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097865

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 341 OF 590

11a    11b    11c    11d  
 12    13a    13b    14    15

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

<b>A.</b> Full Name (Last, First, Middle Initial) MRS. MARGARET C. WHITMAN Mailing Address 24 EDGE ROAD City ATHERTON State CA Zip Code 94027-2226 FEC ID number of contributing federal political committee. C Name of Employer HEWLETT PACKARD ENTERPRISE Occupation CEO Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 5400.00			Date of Receipt MM / DD / YYYY 03 / 16 / 2016 Transaction ID : SA11.3101330 Amount of Each Receipt this Period 5400.00 <input type="checkbox"/> Memo Item CONTRIBUTION
<b>B.</b> Full Name (Last, First, Middle Initial) MRS. MARGARET C. WHITMAN Mailing Address 24 EDGE ROAD City ATHERTON State CA Zip Code 94027-2226 FEC ID number of contributing federal political committee. C Name of Employer HEWLETT PACKARD ENTERPRISE Occupation CEO Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 5400.00			Date of Receipt MM / DD / YYYY 03 / 16 / 2016 Transaction ID : SA11.3101330B Amount of Each Receipt this Period -2700.00 <input checked="" type="checkbox"/> Memo Item CONTRIBUTION REDESIGNATION TO GENERAL
<b>C.</b> Full Name (Last, First, Middle Initial) MRS. MARGARET C. WHITMAN Mailing Address 24 EDGE ROAD City ATHERTON State CA Zip Code 94027-2226 FEC ID number of contributing federal political committee. C Name of Employer HEWLETT PACKARD ENTERPRISE Occupation CEO Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 5400.00			Date of Receipt MM / DD / YYYY 03 / 16 / 2016 Transaction ID : SA11.3101883 Amount of Each Receipt this Period 2700.00 <input checked="" type="checkbox"/> Memo Item CONTRIBUTION REDESIGNATION FROM PRIMARY
<b>SUBTOTAL</b> of Receipts This Page (optional).....			5400.00
<b>TOTAL</b> This Period (last page this line number only).....			

201604140200097866

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 342 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MS. CANDACE WIEST**

Mailing Address 11212 QUINN DR.

City GOODYEAR State AZ Zip Code 85338-5325

FEC ID number of contributing federal political committee. **C**

Name of Employer WEST VALLEY NATIONAL BANK Occupation C.E.O.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 650.00

Date of Receipt  
MM / DD / YYYY  
02 / 23 / 2016

Transaction ID : SA11.3100793

Amount of Each Receipt this Period  
500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. DIANE WILLCOX**

Mailing Address 418 N. ORANGE AVENUE

City SANFORD State FL Zip Code 32771-8900

FEC ID number of contributing federal political committee. **C**

Name of Employer SEMINOLE OFFICE SOLUTIONS INC. Occupation OWNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102261

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SIDNEY LINN WILLIAMS**

Mailing Address 1526 POPLAR PLACE

City MC LEAN State VA Zip Code 22101-4155

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102571

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

201604140200097867

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 343 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. TIM WILLIAMS**

Mailing Address **3571 TODD DRIVE**

City **DOUGLASVILLE** State **GA** Zip Code **30135-2548**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GREYSTONE POWER CORPORATION** Occupation **VICE PRESIDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100536**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MS. MARILYN T. WILSON**

Mailing Address **463 W. FAIRWAY CIRCLE**

City **MESA** State **AZ** Zip Code **85201-2563**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **FORMER LONG TIME MESA SCHOOL BOAR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 31 / 2016**

Transaction ID : **SA11.3100479**

Amount of Each Receipt this Period **100.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. PETE WILSON**

Mailing Address **2132 CENTURY PARK LN**

City **LOS ANGELES** State **CA** Zip Code **90067-3307**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MORGAN, LEWIS & BOCKIUS LLP** Occupation **PRINCIPAL**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 30 / 2016**

Transaction ID : **SA11.3101930**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **2100.00**

**TOTAL** This Period (last page this line number only).....

20160414020097868

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 344 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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

Full Name (Last, First, Middle Initial) <b>MR. MARK WINKLEMAN</b>		Date of Receipt MM / DD / YYYY 03 / 16 / 2016
Mailing Address 7117 E. RANCHO VISTA DR. #3002		Transaction ID : SA11.3101302
City SCOTTSDALE	State AZ	Zip Code 85251-1356
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer MGS REALTY PARTNERS	Occupation REAL ESTATE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>MR. CHARLES R. WIRT</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016
Mailing Address 6175 NW 167 ST G35		Transaction ID : SA11.3101202
City MIAMI	State FL	Zip Code 33015-
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer SOUTHEAST INSURANCE CENTER	Occupation INSURANCE AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>MR. CHARLES R. WIRT</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 6175 NW 167 ST G35		Transaction ID : SA11.3102210
City MIAMI	State FL	Zip Code 33015-
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00	
Name of Employer SOUTHEAST INSURANCE CENTER	Occupation INSURANCE AGENT	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	550.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097869



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 345 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY J. WOOD**

Mailing Address 161 PRIMROSE WAY

City PALO ALTO State CA Zip Code 94303-3047

FEC ID number of contributing federal political committee. **C**

Name of Employer ROKU Occupation CEO/FOUNDER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 16 / 2016**

Transaction ID : SA11.3101331

Amount of Each Receipt this Period **5400.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY J. WOOD**

Mailing Address 161 PRIMROSE WAY

City PALO ALTO State CA Zip Code 94303-3047

FEC ID number of contributing federal political committee. **C**

Name of Employer ROKU Occupation CEO/FOUNDER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 16 / 2016**

Transaction ID : SA11.3101331B

Amount of Each Receipt this Period **-2700.00**

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY J. WOOD**

Mailing Address 161 PRIMROSE WAY

City PALO ALTO State CA Zip Code 94303-3047

FEC ID number of contributing federal political committee. **C**

Name of Employer ROKU Occupation CEO/FOUNDER

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 16 / 2016**

Transaction ID : SA11.3101885

Amount of Each Receipt this Period **2700.00**

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... **5400.00**

**TOTAL** This Period (last page this line number only).....

201604140200097870

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 346 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>A. CAPT. JOHN W. WOODY USNR (RET.)</b>			Date of Receipt MM / DD / YYYY 01 / 21 / 2016	
Mailing Address 2807 LOW OAK STREET			Transaction ID : SA11.3099882	
City	State	Zip Code	Amount of Each Receipt this Period	
SAN ANTONIO	TX	78232-1810	25.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item	
Name of Employer SELF-EMPLOYED			CONTRIBUTION	
Occupation CONSULTANT				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date	
			245.00	

Full Name (Last, First, Middle Initial) <b>B. CAPT. JOHN W. WOODY USNR (RET.)</b>			Date of Receipt MM / DD / YYYY 01 / 28 / 2016	
Mailing Address 2807 LOW OAK STREET			Transaction ID : SA11.3100015	
City	State	Zip Code	Amount of Each Receipt this Period	
SAN ANTONIO	TX	78232-1810	25.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item	
Name of Employer SELF-EMPLOYED			CONTRIBUTION	
Occupation CONSULTANT				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date	
			245.00	

Full Name (Last, First, Middle Initial) <b>C. MR. DAVID B. WRIGHT</b>			Date of Receipt MM / DD / YYYY 03 / 28 / 2016	
Mailing Address 293 STOCKBRIDGE AVE			Transaction ID : SA11.3101819	
City	State	Zip Code	Amount of Each Receipt this Period	
ATHERTON	CA	94027-5444	2700.00	
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item	
Name of Employer INNOVATIVE CAPITAL VENTURES			CONTRIBUTION	
Occupation MANAGING PARTNER				
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date	
			2700.00	

SUBTOTAL of Receipts This Page (optional).....			2750.00	
TOTAL This Period (last page this line number only).....				

201604140200097871

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 347 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.**

Full Name (Last, First, Middle Initial)  
**MR. GREG WUERTZ**

Mailing Address **12006 N. HAZELDINE ROAD**

City **CASA GRANDE** State **AZ** Zip Code **85194-9652**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **FARMER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 09 / 2016**

Transaction ID : **SA11.3100594**

Amount of Each Receipt this Period  
**1000.00**

Memo Item CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
**MR. ROMEO H. YACOB**

Mailing Address **5641 N. 79TH ST. #4**

City **SCOTTSDALE** State **AZ** Zip Code **85250-6545**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BABY BROTHER CORPORATION** Occupation **INDEPENDENT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 16 / 2016**

Transaction ID : **SA11.3101296**

Amount of Each Receipt this Period  
**250.00**

Memo Item CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
**MR. JOHN L. YOUNG**

Mailing Address **P.O. BOX 10846**

City **SPRINGFIELD** State **MO** Zip Code **65808-0846**

FEC ID number of contributing federal political committee. **C**

Name of Employer **C&M REALTY, INC.** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 03 / 2016**

Transaction ID : **SA11.3100256**

Amount of Each Receipt this Period  
**100.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1350.00**

**TOTAL** This Period (last page this line number only).....

201604140200097872

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 348 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. JOHN L. YOUNG</b>		Date of Receipt MM / DD / YYYY 03 / 22 / 2016
Mailing Address P.O. BOX 10846		Transaction ID : SA11.3101574
City SPRINGFIELD	State MO	Zip Code 65808-0846
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer C&M REALTY, INC.	Occupation REAL ESTATE DEVELOPER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) <b>MARK YOUNG</b>		Date of Receipt MM / DD / YYYY 03 / 03 / 2016
Mailing Address 2929 N CENTRAL AVE SUITE 1200		Transaction ID : SA11.3101271
City PHOENIX	State AZ	Zip Code 85012-2756
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer NATIONS BANK OF ARIZONA	Occupation PRESIDENT/CEO	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>MR. RICHARD W. ZAHN</b>		Date of Receipt MM / DD / YYYY 02 / 23 / 2016
Mailing Address 10040 EAST HAPPY VALLEY ROAD UNIT 601		Transaction ID : SA11.3100775
City SCOTTSDALE	State AZ	Zip Code 85255-2347
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer HMJ GLOBAL	Occupation DIRECTOR OF CORP GOVERNANCE	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097873

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 349 OF 590
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>A. CAPT. CARL J. ZAHNER USN (RET.)</b>		Date of Receipt MM / DD / YYYY 01 / 28 / 2016
Mailing Address 212 HAWK MEADOW DRIVE		Transaction ID : SA11.3100016
City TALLAHASSEE	State FL	Zip Code 32312-1552
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>B. TRACY L. ZAISS</b>		Date of Receipt MM / DD / YYYY 02 / 24 / 2016
Mailing Address 11626 NICHOLAS		Transaction ID : SA11.3100810
City OMAHA	State NE	Zip Code 68154-4411
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer ZAISS & COMPANY	Occupation CHIEF STRATEGY OFFICER	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. MR. ALAN ZEKELMAN</b>		Date of Receipt MM / DD / YYYY 03 / 30 / 2016
Mailing Address P.O. BOX 425		Transaction ID : SA11.3101940
City SARATOGA SPRINGS	State NY	Zip Code 12866-0425
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2050.00
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200097874

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 350 OF 590  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. SALVATORE F. ZICHICHI**

Mailing Address **214 WESTOVER RD**

City **STAMFORD** State **CT** Zip Code **06902-1927**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SASTLETON COMMODITIES INTERNATIONAL** Occupation **SENIOR MANAGING DIRECTOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**02 / 03 / 2016**

Transaction ID : **SA11.3100158**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**JACK LENGYEL CONSULTING, LLC**

Mailing Address **16821 W. ORACLE RIM DRIVE**

City **SURPRISE** State **AZ** Zip Code **85387-2834**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**03 / 24 / 2016**

Transaction ID : **SA11.3101666**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**CONTRIBUTION**

**ATTRIBUTION TO PARTNERS REQUESTED;  
PARTNERSHIP ATTRIBUTION REQUEST**

**C.** Full Name (Last, First, Middle Initial)  
**PASCUA YAQUI TRIBE**

Mailing Address **7474 SOUTH CAMINO DE OESTE**

City **TUCSON** State **AZ** Zip Code **85746-9308**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 07 / 2016**

Transaction ID : **SA11.3100875**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3800.00**

201604140200097875

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 351 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>NORPAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>PO BOX 1543</b>		Transaction ID : <b>SA11.3101740</b>
City <b>ENGLEWOOD CLIFFS</b>	State <b>NJ</b>	Zip Code <b>07632-0543</b>
FEC ID number of contributing federal political committee. <b>C C00247403</b>		Amount of Each Receipt this Period <b>68800.00</b>
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION SEE ATTRIBUTION BELOW
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>76800.00</b>	

Full Name (Last, First, Middle Initial) <b>DAPHNA ARAD</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>27 STONE TOWER DRIVE</b>		Transaction ID : <b>SA11.3101741</b>
City <b>ALPINE</b>	State <b>NJ</b>	Zip Code <b>07620-</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>HOMEMAKER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION EARMARKED FROM NORPAC
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	

Full Name (Last, First, Middle Initial) <b>KENNETH AUFIERO</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>7 CHILTON RD.</b>		Transaction ID : <b>SA11.3101742</b>
City <b>CHESTER</b>	State <b>NJ</b>	Zip Code <b>07930-3107</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>750.00</b>
Name of Employer <b>MOBLTY</b>	Occupation <b>EVP, SALES</b>	<input type="checkbox"/> Memo Item CONTRIBUTION EARMARKED FROM NORPAC
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>750.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097876

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 352 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.**

Full Name (Last, First, Middle Initial)  
**HOWARD BARUCH**

Mailing Address 130 DWIGHT PLACE

City State Zip Code  
ENGLEWOOD NJ 07631-3607

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED M.D.

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101743

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

EARMARKED FROM NORPAC

**B.**

Full Name (Last, First, Middle Initial)  
**MOSES BARUCH**

Mailing Address 318 STARLING RD

City State Zip Code  
ENGLEWOOD NJ 07631-4330

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101744

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

EARMARKED FROM NORPAC

**C.**

Full Name (Last, First, Middle Initial)  
**GABRIEL BOUSBIB**

Mailing Address 296 THORNTON RD

City State Zip Code  
ENGLEWOOD NJ 07631-1901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
AREL CAPITAL MANAGING PARTNER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101745

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

EARMARKED FROM NORPAC

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

201604140200097877



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 353 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>KERRY CARR</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2016	
Mailing Address 100 PARK AVENUE, 16/F		Transaction ID : SA11.3101746	
City NEW YORK	State NY	Zip Code 10017-5516	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00	
Name of Employer BACARDI BUSINESS SOLUTIONS	Occupation SENIOR VP		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		
		EARMARKED FROM NORPAC	

Full Name (Last, First, Middle Initial) <b>DR. BENJAMIN CHOUAKE</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2016	
Mailing Address 245 HUTCHINSON ROAD		Transaction ID : SA11.3101747	
City ENGLEWOOD	State NJ	Zip Code 07631-4406	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2700.00	
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		
		EARMARKED FROM NORPAC	

Full Name (Last, First, Middle Initial) <b>DR. BENJAMIN CHOUAKE</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2016	
Mailing Address 245 HUTCHINSON ROAD		Transaction ID : SA11.3101747_B	
City ENGLEWOOD	State NJ	Zip Code 07631-4406	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2300.00	
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		
		EARMARKED FROM NORPAC	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6500.00
<b>TOTAL</b> This Period (last page this line number only).....	6500.00

201604140200097878

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 354 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**JAMES COHEN**

Mailing Address **420 LEXINGTON AVE**

City **NEW YORK** State **NY** Zip Code **10170-0002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **BUSINESS**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **03 / 25 / 2016**

Transaction ID : **SA11.3101748**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION  
**EARMARKED FROM NORPAC**

**B.** Full Name (Last, First, Middle Initial)  
**SYLVIA FREYER**

Mailing Address **302 FOUNTAIN RD.**

City **ENGLEWOOD** State **NJ** Zip Code **07631-4403**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **03 / 25 / 2016**

Transaction ID : **SA11.3101749**

Amount of Each Receipt this Period **2000.00**

Memo Item CONTRIBUTION  
**EARMARKED FROM NORPAC**

**C.** Full Name (Last, First, Middle Initial)  
**KENNETH GARAY**

Mailing Address **55 FARVIEW RD**

City **TENAFLY** State **NJ** Zip Code **07670-2322**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **M.D.**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **03 / 25 / 2016**

Transaction ID : **SA11.3101750**

Amount of Each Receipt this Period **2000.00**

Memo Item CONTRIBUTION  
**EARMARKED FROM NORPAC**

**SUBTOTAL** of Receipts This Page (optional)..... **5000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097879

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 355 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>JOSEPH GONTOWNIK</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2016	
Mailing Address 9595 COLLINS AVE N-909		Transaction ID : SA11.3101751	
City SURFSIDE    State FL    Zip Code 33154-2618	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item CONTRIBUTION <b>EARMARKED FROM NORPAC</b>		
Name of Employer SELF-EMPLOYED    Occupation REAL ESTATE	Election Cycle-to-Date 500.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. JACK N. HALPERN</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2016	
Mailing Address 160 W. 66TH STREET APARTMENT 51A		Transaction ID : SA11.3101752	
City NEW YORK    State NY    Zip Code 10023-0073	Amount of Each Receipt this Period 2700.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item CONTRIBUTION <b>EARMARKED FROM NORPAC</b>		
Name of Employer SELF-EMPLOYED    Occupation REAL ESTATE	Election Cycle-to-Date 5000.00		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>MR. JACK N. HALPERN</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2016	
Mailing Address 160 W. 66TH STREET APARTMENT 51A		Transaction ID : SA11.3101752 B	
City NEW YORK    State NY    Zip Code 10023-0073	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Memo Item CONTRIBUTION <b>EARMARKED FROM NORPAC</b>		
Name of Employer SELF-EMPLOYED    Occupation REAL ESTATE	Election Cycle-to-Date 5000.00		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097880

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>ERIC HERSCHMANN</b>			Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>		
Mailing Address <b>102 HUGUENOT AVE</b>			Transaction ID : <b>SA11.3101753</b>		
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-4319</b>	Amount of Each Receipt this Period <b>2700.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>PENTSAO ADVISORS LLC</b>		Occupation <b>MANAGING PARTNER</b>	EARMARKED FROM NORPAC		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5000.00</b>			

Full Name (Last, First, Middle Initial) <b>ERIC HERSCHMANN</b>			Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>		
Mailing Address <b>102 HUGUENOT AVE</b>			Transaction ID : <b>SA11.3101753 B</b>		
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-4319</b>	Amount of Each Receipt this Period <b>2300.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>PENTSAO ADVISORS LLC</b>		Occupation <b>MANAGING PARTNER</b>	EARMARKED FROM NORPAC		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>5000.00</b>			

Full Name (Last, First, Middle Initial) <b>FREDERICK HOROWITZ</b>			Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>		
Mailing Address <b>180 SOUTH WOODLAND ST</b>			Transaction ID : <b>SA11.3101754</b>		
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3725</b>	Amount of Each Receipt this Period <b>1500.00</b>		
FEC ID number of contributing federal political committee. <b>C</b>			<input type="checkbox"/> Memo Item CONTRIBUTION		
Name of Employer <b>A.P. DEAUVILLE, LLC</b>		Occupation <b>CEO</b>	EARMARKED FROM NORPAC		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1500.00</b>			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020097881

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 357 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>DR. MONIQUE C. KATZ</b>		Date of Receipt <input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2016"/>	
Mailing Address <b>300 E. LINDEN AVENUE</b>		Transaction ID : <b>SA11.3101755</b>	
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3719</b>	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="2700.00"/>	
Name of Employer <b>COLUMBIA PRESBYTERIAN</b>	Occupation <b>PHYSICIAN</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="5400.00"/>		
		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>  <b>EARMARKED FROM NORPAC</b>	

Full Name (Last, First, Middle Initial) <b>DR. MONIQUE C. KATZ</b>		Date of Receipt <input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2016"/>	
Mailing Address <b>300 E. LINDEN AVENUE</b>		Transaction ID : <b>SA11.3101755 B</b>	
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3719</b>	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="2700.00"/>	
Name of Employer <b>COLUMBIA PRESBYTERIAN</b>	Occupation <b>PHYSICIAN</b>		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="5400.00"/>		
		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>  <b>EARMARKED FROM NORPAC</b>	

Full Name (Last, First, Middle Initial) <b>MR. MORDECAI D. KATZ</b>		Date of Receipt <input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2016"/>	
Mailing Address <b>300 E. LINDEN AVENUE</b>		Transaction ID : <b>SA11.3103012</b>	
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3719</b>	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="2700.00"/>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>ATTORNEY</b>		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="5400.00"/>		
		<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>  <b>EARMARKED FROM NORPAC</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="8100.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

201604140200097882

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 358 OF 590

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. MORDECAI D. KATZ**

Mailing Address **300 E. LINDEN AVENUE**

City **ENGLEWOOD** State **NJ** Zip Code **07631-3719**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 25 / 2016**

Transaction ID : **SA11.3103012\_B**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION  
**EARMARKED FROM NORPAC**

**B.** Full Name (Last, First, Middle Initial)  
**POONAM KHUBANI**

Mailing Address **55 CHESTNUT RIDGE RD**

City **SADDLE RIVER** State **NJ** Zip Code **07458-3310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TELEBRANDS** Occupation **VICE PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 25 / 2016**

Transaction ID : **SA11.3101757**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION  
**EARMARKED FROM NORPAC**

**C.** Full Name (Last, First, Middle Initial)  
**POONAM KHUBANI**

Mailing Address **55 CHESTNUT RIDGE RD**

City **SADDLE RIVER** State **NJ** Zip Code **07458-3310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TELEBRANDS** Occupation **VICE PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 25 / 2016**

Transaction ID : **SA11.3101757\_B**

Amount of Each Receipt this Period  
**2300.00**

Memo Item  
CONTRIBUTION  
**EARMARKED FROM NORPAC**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7700.00**

201604140200097883

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 359 OF 590	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>DAVID KRAMER</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>236 CHESTNUT ST</b>		Transaction ID : <b>SA11.3101758</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3134</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2000.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>REAL ESTATE</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	<b>EARMARKED FROM NORPAC</b>

Full Name (Last, First, Middle Initial) <b>KEVIN LEMMER</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>140 DOWNEY DRIVE</b>		Transaction ID : <b>SA11.3101759</b>
City <b>TEANECK</b>	State <b>NJ</b>	Zip Code <b>07666-</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>PENNANT CAPITAL MANAGEMENT</b>	Occupation <b>FINANCE</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	<b>EARMARKED FROM NORPAC</b>

Full Name (Last, First, Middle Initial) <b>JOSHUA ROVNER</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>132 LYCECKER AVE</b>		Transaction ID : <b>SA11.3101760</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2000.00</b>	
Name of Employer <b>PREMIER ORTHOPEDICS</b>	Occupation <b>M.D.</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	<b>EARMARKED FROM NORPAC</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097884

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 360 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**MARTIN SCHLAKMAN**

Mailing Address 200 LYMAN PLACE

City State Zip Code  
ENGLEWOOD NJ 07631-3609

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PSYCHIATRY ASSOC. PHYSICIAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101761

Amount of Each Receipt this Period  
250.00

Memo Item CONTRIBUTION

EARMARKED FROM NORPAC

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES SCHWALBE**

Mailing Address 320 WALNUT STREET

City State Zip Code  
ENGLEWOOD NJ 07631-3144

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101762

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

EARMARKED FROM NORPAC

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL STRAUS**

Mailing Address 42 LINCOLN STREET

City State Zip Code  
ENGLEWOOD NJ 07631-3117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CARE ONE, LLC CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101763

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

EARMARKED FROM NORPAC

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4750.00

201604140200097885



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 361 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>MARK SULTAN</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>116 LINCOLN ST</b>		Transaction ID : <b>SA11.3101764</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3117</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2700.00</b>
Name of Employer <b>BETH ISRAEL MEDICAL CENTER</b>	Occupation <b>SURGEON</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000.00</b>	<b>EARMARKED FROM NORPAC</b>

Full Name (Last, First, Middle Initial) <b>MARK SULTAN</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>116 LINCOLN ST</b>		Transaction ID : <b>SA11.3101764 B</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3117</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2300.00</b>
Name of Employer <b>BETH ISRAEL MEDICAL CENTER</b>	Occupation <b>SURGEON</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000.00</b>	<b>EARMARKED FROM NORPAC</b>

Full Name (Last, First, Middle Initial) <b>MR. ALLAN J. WEISS</b>		Date of Receipt MM / DD / YYYY <b>03 / 25 / 2016</b>
Mailing Address <b>377 WALNUT STREET</b>		Transaction ID : <b>SA11.3101765</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3124</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000.00</b>
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>INVESTOR</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	<b>EARMARKED FROM NORPAC</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097886

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 362 OF 590  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

**A.** Full Name (Last, First, Middle Initial)  
**STANLEY WEISS**

Mailing Address 2126 CONNECTICUT AVE, NW #5

City WASHINGTON State DC Zip Code 20008-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INV

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt 03 / 25 / 2016  
Transaction ID : SA11.3101766

Amount of Each Receipt this Period 2700.00

Memo Item CONTRIBUTION  
EARMARKED FROM NORPAC

**B.** Full Name (Last, First, Middle Initial)  
**STANLEY WEISS**

Mailing Address 2126 CONNECTICUT AVE, NW #5

City WASHINGTON State DC Zip Code 20008-1701

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation INV

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt 03 / 25 / 2016  
Transaction ID : SA11.3101766 B

Amount of Each Receipt this Period 2300.00

Memo Item CONTRIBUTION  
EARMARKED FROM NORPAC

**C.** Full Name (Last, First, Middle Initial)  
**NORPAC**

Mailing Address PO BOX 1543

City ENGLEWOOD CLIFFS State NJ Zip Code 07632-0543

FEC ID number of contributing federal political committee. **C** C00247403

Name of Employer Occupation

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 76800.00

Date of Receipt 03 / 25 / 2016  
Transaction ID : SA11.3101767

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION  
SEE ATTRIBUTION BELOW

**SUBTOTAL** of Receipts This Page (optional)..... 5000.00

**TOTAL** This Period (last page this line number only).....

20160414020097887

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 363 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. PAUL F. BALSER**

Mailing Address **420 LEXINGTON AVENUE  
#2650**

City **NEW YORK** State **NY** Zip Code **10170-2699**

FEC ID number of contributing federal political committee. **C**

Name of Employer **IRONWOOD PARTNERS LLC** Occupation **PARTNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101768**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION  
EARMARKED FROM NORPAC

**B.** Full Name (Last, First, Middle Initial)  
**NORPAC**

Mailing Address **PO BOX 1543**

City **ENGLEWOOD CLIFFS** State **NJ** Zip Code **07632-0543**

FEC ID number of contributing federal political committee. **C C00247403**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **76800.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102794**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION  
SEE ATTRIBUTION BELOW

**C.** Full Name (Last, First, Middle Initial)  
**MR. DWIGHT D. SIPPRELLE**

Mailing Address **155 LINCOLN ST**

City **ENGLEWOOD** State **NJ** Zip Code **07631-3120**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SIPPRELLE CAPITAL ADVISORS** Occupation **FINANCE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102795**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION  
EARMARKED FROM NORPAC

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

201604140200097888

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 364 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>NORPAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>PO BOX 1543</b>		Transaction ID : <b>SA11.3102796</b>
City <b>ENGLEWOOD CLIFFS</b>	State <b>NJ</b>	Zip Code <b>07632-0543</b>
FEC ID number of contributing federal political committee. <b>C C00247403</b>	Amount of Each Receipt this Period <b>6000.00</b>	
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>76800.00</b>	<b>SEE ATTRIBUTION BELOW</b>

Full Name (Last, First, Middle Initial) <b>ROBERT KOHLHAGEN</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>124 DWIGHT PL.</b>		Transaction ID : <b>SA11.3102797</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3607</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>SELF</b>	Occupation <b>CPA</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	<b>EARMARKED FROM NORPAC</b>

Full Name (Last, First, Middle Initial) <b>SAMUEL MOED</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>54 DANA PL</b>		Transaction ID : <b>SA11.3102798</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-3601</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer <b>BRISTOL MYERS SQUIBB</b>	Occupation <b>EXECUTIVE</b>	<input type="checkbox"/> Memo Item <b>CONTRIBUTION</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	<b>EARMARKED FROM NORPAC</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097889

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 365 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>ADAM SASOUNESS</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>250 W 55TH ST, 30TH FLOOR</b>		Transaction ID : <b>SA11.3102799</b>
City <b>NEW YORK</b>	State <b>NY</b>	Zip Code <b>10019-9710</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2000.00</b>	
Name of Employer <b>DWIGHT CAPITAL, LLC</b>	Occupation <b>MANAGING PRINCIPAL</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	<b>EARMARKED FROM NORPAC</b>

Full Name (Last, First, Middle Initial) <b>SOFIA SASOUNESS</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>321 N WOODLAND ST.</b>		Transaction ID : <b>SA11.3102800</b>
City <b>ENGLEWOOD</b>	State <b>NJ</b>	Zip Code <b>07631-2032</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2000.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>HOMEMAKER</b>	<input type="checkbox"/> Memo Item CONTRIBUTION
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000.00</b>	<b>EARMARKED FROM NORPAC</b>

Full Name (Last, First, Middle Initial)		Date of Receipt MM / DD / YYYY
Mailing Address		
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>714447.08</b>

201604140200097890

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 366 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**AAOS PAC**

Mailing Address **317 MASSACHUSETTS AVENUE NE**

City **WASHINGTON** State **DC** Zip Code **20002-5769**

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 08 / 2016**

Transaction ID : **SA11.3100896**

Amount of Each Receipt this Period **5000.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ACADEMY OF NUTRITION AND DIETETICS PAC**

Mailing Address **1120 CONNECTICUT AVE NW #480**

City **WASHINGTON** State **DC** Zip Code **20036-3989**

FEC ID number of contributing federal political committee. **C C00540310**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 12 / 2016**

Transaction ID : **SA11.3100697**

Amount of Each Receipt this Period **500.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AEROJET ROCKETDYNE & GENCORP PAC**

Mailing Address **P.O. BOX 13222**

City **SACRAMENTO** State **CA** Zip Code **95813-3222**

FEC ID number of contributing federal political committee. **C C00129122**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 26 / 2016**

Transaction ID : **SA11.3100829**

Amount of Each Receipt this Period **1000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **6500.00**

**TOTAL** This Period (last page this line number only).....

201604140200097891

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 367 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**AFLAC INC. PAC**

Mailing Address 1932 WYNNTON ROAD

City State Zip Code  
COLUMBUS GA 31999-0001

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 08 / 2016

Transaction ID : SA11.3099846

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AKERMAN, LLP PAC**

Mailing Address 495 N. KELLER ROAD STE 300

City State Zip Code  
MAITLAND FL 32751-8656

FEC ID number of contributing federal political committee. **C** C00280008

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2016

Transaction ID : SA11.3101923

Amount of Each Receipt this Period  
1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN ASSOCIATION OF NURSE ANESTHETISTS (CRNA-PAC)**

Mailing Address 25 MASSACHUSETTS AVENUE N.W.  
SUITE 550

City State Zip Code  
WASHINGTON DC 20001-1408

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
MM / DD / YYYY  
02 / 19 / 2016

Transaction ID : SA11.3100744

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

8500.00

201604140200097892

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 368 OF 590

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVENUE NW

City WASHINGTON State DC Zip Code 20036-3902

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 8000.00

Date of Receipt 01 / 27 / 2016

Transaction ID : SA11.3099949

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**AOPA PAC**

Mailing Address 421 AVIATION WAY

City FREDERICK State MD Zip Code 21701-4756

FEC ID number of contributing federal political committee. **C** C00131185

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt 03 / 25 / 2016

Transaction ID : SA11.3101735

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**APOLLO GROUP INC. POLITICAL ORG. FOR LEGISLATIVE LEADERSHIP**

Mailing Address 4025 S. RIVERPOINT PKWY

City PHOENIX State AZ Zip Code 85040-0723

FEC ID number of contributing federal political committee. **C** C00309781

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 03 / 14 / 2016

Transaction ID : SA11.3100928

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 7000.00

**TOTAL** This Period (last page this line number only).....

201604140200097893



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 369 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**APOLLO GROUP INC. POLITICAL ORG. FOR LEGISLATIVE LEADERSHIP**

Mailing Address **4025 S. RIVERPOINT PKWY**

City **PHOENIX** State **AZ** Zip Code **85040-0723**

FEC ID number of contributing federal political committee. **C C00309781**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102074**

Amount of Each Receipt this Period  
**5000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ARDA ROC-PAC**

Mailing Address **1201 15TH STREET NW SUITE 400**

City **WASHINGTON** State **DC** Zip Code **20005-**

FEC ID number of contributing federal political committee. **C C00358663**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000.00**

Date of Receipt  
**03 / 17 / 2016**

Transaction ID : **SA11.3101345**

Amount of Each Receipt this Period  
**5000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ARDA ROC-PAC**

Mailing Address **1201 15TH STREET NW SUITE 400**

City **WASHINGTON** State **DC** Zip Code **20005-**

FEC ID number of contributing federal political committee. **C C00358663**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000.00**

Date of Receipt  
**03 / 17 / 2016**

Transaction ID : **SA11.3101348**

Amount of Each Receipt this Period  
**5000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **15000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097894

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 370 OF 590			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**ARKANSAS FOR LEADERSHIP PAC**

Mailing Address P.O. BOX 1672

City: ALEXANDRIA State: VA Zip Code: 22313-1672

FEC ID number of contributing federal political committee: **C** C00413948

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 03 / 31 / 2016

Transaction ID : SA11.3101954

Amount of Each Receipt this Period: 2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ASSOCIATED BUILDERS & CONTRACTORS PAC**

Mailing Address 440 FIRST STRET NW 2ND FLOOR

City: WASHINGTON State: DC Zip Code: 20001-2028

FEC ID number of contributing federal political committee: **C** C00010421

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5000.00

Date of Receipt: 03 / 31 / 2016

Transaction ID : SA11.3102712

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ATLAS AIR WORLDWIDE HOLDINGS, INC. PAC**

Mailing Address 2000 WESTCHESTER AVENUE

City: PURCHASE State: NY Zip Code: 10577-2530

FEC ID number of contributing federal political committee: **C** C00478099

Name of Employer: Occupation:

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 10000.00

Date of Receipt: 03 / 25 / 2016

Transaction ID : SA11.3101737

Amount of Each Receipt this Period: 5000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

12500.00

20160414020097895

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 371 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
ATLAS AIR WORLDWIDE HOLDINGS, INC. PAC

Mailing Address 2000 WESTCHESTER AVENUE

City PURCHASE State NY Zip Code 10577-2530

FEC ID number of contributing federal political committee.  C00478099

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 03 / 25 / 2016  
Transaction ID : SA11.3101737B

Amount of Each Receipt this Period -5000.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
ATLAS AIR WORLDWIDE HOLDINGS, INC. PAC

Mailing Address 2000 WESTCHESTER AVENUE

City PURCHASE State NY Zip Code 10577-2530

FEC ID number of contributing federal political committee.  C00478099

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 03 / 25 / 2016  
Transaction ID : SA11.3102051

Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 PRINCE STREET  
SUITE 225

City ALEXANDRIA State VA Zip Code 22314-2882

FEC ID number of contributing federal political committee.  C00250399

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 03 / 16 / 2016  
Transaction ID : SA11.3101291

Amount of Each Receipt this Period 5000.00  
 Memo Item  
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... 5000.00

TOTAL This Period (last page this line number only).....

201604140200097896

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 372 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**BOSTON SCIENTIFIC CORPORATION PAC**

Mailing Address **300 BOSTON SCIENTIFIC PLACE**

City **MARLBOROUGH** State **MA** Zip Code **01752-1291**

FEC ID number of contributing federal political committee. **C C00357863**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2000.00**

Date of Receipt  
**03 / 25 / 2016**

Transaction ID : **SA11.3101736**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**BRIDGEPOINT EDUCATION INC. PAC**

Mailing Address **13500 EVENING CREEK DRIVE N.  
SUITE 600**

City **SAN DIEGO** State **CA** Zip Code **92128-8125**

FEC ID number of contributing federal political committee. **C C00478404**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000.00**

Date of Receipt  
**03 / 17 / 2016**

Transaction ID : **SA11.3101350**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**BRIDGEPOINT EDUCATION INC. PAC**

Mailing Address **13500 EVENING CREEK DRIVE N.  
SUITE 600**

City **SAN DIEGO** State **CA** Zip Code **92128-8125**

FEC ID number of contributing federal political committee. **C C00478404**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2016  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA11.3102069**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4000.00**

201604140200097897

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 373 OF 590

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**BRINKER INTERNATIONAL, INC. PAC**

Mailing Address **6820 LBJ FREEWAY**

City **DALLAS** State **TX** Zip Code **75240-6511**

FEC ID number of contributing federal political committee. **C C00241851**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **02 / 19 / 2016**

Transaction ID : **SA11.3100747**

Amount of Each Receipt this Period **2500.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BROWNSTEIN HYATT FARBER SCHRECK PAC**

Mailing Address **410 17TH ST., STE. 2200**

City **DENVER** State **CO** Zip Code **80202-4432**

FEC ID number of contributing federal political committee. **C C00390583**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt **03 / 16 / 2016**

Transaction ID : **SA11.3101292**

Amount of Each Receipt this Period **5000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CHARTER COMMUNICATIONS, INC. PAC**

Mailing Address **400 ATLANTIC STREET, 10TH FLOOR**

City **STAMFORD** State **CT** Zip Code **06901-3512**

FEC ID number of contributing federal political committee. **C C00426775**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102076**

Amount of Each Receipt this Period **2500.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**10000.00**

201604140200097898

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

11a  11b  11c  11d

12  13a  13b  14  15

PAGE 374 OF 590

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

**A.** Full Name (Last, First, Middle Initial)  
**CHEVRON EMPLOYEES PAC**

Mailing Address P.O. BOX 6016

City SAN RAMON State CA Zip Code 94583-0716

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2016

Transaction ID : SA11.3101344

Amount of Each Receipt this Period  
2500.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CHICAGO BRIDGE & IRON COMPANY PAC**

Mailing Address 1050 K ST NW

City WASHINGTON State DC Zip Code 20001-4417

FEC ID number of contributing federal political committee. **C** C00104885

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
MM / DD / YYYY  
02 / 12 / 2016

Transaction ID : SA11.3100695

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**COLLEGE OF AMERICAN PATHOLOGISTS PAC (PATHPAC)**

Mailing Address 1350 I. STREET NW SUITE 590

City WASHINGTON State DC Zip Code 20005-3305

FEC ID number of contributing federal political committee. **C** C00274944

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt  
MM / DD / YYYY  
02 / 12 / 2016

Transaction ID : SA11.3100694

Amount of Each Receipt this Period  
1500.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

201604140200097899

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 375 OF 590

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**COMCAST CORPORATION PAC**

Mailing Address 1701 J.F.K. BLVD.  
**ONE COMCAST CENTER**

City PHILADELPHIA State PA Zip Code 19103-2838

FEC ID number of contributing federal political committee. **C C00248716**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : SA11.3102067

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COMMITTEE FOR THE PRESERVATON OF CAPITALISM**

Mailing Address P.O. BOX 65314

City WASHINGTON State DC Zip Code 20035-5314

FEC ID number of contributing federal political committee. **C C00328468**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 01 / 2016**

Transaction ID : SA11.3100842

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CRACKER BARREL PAC**

Mailing Address P.O. BOX 787

City LEBANON State TN Zip Code 37088-0787

FEC ID number of contributing federal political committee. **C C00252791**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 02 / 2016**

Transaction ID : SA11.3100139

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5200.00**

201604140200097900

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 376 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**CSX CORPORATION GOOD GOVERNMENT FUND**

Mailing Address 1331 PENNSYLVANIA AVE. NW  
SUITE 560

City WASHINGTON State DC Zip Code 20004-1745

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 17 / 2016

Transaction ID : SA11.3101343

Amount of Each Receipt this Period  
 5000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DEVRY PAC**

Mailing Address 3005 HIGHLAND PKWY.

City DOWNERS GROVE State IL Zip Code 60515-5682

FEC ID number of contributing federal political committee. **C** C00198606

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 14 / 2016

Transaction ID : SA11.3100930

Amount of Each Receipt this Period  
 2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DHL PAC**

Mailing Address 1667 K. STREET N.W.  
SUITE 410

City WASHINGTON State DC Zip Code 20006-1653

FEC ID number of contributing federal political committee. **C** C00417915

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 MM / DD / YYYY  
 02 / 05 / 2016

Transaction ID : SA11.3100554

Amount of Each Receipt this Period  
 3000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

10500.00

201604140200097901



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 377 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**DLA PIPER PAC**

Mailing Address 500 8TH STREET NW STE. 700

City WASHINGTON State DC Zip Code 20004-2131

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt 12 / 31 / 2015  
Transaction ID : SA11.3099587

Amount of Each Receipt this Period 1000.00  
 Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DLA PIPER PAC**

Mailing Address 500 8TH STREET NW STE. 700

City WASHINGTON State DC Zip Code 20004-2131

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt 02 / 22 / 2016  
Transaction ID : SA11.3099587B

Amount of Each Receipt this Period -1000.00  
 Memo Item  
CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**DLA PIPER PAC**

Mailing Address 500 8TH STREET NW STE. 700

City WASHINGTON State DC Zip Code 20004-2131

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt 02 / 22 / 2016  
Transaction ID : SA11.3100759

Amount of Each Receipt this Period 1000.00  
 Memo Item  
CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

201604140200097902

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 378 OF 590			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>DOMINION PAC</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2016	
Mailing Address P.O. BOX 26666 <b>ONE JAMES RIVER PLAZA 20TH FLOOR</b>		Transaction ID : SA11.3101347	
City RICHMOND	State VA	Zip Code 23261-6666	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00108209		Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 6000.00	
		REDESIGNATION REQUESTED	

Full Name (Last, First, Middle Initial) <b>DTE ENERGY COMPANY PAC - FEDERAL</b>		Date of Receipt MM / DD / YYYY 11 / 17 / 2015	
Mailing Address ONE ENERGY PLAZA		Transaction ID : SA11.3098546	
City DETROIT	State MI	Zip Code 48226-1221	Amount of Each Receipt this Period 8500.00
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00081547		Amount of Each Receipt this Period 8500.00	
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10000.00	

Full Name (Last, First, Middle Initial) <b>DTE ENERGY COMPANY PAC - FEDERAL</b>		Date of Receipt MM / DD / YYYY 01 / 12 / 2016	
Mailing Address ONE ENERGY PLAZA		Transaction ID : SA11.3098546B	
City DETROIT	State MI	Zip Code 48226-1221	Amount of Each Receipt this Period -5000.00
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00081547		Amount of Each Receipt this Period -5000.00	
Name of Employer	Occupation	<input checked="" type="checkbox"/> Memo Item CONTRIBUTION	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10000.00	
		REDESIGNATION TO GENERAL	

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

201604140200097903

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**DTE ENERGY COMPANY PAC - FEDERAL**

Mailing Address **ONE ENERGY PLAZA**

City **DETROIT** State **MI** Zip Code **48226-1221**

FEC ID number of contributing federal political committee. **C C00081547**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
**01 / 12 / 2016**

Transaction ID : **SA11.3100541**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

**REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**DUKE ENERGY CORPORATION PAC**

Mailing Address **550 S. TRYON STREET**  
**#DEC37D**

City **CHARLOTTE** State **NC** Zip Code **28202-4200**

FEC ID number of contributing federal political committee. **C C00083535**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
**03 / 28 / 2016**

Transaction ID : **SA11.3101805**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**EDUCATION MANAGEMENT CORP. EMPLOYEE PAC**

Mailing Address **210 SIXTH AVE 33RD FLR.**

City **PITTSBURGH** State **PA** Zip Code **15222-2602**

FEC ID number of contributing federal political committee. **C C00466169**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
**02 / 23 / 2016**

Transaction ID : **SA11.3100781**

Amount of Each Receipt this Period  
**2000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

201604140200097904

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**EXELONPAC**

Mailing Address **101 CONSTITUTION AVE NW STE 400 E.**

City **WASHINGTON** State **DC** Zip Code **20001-2133**

FEC ID number of contributing federal political committee. **C C00141218**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102792**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**FACEBOOK INC. PAC**

Mailing Address **1299 PENNSYLVANIA AVENUE NW STE. 8**

City **WASHINGTON** State **DC** Zip Code **20004-2400**

FEC ID number of contributing federal political committee. **C C00502906**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
**MM / DD / YYYY**  
**01 / 12 / 2016**

Transaction ID : **SA11.3099853**

Amount of Each Receipt this Period  
**1500.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**FORD MOTOR COMPANY CIVIC ACTION FUND**

Mailing Address **1350 I. STREET NW SUITE 450**

City **WASHINGTON** State **DC** Zip Code **20005-7205**

FEC ID number of contributing federal political committee. **C C00046474**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 07 / 2016**

Transaction ID : **SA11.3100878**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

201604140200097905

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**GENERAL DYNAMICS CORPORATION PAC**

Mailing Address **2941 FAIRVIEW PARK DRIVE  
SUITE 100**

City **FALLS CHURCH** State **VA** Zip Code **22042-4541**

FEC ID number of contributing federal political committee. **C C00078451**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 22 / 2016**

Transaction ID : **SA11.3100748**

Amount of Each Receipt this Period  
**2000.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**GRAND CANYON EDUCATION INC. PAC**

Mailing Address **3300 W. CAMELBACK ROAD**

City **PHOENIX** State **AZ** Zip Code **85017-3030**

FEC ID number of contributing federal political committee. **C C00536334**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 23 / 2016**

Transaction ID : **SA11.3100780**

Amount of Each Receipt this Period  
**400.00**

Memo Item  
**CONTRIBUTION**  
**REDESIGNATION REQUESTED**

**C.** Full Name (Last, First, Middle Initial)  
**GRANT THORNTON PAC**

Mailing Address **175 W. JACKSON BLVD., SUITE 2000**

City **CHICAGO** State **IL** Zip Code **60604-2606**

FEC ID number of contributing federal political committee. **C C00408260**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1850.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 17 / 2016**

Transaction ID : **SA11.3101349**

Amount of Each Receipt this Period  
**1850.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**4250.00**

201604140200097906

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**HEARTLAND PAC**

Mailing Address **2645 BUTTERNUT LANE**

City **PEPPER PIKE** State **OH** Zip Code **44124-4208**

FEC ID number of contributing federal political committee. **C C00131557**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **MM / DD / YYYY**  
**02 / 09 / 2016**

Transaction ID : **SA11.3100575**

Amount of Each Receipt this Period **2500.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES, INC. PAC**

Mailing Address **300 M. STREET SE STE. 350**

City **WASHINGTON** State **DC** Zip Code **20003-3436**

FEC ID number of contributing federal political committee. **C C00325092**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102781**

Amount of Each Receipt this Period **1500.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HUNTINGTON INGALLS INDUSTRIES, INC. PAC**

Mailing Address **300 M. STREET SE STE. 350**

City **WASHINGTON** State **DC** Zip Code **20003-3436**

FEC ID number of contributing federal political committee. **C C00325092**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA11.3102782**

Amount of Each Receipt this Period **1000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **5000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097907

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**INDEPENDENT COMMUNITY BANKERS PAC**

Mailing Address 1615 L. STREET NW, STE. 900

City WASHINGTON State DC Zip Code 20036-5623

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 MM / DD / YYYY  
 01 / 27 / 2016

Transaction ID : SA11.3099960

Amount of Each Receipt this Period  
 250.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**INTEL PAC**

Mailing Address 1155 F. STREET NW  
SUITE 1025

City WASHINGTON State DC Zip Code 20004-1342

FEC ID number of contributing federal political committee. **C** C00125641

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 31 / 2016

Transaction ID : SA11.3102075

Amount of Each Receipt this Period  
 5000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**INTERNATIONAL WOOD PRODUCTS ASSOCIATION PAC**

Mailing Address 4214 KING STREET W.

City ALEXANDRIA State VA Zip Code 22302-1555

FEC ID number of contributing federal political committee. **C** C00161190

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
 MM / DD / YYYY  
 02 / 05 / 2016

Transaction ID : SA11.3100561

Amount of Each Receipt this Period  
 2000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7250.00

201604140200097908

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN BOLTON PAC**

Mailing Address 1730 M. ST NW, SUITE 611

City WASHINGTON State DC Zip Code 20036-4515

FEC ID number of contributing federal political committee. **C** C00542431

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 01 / 27 / 2016  
Transaction ID : SA11.3099961

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN BOLTON PAC**

Mailing Address 1730 M. ST NW, SUITE 611

City WASHINGTON State DC Zip Code 20036-4515

FEC ID number of contributing federal political committee. **C** C00542431

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 03 / 22 / 2016  
Transaction ID : SA11.3099961B

Amount of Each Receipt this Period -5000.00

Memo Item CONTRIBUTION  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**JOHN BOLTON PAC**

Mailing Address 1730 M. ST NW, SUITE 611

City WASHINGTON State DC Zip Code 20036-4515

FEC ID number of contributing federal political committee. **C** C00542431

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 03 / 22 / 2016  
Transaction ID : SA11.3101910

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION  
REDESIGNATION FROM PRIMARY

**SUBTOTAL** of Receipts This Page (optional)..... 5000.00

**TOTAL** This Period (last page this line number only).....

201604140200097909



**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**K&L GATES LLP PAC**

Mailing Address **1601 K. ST NW**

City **WASHINGTON** State **DC** Zip Code **20006-1682**

FEC ID number of contributing federal political committee. **C C00213173**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 MM /  DD /  YYYY  
**03 / 07 / 2016**

Transaction ID : **SA11.3100880**

Amount of Each Receipt this Period  
 Memo Item  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KUTAK ROCK & HUIE LLP PAC**

Mailing Address **1650 FARNAM STREET  
THE OMAHA BUILDING**

City **OMAHA** State **NE** Zip Code **68102-2104**

FEC ID number of contributing federal political committee. **C C00160986**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3800.00**

Date of Receipt  
 MM /  DD /  YYYY  
**02 / 24 / 2016**

Transaction ID : **SA11.3100818**

Amount of Each Receipt this Period  
 Memo Item  
**2500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**L-3 COMMUNICATIONS CORPORATION PAC**

Mailing Address **600 3RD AVENUE**

City **NEW YORK** State **NY** Zip Code **10016-1901**

FEC ID number of contributing federal political committee. **C C00338087**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
 MM /  DD /  YYYY  
**02 / 19 / 2016**

Transaction ID : **SA11.3100745**

Amount of Each Receipt this Period  
 Memo Item  
**1000.00**  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4500.00**

201604140200097910

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
FRIENDS OF JOHN MCCAIN, INC.

**A.** Full Name (Last, First, Middle Initial)  
L-3 COMMUNICATIONS CORPORATION PAC

Mailing Address 600 3RD AVENUE

City NEW YORK State NY Zip Code 10016-1901

FEC ID number of contributing federal political committee. **C** C00338087

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
MM / DD / YYYY  
03 / 07 / 2016

Transaction ID : SA11.3100882

Amount of Each Receipt this Period  
3000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
LIBERTY MUTUAL INSURANCE COMPANY PAC

Mailing Address 175 BERKELEY STREET

City BOSTON State MA Zip Code 02116-5066

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102710

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
LIBERTY MUTUAL INSURANCE COMPANY PAC

Mailing Address 175 BERKELEY STREET

City BOSTON State MA Zip Code 02116-5066

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102711

Amount of Each Receipt this Period  
4000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8000.00

201604140200097911

**SCHEDULE A (FEC Form 3)  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**LIMITED BRANDS PAC**

Mailing Address **3 LIMITED PARKWAY**

City **COLUMBUS** State **OH** Zip Code **43230-1467**

FEC ID number of contributing federal political committee. **C C00214338**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **MM / DD / YYYY**  
**01 / 18 / 2016**

Transaction ID : **SA11.3099876**

Amount of Each Receipt this Period **2500.00**

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN EMPLOYEES' PAC**

Mailing Address **2121 CRYSTAL DR. STE. 100**

City **ARLINGTON** State **VA** Zip Code **22202-3706**

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 08 / 2016**

Transaction ID : **SA11.3100895**

Amount of Each Receipt this Period **1500.00**

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LOCKHEED MARTIN EMPLOYEES' PAC**

Mailing Address **2121 CRYSTAL DR. STE. 100**

City **ARLINGTON** State **VA** Zip Code **22202-3706**

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 21 / 2016**

Transaction ID : **SA11.3101438**

Amount of Each Receipt this Period **2000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **6000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097912

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MAKING BUSINESS EXCEL PAC**

Mailing Address P.O. BOX 2687

City State Zip Code  
CODY WY 82414-2687

FEC ID number of contributing federal political committee. **C** C00392134

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
MM / DD / YYYY  
02 / 05 / 2016

Transaction ID : SA11.3100560

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MERITAGE HOMES CORPORATION PAC**

Mailing Address 17851 NORTH 85TH STREET  
SUITE 300

City State Zip Code  
SCOTTSDALE AZ 85255-6316

FEC ID number of contributing federal political committee. **C** C00420703

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
MM / DD / YYYY  
01 / 27 / 2016

Transaction ID : SA11.3099959

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NACDS PAC**

Mailing Address 1776 WILSON BLVD STE 200

City State Zip Code  
ARLINGTON VA 22209-2516

FEC ID number of contributing federal political committee. **C** C00022368

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
02 / 05 / 2016

Transaction ID : SA11.3100562

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

11000.00

201604140200097913

**SCHEDULE A (FEC Form 3)  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION PAC**

Mailing Address 25 MASSACHUSETTS AVE. NW, STE. 100

City WASHINGTON State DC Zip Code 20001-1430

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102073

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL RESTAURANT ASSOCIATION PAC**

Mailing Address 2055 L. STREET NW

City WASHINGTON State DC Zip Code 20036-4983

FEC ID number of contributing federal political committee. **C** C00003764

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
MM / DD / YYYY  
02 / 23 / 2016

Transaction ID : SA11.3100799

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NEBRASKA SANDHILLS PAC**

Mailing Address 228 S. WASHINGTON ST., STE. 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00540054

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
MM / DD / YYYY  
03 / 01 / 2016

Transaction ID : SA11.3100865

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

11000.00

201604140200097914

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 390 OF 590  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial)  
**NEW REPUBLICAN MAJORITY FUND**

Mailing Address **P.O. BOX 53176**

City State Zip Code  
**WASHINGTON DC 20009-9176**

FEC ID number of contributing federal political committee. **C C00219220**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 07 / 2016**

Transaction ID : **SA11.3100879**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**NUCLEAR ENERGY INSTITUTE FED PAC**

Mailing Address **1201 F. STREET NW, 11TH FLOOR**

City State Zip Code  
**WASHINGTON DC 20004-1217**

FEC ID number of contributing federal political committee. **C C00239848**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 26 / 2016**

Transaction ID : **SA11.3100828**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**OSHKOSH CORP. EMPLOYEES PAC (OCEPAC)**

Mailing Address **P.O. BOX 2566**

City State Zip Code  
**OSHKOSH WI 54903-2566**

FEC ID number of contributing federal political committee. **C C00304477**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**10000.00**

Date of Receipt  
**MM / DD / YYYY**  
**02 / 19 / 2016**

Transaction ID : **SA11.3100746**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**11000.00**

201604140200097915

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 391 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**PACIFIC LIFE INSURANCE COMPANY PAC**

Mailing Address **700 NEWPORT CENTER DRIVE**

City **NEWPORT BEACH** State **CA** Zip Code **92660-6307**

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt **03 / 29 / 2016**

Transaction ID : **SA11.3101909**

Amount of Each Receipt this Period **3000.00**

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PG&E CORPORATION ENERGY PAC**

Mailing Address **P.O. BOX 770000 B29H  
77 BEALE STREET**

City **SAN FRANCISCO** State **CA** Zip Code **94177-0001**

FEC ID number of contributing federal political committee. **C C00177469**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA11.3102068**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PITNEY BOWES INC. PAC**

Mailing Address **3001 SUMMER ST**

City **STAMFORD** State **CT** Zip Code **06905-4317**

FEC ID number of contributing federal political committee. **C C00339499**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt **03 / 25 / 2016**

Transaction ID : **SA11.3101728**

Amount of Each Receipt this Period **1000.00**

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **5000.00**

**TOTAL** This Period (last page this line number only).....

201604140200097916

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**POWERPAC OF THE EDISON ELECTRIC INSTITUTE**

Mailing Address 701 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004-2608

FEC ID number of contributing federal political committee. **C** C00095869

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3101953

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PRICEWATERHOUSECOOPERS PAC**

Mailing Address 600 13TH ST NW, STE. 1000

City WASHINGTON State DC Zip Code 20005-3005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt 03 / 28 / 2016  
Transaction ID : SA11.3101804

Amount of Each Receipt this Period 2500.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 9856 ARCHER LN.

City DUBLIN State OH Zip Code 43017-8914

FEC ID number of contributing federal political committee. **C** C00440032

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA11.3102793

Amount of Each Receipt this Period 5000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 12500.00

**TOTAL** This Period (last page this line number only) .....

201604140200097917



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**ROCKWELL COLLINS EMPLOYEE PAC**

Mailing Address 1300 WILSON BLVD, STE. 200

City ARLINGTON State VA Zip Code 22209-2307

FEC ID number of contributing federal political committee. **C** C00365684

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2016

Transaction ID : SA11.3100932

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROCKWELL COLLINS EMPLOYEE PAC**

Mailing Address 1300 WILSON BLVD, STE. 200

City ARLINGTON State VA Zip Code 22209-2307

FEC ID number of contributing federal political committee. **C** C00365684

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101738

Amount of Each Receipt this Period  
1000.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ROLLS-ROYCE NORTH AMERICA PAC**

Mailing Address 1875 EXPLORER STREET, SUITE 200

City RESTON State VA Zip Code 20190-6022

FEC ID number of contributing federal political committee. **C** C00296822

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA11.3102780

Amount of Each Receipt this Period  
2000.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4000.00

201604140200097918

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**SAFARI CLUB INTERNATIONAL PAC**  
 Mailing Address 4800 W. GATES PASS ROAD  
 City TUCSON State AZ Zip Code 85745-9600  
 FEC ID number of contributing federal political committee. **C** C00122101  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000.00

Date of Receipt  
 MM / DD / YYYY  
 01 / 08 / 2016  
 Transaction ID : SA11.3099847  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY PAC**  
 Mailing Address 151 LAFAYETTE DRIVE  
 City OAK RIDGE State TN Zip Code 37830-6865  
 FEC ID number of contributing federal political committee. **C** C00300418  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 6600.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 31 / 2016  
 Transaction ID : SA11.3102077  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**SIERRA NEVADA PAC**  
 Mailing Address P.O. BOX 50193  
 City SPARKS State NV Zip Code 89435-0193  
 FEC ID number of contributing federal political committee. **C** C00367995  
 Name of Employer Occupation  
 Receipt For: 2016  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 10000.00

Date of Receipt  
 MM / DD / YYYY  
 02 / 12 / 2016  
 Transaction ID : SA11.3100696  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
 CONTRIBUTION

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

3000.00

201604140200097919

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 395 OF 590  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**SOUTHERN COMPANY EMPLOYEES PAC**

Mailing Address 241 RALPH MCGILL BLVD. NE

City ATLANTA State GA Zip Code 30308-3374

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000.00

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2016

Transaction ID : SA11.3101729

Amount of Each Receipt this Period  
2000.00

Memo Item CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SPACE EXPLORATION TECHNOLOGIES CORPORATION PAC**

Mailing Address 1 ROCKET RD

City HAWTHORNE State CA Zip Code 90250-6844

FEC ID number of contributing federal political committee. **C** C00411116

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
MM / DD / YYYY  
03 / 08 / 2016

Transaction ID : SA11.3100897

Amount of Each Receipt this Period  
5000.00

Memo Item CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STRONG COUNTRY FOR TODAY AND TOMORROW (SCOTT PAC)**

Mailing Address P.O. BOX 600

City RYE State NH Zip Code 03870-0600

FEC ID number of contributing federal political committee. **C** C00560003

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
MM / DD / YYYY  
03 / 24 / 2016

Transaction ID : SA11.3101675

Amount of Each Receipt this Period  
3000.00

Memo Item CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

10000.00

201604140200097920

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**THE TIMKEN COMPANY**

Mailing Address **4500 MOUNT PLEASANT ST. NW**

City **NORTH CANTON** State **OH** Zip Code **44720-5450**

FEC ID number of contributing federal political committee. **C C00311308**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
**01 / 14 / 2016**

Transaction ID : **SA11.3099855**

Amount of Each Receipt this Period  
**2500.00**

Memo Item  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**THOMPSON COBURN PAC**

Mailing Address **1 U.S. BANK PLAZA**

City **ST. LOUIS** State **MO** Zip Code **63101-1612**

FEC ID number of contributing federal political committee. **C C00550491**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**03 / 14 / 2016**

Transaction ID : **SA11.3100931**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address **700 13TH STREET NW  
 SUITE 350**

City **WASHINGTON** State **DC** Zip Code **20005-3960**

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt  
**02 / 24 / 2016**

Transaction ID : **SA11.3100803**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**CONTRIBUTION**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**8500.00**

201604140200097921

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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11a     11b     11c     11d  
 12     13a     13b     14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**UNIVERSAL TECHNICAL INSTITUTE, INC. PAC**

Mailing Address 16220 N. SCOTTSDALE RD., SUITE 100

City SCOTTSDALE State AZ Zip Code 85254-1825

FEC ID number of contributing federal political committee. **C** C00497545

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 28 / 2016

Transaction ID : SA11.3101806

Amount of Each Receipt this Period  
 2000.00

Memo Item  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**VERIZON COMMUNICATIONS, INC.**

Mailing Address 1300 I. STREET NW  
VERIZON WIRELESS GOOD GOVERNMENT C

City WASHINGTON State DC Zip Code 20005-3306

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 07 / 2016

Transaction ID : SA11.3100881

Amount of Each Receipt this Period  
 2500.00

Memo Item  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**WAL PAC**

Mailing Address 702 SW 8TH STREET

City BENTONVILLE State AR Zip Code 72716-6209

FEC ID number of contributing federal political committee. **C** C00093054

Name of Employer Occupation

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 MM / DD / YYYY  
 03 / 14 / 2016

Transaction ID : SA11.3100929

Amount of Each Receipt this Period  
 1500.00

Memo Item  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

201604140200097922

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 398 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>WESTERN GROWERS PAC - FEDERAL</b>		Date of Receipt MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address <b>17620 FITCH STREET</b>		Transaction ID : <b>SA11.3100574</b>
City <b>IRVINE</b>	State <b>CA</b>	Zip Code <b>92614-6022</b>
FEC ID number of contributing federal political committee. <b>C C00193979</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>WESTINGHOUSE ELECTRIC COMPANY PAC</b>		Date of Receipt MM / DD / YYYY <b>02 / 26 / 2016</b>
Mailing Address <b>1775 PENNSYLVANIA AVE., NW STE. 25</b>		Transaction ID : <b>SA11.3100830</b>
City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20006-4605</b>
FEC ID number of contributing federal political committee. <b>C C00346361</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial)		Date of Receipt MM / DD / YYYY
Mailing Address		Transaction ID
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>221200.00</b>

201604140200097923

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**KEEP THE SENATE MAJORITY COMMITTEE**

Mailing Address **PO BOX 1290**

City **DRIPPING SPRINGS** State **TX** Zip Code **78620-1290**

FEC ID number of contributing federal political committee. **C C00594465**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **77013.41**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA12.3102801**

Amount of Each Receipt this Period **49143.78**

Memo Item  
**TRANSFER**  
**TRANSFER OF JOINT FUNDRAISING PROCEEDS**

**B.** Full Name (Last, First, Middle Initial)  
**ATAURRAB AHMAD**

Mailing Address **3 HIGHCLERE PARK DRIVE**

City **SPRING** State **TX** Zip Code **77379-7245**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**SELF-EMPLOYED SURGEON**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA12.3102840**

Amount of Each Receipt this Period **250.00**

Memo Item  
**TRANSFER**  
**JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**THE HON. HUSHANG ANSARY**

Mailing Address **1000 LOUISIANA  
59TH FLOOR SUITE 5900**

City **HOUSTON** State **TX** Zip Code **77002-5014**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**STEWART & STEVENSON CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA12.3102804**

Amount of Each Receipt this Period **2700.00**

Memo Item  
**TRANSFER**  
**JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional)..... **49143.78**

**TOTAL** This Period (last page this line number only).....

201604140200097924

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 400 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**SAL ASHRAF**

Mailing Address **11933 BARRYKNOLL LANE**

City **HOUSTON** State **TX** Zip Code **77024-4301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NET CORE** Occupation **CEO**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102853**

Amount of Each Receipt this Period **250.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL A. BATTISTA**

Mailing Address **11 ORSINGER HILL**

City **SAN ANTONIO** State **TX** Zip Code **78230-1500**

FEC ID number of contributing federal political committee. **C**

Name of Employer **PEDIATRIX MEDICAL GROUP** Occupation **DIRECTOR**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102839**

Amount of Each Receipt this Period **1250.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**ANDY BEAL**

Mailing Address **600 LEGACY DRIVE**

City **PLANO** State **TX** Zip Code **75023-2230**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BEAL BANK** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102857**

Amount of Each Receipt this Period **2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional) ..... **0.00**

**TOTAL** This Period (last page this line number only) .....

20160414020097925



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 401 OF 590

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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

Full Name (Last, First, Middle Initial) <b>A. DAVID L. BECK</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 3652 INVERNESS DRIVE		Transaction ID : SA12.3102856	
City HOUSTON	State TX	Zip Code 77019-1102	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1250.00	
Name of Employer BECK REDDEN LLP		Occupation ATTORNEY	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1250.00	
Full Name (Last, First, Middle Initial) <b>B. TODD M. BINET</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 11120 N COUNTRY SQUIRE		Transaction ID : SA12.3102854	
City HOUSTON	State TX	Zip Code 77024-7403	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer TMB CONSULTING, INC.		Occupation CONSULTANT	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	
Full Name (Last, First, Middle Initial) <b>C. J. BRETT BUSBY</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 411 HIGHLAND STREET		Transaction ID : SA12.3102841	
City HOUSTON	State TX	Zip Code 77009-6624	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer TEXAS COURT OF APPEALS		Occupation JUSTICE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00	
SUBTOTAL of Receipts This Page (optional).....		0.00	
TOTAL This Period (last page this line number only).....		0.00	

201604140200097926

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 402 OF 590
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. CLARENCE P. CAZALOT JR.**

Mailing Address **6 WEXFORD COURT**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77024-6611</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>MARATHON OIL CORPORATION</b>	Occupation <b>PRESIDENT</b>
---	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  

MM	DD	YYYY
03	31	2016

Transaction ID : **SA12.3102813**

Amount of Each Receipt this Period  
**1250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**STEPHEN I. CHAZEN**

Mailing Address **P.O. BOX 1229**

City <b>BELLAIRE</b>	State <b>TX</b>	Zip Code <b>77402-1229</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>OCCIDENTAL PETROLEUM</b>	Occupation <b>CEO</b>
---	--------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  

MM	DD	YYYY
03	31	2016

Transaction ID : **SA12.3102803**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. ELLOINE M. CLARK**

Mailing Address **3716 MAPLEWOOD AVENUE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75205-2827</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>RETIRED</b>	Occupation <b>HOMEMAKER</b>
------------------------------------	--------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5400.00**

Date of Receipt  

MM	DD	YYYY
03	31	2016

Transaction ID : **SA12.3102818**

Amount of Each Receipt this Period  
**700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

20160414020097927

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 OF 590
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**ROBERTO CONTRERAS**

Mailing Address **1600 POST OAK BOULEVARD  
PH 2200**

City **HOUSTON** State **TX** Zip Code **77056-2922**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ST. CHRISTOPHER HOLDINGS** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102821**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**HARLAN R. CROW**

Mailing Address **4700 PRESTON ROAD**

City **DALLAS** State **TX** Zip Code **75205-3712**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CROW HOLDINGS** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102858**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**MRS. KATHERINE RAYMOND CROW**

Mailing Address **4700 PRESTON ROAD**

City **DALLAS** State **TX** Zip Code **75205-3712**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102859**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097928

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 404 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. TILMAN J. FERTITTA**

Mailing Address **1510 W. LOOP SOUTH**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77027-9505</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>LANDRY'S RESTAURANTS</b>	Occupation <b>CHIEF EXECUTIVE OFFICER</b>
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Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**3750.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102850**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**CHARLS C. FOSTER**

Mailing Address **600 TRAVIS STREET  
SUITE 2000**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77002-3025</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>FOSTER, LLP</b>	Occupation <b>ATTORNEY</b>
--	-------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102820**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**MR. JAMES H. GREER**

Mailing Address **9000 HEMPSTEAD ROAD  
SUITE 200**

City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77008-6039</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>INVESTMENTS</b>
--	----------------------------------

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102817**

Amount of Each Receipt this Period  
**1250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097929

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 405 OF 590

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/>	<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>A. MR. DAVID GREINADER</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 4708 CAROLINE STREET		Transaction ID : SA12.3102832	
City HOUSTON	State TX	Zip Code 77004-5025	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE MANAGER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
Full Name (Last, First, Middle Initial) <b>B. MR. ROBIN P. HARTMANN</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 5318 DRANE DR		Transaction ID : SA12.3102842	
City DALLAS	State TX	Zip Code 75209-5502	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer HAYNES & BOONE	Occupation ATTORNEY		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
Full Name (Last, First, Middle Initial) <b>C. FRANK J. HEVRDEJS</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 9 GREENWAY PLAZA SUITE 240		Transaction ID : SA12.3102865	
City HOUSTON	State TX	Zip Code 77046-0905	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1700.00	
Name of Employer THE STERLING GROUP	Occupation ADVISORY PARTNER		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3750.00		
SUBTOTAL of Receipts This Page (optional).....		0.00	
TOTAL This Period (last page this line number only).....		0.00	

20160414020097930

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 406 OF 590	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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

Full Name (Last, First, Middle Initial) <b>ALAN G. HILL JR.</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>47 HIGHLAND PARK VILLAGE SUITE 200</b>		Transaction ID : <b>SA12.3102835</b>
City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75205-2786</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2700.00</b>
Name of Employer <b>AG HILL PARTNERS LLC</b>	Occupation <b>CHAIRMAN</b>	<input checked="" type="checkbox"/> Memo Item TRANSFER  JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5400.00</b>	

Full Name (Last, First, Middle Initial) <b>LAURENCE E. HIRSCH</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>300 CRESCENT COURT SUITE 550</b>		Transaction ID : <b>SA12.3102824</b>
City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75201-1817</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2700.00</b>
Name of Employer <b>HIGHLANDER PARTNERS</b>	Occupation <b>CHAIRMAN</b>	<input checked="" type="checkbox"/> Memo Item TRANSFER  JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5400.00</b>	

Full Name (Last, First, Middle Initial) <b>HOWARD HOLSENBECK</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>10 LANA LANE</b>		Transaction ID : <b>SA12.3102806</b>
City <b>HOUSTON</b>	State <b>TX</b>	Zip Code <b>77027-5606</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>RETIRED</b>	Occupation <b>RETIRED</b>	<input checked="" type="checkbox"/> Memo Item TRANSFER  JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097931

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 407 OF 590
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>GEORGE R. LEWIS</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>3100 MONTICELLO AVENUE SUITE 150</b>		Transaction ID : <b>SA12.3102844</b>
City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75205-3441</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>	
Name of Employer <b>GEORGE LEWIS HOMES</b>	Occupation <b>PRESIDENT</b>	<input checked="" type="checkbox"/> Memo Item <b>TRANSFER</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	JFC ATTRIB: <b>KEEP THE SENATE MAJORITY COMMITTEE</b>

Full Name (Last, First, Middle Initial) <b>ASHOK K. MAGO</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>7115 VAN HOOK DRIVE</b>		Transaction ID : <b>SA12.3102860</b>
City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75248-1537</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>	
Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>REAL ESTATE DEVELOPER</b>	<input checked="" type="checkbox"/> Memo Item <b>TRANSFER</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	JFC ATTRIB: <b>KEEP THE SENATE MAJORITY COMMITTEE</b>

Full Name (Last, First, Middle Initial) <b>EDWARD E. MARTIN JR.</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>12309 MUHLY COVE</b>		Transaction ID : <b>SA12.3102846</b>
City <b>AUSTIN</b>	State <b>TX</b>	Zip Code <b>78738-6039</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1250.00</b>	
Name of Employer <b>TILSON BUILT COMPANY</b>	Occupation <b>PRESIDENT</b>	<input checked="" type="checkbox"/> Memo Item <b>TRANSFER</b>
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1250.00</b>	JFC ATTRIB: <b>KEEP THE SENATE MAJORITY COMMITTEE</b>

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097932

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 408 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN W. MILES**

Mailing Address 2424 HAZARD STREET

City HOUSTON State TX Zip Code 77019-6718

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA12.3102838

Amount of Each Receipt this Period  
250.00

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**MS. GEORGIA MORGAN**

Mailing Address P.O. BOX 2747

City HARLINGEN State TX Zip Code 78551-2747

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
725.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA12.3102815

Amount of Each Receipt this Period  
25.00

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**JOHN L. NAU III**

Mailing Address P.O. BOX 130130

City HOUSTON State TX Zip Code 77219-0130

FEC ID number of contributing federal political committee. **C**

Name of Employer SILVER EAGLE DISTRIBUTORS Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2733.33

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA12.3102849

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

201604140200097933



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

PAGE 409 OF 590

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

**A.** Full Name (Last, First, Middle Initial)  
**ERLE A. NYE**

Mailing Address **12211 CREEK FOREST DRIVE**

City **DALLAS** State **TX** Zip Code **75230-2336**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EN CONSULTING** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102831**

Amount of Each Receipt this Period **250.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**KAY M. ONSTEAD**

Mailing Address **5298 MEMORIAL DRIVE**

City **HOUSTON** State **TX** Zip Code **77007-8260**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ONSTEAD HOLDINGS LLC** Occupation **INVESTMENT MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102827**

Amount of Each Receipt this Period **2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**MR. PATRICK C. OXFORD**

Mailing Address **711 LOUISIANA STREET SUITE 2300**

City **HOUSTON** State **TX** Zip Code **77002-2770**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BRACEWELL & PATTERSON** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102843**

Amount of Each Receipt this Period **250.00**

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097934

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 410 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
MR. SAM H. PACK

Mailing Address 24 BRAEWOOD PL

City DALLAS State TX Zip Code 75248-7901

FEC ID number of contributing federal political committee. C

Name of Employer FIVE STAR FORD Occupation AUTOMOBILE DEALER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 625.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA12.3102833

Amount of Each Receipt this Period 625.00

Memo Item TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
CHRISTINE F. POPOLO

Mailing Address 9002 DOUGLAS AVENUE

City DALLAS State TX Zip Code 75225-3009

FEC ID number of contributing federal political committee. C

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA12.3102861

Amount of Each Receipt this Period 1250.00

Memo Item TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
JOSEPH V. POPOLO JR.

Mailing Address 9002 DOUGLAS AVENUE

City DALLAS State TX Zip Code 75225-3009

FEC ID number of contributing federal political committee. C

Name of Employer THE FREEMAN COMPANIES Occupation PRESIDENT

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt 03 / 31 / 2016

Transaction ID : SA12.3102862

Amount of Each Receipt this Period 1250.00

Memo Item TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

SUBTOTAL of Receipts This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

201604140200097935

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 411 OF 590

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>J. HUGH ROFF JR.</b></p> <p>Mailing Address <b>600 TRAVIS STREET SUITE 7070</b></p> <p>City <b>HOUSTON</b> State <b>TX</b> Zip Code <b>77002-2919</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>ROFF RESOURCES LLC</b> Occupation <b>CHAIRMAN</b></p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <b>1000.00</b></p>		<p>Date of Receipt <b>03 / 31 / 2016</b></p> <p>Transaction ID : <b>SA12.3102834</b></p> <p>Amount of Each Receipt this Period <b>1000.00</b></p> <p><input checked="" type="checkbox"/> Memo Item TRANSFER</p> <p>JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. JOHN C. SCHWEITZER</b></p> <p>Mailing Address <b>100 CONGRESS AVENUE SUITE 1600</b></p> <p>City <b>AUSTIN</b> State <b>TX</b> Zip Code <b>78701-2746</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>INVESTOR</b></p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <b>500.00</b></p>		<p>Date of Receipt <b>03 / 31 / 2016</b></p> <p>Transaction ID : <b>SA12.3102845</b></p> <p>Amount of Each Receipt this Period <b>500.00</b></p> <p><input checked="" type="checkbox"/> Memo Item TRANSFER</p> <p>JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>HOOMAN SEDIGHI</b></p> <p>Mailing Address <b>13213 GLAD ACRES DRIVE</b></p> <p>City <b>DALLAS</b> State <b>TX</b> Zip Code <b>75234-5202</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>SELF-EMPLOYED</b> Occupation <b>PHYSICIAN</b></p> <p>Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <b>5000.00</b></p>		<p>Date of Receipt <b>03 / 31 / 2016</b></p> <p>Transaction ID : <b>SA12.3102836</b></p> <p>Amount of Each Receipt this Period <b>2700.00</b></p> <p><input checked="" type="checkbox"/> Memo Item TRANSFER</p> <p>JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....</p>		<p><b>0.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only).....</p>		<p><b>0.00</b></p>

201604140200097936

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 412 OF 590
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. L.E. SIMMONS**

Mailing Address **600 TRAVIS STREET  
SUITE 6600**

City **HOUSTON** State **TX** Zip Code **77002-2921**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SCF PARTNERS** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102814**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS S. SMITH**

Mailing Address **5619 BORDLEY DRIVE**

City **HOUSTON** State **TX** Zip Code **77056-2329**

FEC ID number of contributing federal political committee. **C**

Name of Employer **K.S.A. INDUSTIRES, INC.** Occupation **EXECUTIVE**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102828**

Amount of Each Receipt this Period  
**1250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**SCHUYLER M. TILNEY**

Mailing Address **5922 SHADY RIVER DRIVE**

City **HOUSTON** State **TX** Zip Code **77057-1321**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELECT ENERGY SERVICES** Occupation **EXECUTIVE VICE PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102855**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097937

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 413 OF 590
	(check only one)	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. PHOEBE TUDOR**

Mailing Address **1405 S. BLVD.**

City **HOUSTON** State **TX** Zip Code **77006-6333**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102822**

Amount of Each Receipt this Period  
**625.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT TUDOR**

Mailing Address **1405 SOUTH BOULEVARD**

City **HOUSTON** State **TX** Zip Code **77006-6333**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TUDOR PICKERING HOLT & COMPANY** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102823**

Amount of Each Receipt this Period  
**625.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**STEVEN A. WEBSTER**

Mailing Address **500 DALLAS STREET  
SUITE 2300**

City **HOUSTON** State **TX** Zip Code **77002-4724**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AVISTA CAPITAL PARTNERS** Occupation **CO-MANAGING PARTNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102847**

Amount of Each Receipt this Period  
**1250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097938

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 414 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD W. WEEKLEY**

Mailing Address **1111 N. POST OAK ROAD**

City **HOUSTON** State **TX** Zip Code **77055-7310**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WEEKLEY PROPERTIES** Occupation **REAL ESTATE DEVELOPER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102848**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**JACK WU**

Mailing Address **290 EL CAMINO**

City **PORT LAVACA** State **TX** Zip Code **77979-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **FORMOSA PLASTICS** Occupation **VICE PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102825**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**TINA WU**

Mailing Address **290 EL CAMINO**

City **PORT LAVACA** State **TX** Zip Code **77979-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**03 / 31 / 2016**

Transaction ID : **SA12.3102826**

Amount of Each Receipt this Period  
**250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097939

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 415 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>BNSF RAILPAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>P.O. BOX 961039</b>		Transaction ID : <b>SA12.3102851</b>
City <b>FORT WORTH</b>	State <b>TX</b>	Zip Code <b>76161-0039</b>
FEC ID number of contributing federal political committee. <b>C C00235739</b>	Amount of Each Receipt this Period <b>1000.00</b>	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Memo Item  
TRANSFER  
JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>CASH AMERICA INTERNATIONAL PAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>1600 WEST 7TH STREET</b>		Transaction ID : <b>SA12.3102864</b>
City <b>FORT WORTH</b>	State <b>TX</b>	Zip Code <b>76102-2504</b>
FEC ID number of contributing federal political committee. <b>C C00275529</b>	Amount of Each Receipt this Period <b>625.00</b>	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>625.00</b>	

Memo Item  
TRANSFER  
JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

Full Name (Last, First, Middle Initial) <b>FIRST COMMAND FINANCIAL PLANNING PAC</b>		Date of Receipt MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>ONE FIRST COMMAND PLAZA</b>		Transaction ID : <b>SA12.3102863</b>
City <b>FORT WORTH</b>	State <b>TX</b>	Zip Code <b>76109-4978</b>
FEC ID number of contributing federal political committee. <b>C C00325647</b>	Amount of Each Receipt this Period <b>625.00</b>	
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>625.00</b>	

Memo Item  
TRANSFER  
JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>0.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097940

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 416 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>IPAA WILDCATTERS FUND</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 1201 15TH STREET NW SUITE 300		Transaction ID : SA12.3102829	
City WASHINGTON State DC Zip Code 20005-2899	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00246306	<input checked="" type="checkbox"/> Memo Item TRANSFER		
Name of Employer Occupation	JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>KBR, INC. PAC</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 601 JEFFERSON SUITE 3746-C		Transaction ID : SA12.3102852	
City HOUSTON State TX Zip Code 77002-7900	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b> C00431114	<input checked="" type="checkbox"/> Memo Item TRANSFER		
Name of Employer Occupation	JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>KEEP THE SENATE MAJORITY COMMITTEE</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016	
Mailing Address PO BOX 1290		Transaction ID : SA12.3102802	
City DRIPPING SPRINGS State TX Zip Code 78620-1290	Amount of Each Receipt this Period 27869.63		
FEC ID number of contributing federal political committee. <b>C</b> C00594465	<input type="checkbox"/> Memo Item TRANSFER		
Name of Employer Occupation	TRANSFER OF JOINT FUNDRAISING PROCEEDS		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 77013.41		
<b>SUBTOTAL</b> of Receipts This Page (optional).....		27869.63	
<b>TOTAL</b> This Period (last page this line number only).....		[Empty Box]	

201604140200097941



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 417 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**THE HON. HUSHANG ANSARY**

Mailing Address 1000 LOUISIANA  
59TH FLOOR SUITE 5900

City HOUSTON State TX Zip Code 77002-5014

FEC ID number of contributing federal political committee. **C**

Name of Employer STEWART & STEVENSON Occupation CHAIRMAN

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA12.3102867

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**ANDY BEAL**

Mailing Address 600 LEGACY DRIVE

City PLANO State TX Zip Code 75023-2230

FEC ID number of contributing federal political committee. **C**

Name of Employer BEAL BANK Occupation CHAIRMAN

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA12.3102877

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**STEPHEN I. CHAZEN**

Mailing Address P.O. BOX 1229

City BELLAIRE State TX Zip Code 77402-1229

FEC ID number of contributing federal political committee. **C**

Name of Employer OCCIDENTAL PETROLEUM Occupation CEO

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2016

Transaction ID : SA12.3102866

Amount of Each Receipt this Period  
2700.00

Memo Item  
TRANSFER

JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

201604140200097942

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 418 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ELLOINE M. CLARK**

Mailing Address 3716 MAPLEWOOD AVENUE

City DALLAS State TX Zip Code 75205-2827

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA12.3102870

Amount of Each Receipt this Period 2700.00  
 Memo Item  
TRANSFER  
JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**HARLAN R. CROW**

Mailing Address 4700 PRESTON ROAD

City DALLAS State TX Zip Code 75205-3712

FEC ID number of contributing federal political committee. **C**

Name of Employer CROW HOLDINGS Occupation CHAIRMAN

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA12.3102878

Amount of Each Receipt this Period 2700.00  
 Memo Item  
TRANSFER  
JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**MRS. KATHERINE RAYMOND CROW**

Mailing Address 4700 PRESTON ROAD

City DALLAS State TX Zip Code 75205-3712

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5400.00

Date of Receipt 03 / 31 / 2016  
Transaction ID : SA12.3102879

Amount of Each Receipt this Period 2700.00  
 Memo Item  
TRANSFER  
JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

201604140200097943

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 419 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial) <b>MR. TILMAN J. FERTITTA</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1510 W. LOOP SOUTH		Transaction ID : SA12.3102876
City HOUSTON      State TX      Zip Code 77027-9505	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1050.00
Name of Employer LANDRY'S RESTAURANTS	Occupation CHIEF EXECUTIVE OFFICER	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3750.00	JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

B. Full Name (Last, First, Middle Initial) <b>FRANK J. HEVRDEJS</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 9 GREENWAY PLAZA SUITE 240		Transaction ID : SA12.3102880
City HOUSTON      State TX      Zip Code 77046-0905	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2050.00
Name of Employer THE STERLING GROUP	Occupation ADVISORY PARTNER	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3750.00	JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

C. Full Name (Last, First, Middle Initial) <b>ALAN G. HILL JR.</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 47 HIGHLAND PARK VILLAGE SUITE 200		Transaction ID : SA12.3102873
City DALLAS      State TX      Zip Code 75205-2786	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 2700.00
Name of Employer AG HILL PARTNERS LLC	Occupation CHAIRMAN	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	JFC ATTRIB: KEEP THE SENATE MAJORITY COMMITTEE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097944

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 420 OF 590
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**LAURENCE E. HIRSCH**

Mailing Address **300 CRESCENT COURT  
SUITE 550**

City **DALLAS** State **TX** Zip Code **75201-1817**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HIGHLANDER PARTNERS** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA12.3102872**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**JOHN L. NAU III**

Mailing Address **P.O. BOX 130130**

City **HOUSTON** State **TX** Zip Code **77219-0130**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SILVER EAGLE DISTRIBUTORS** Occupation **CEO**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2733.33**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA12.3102875**

Amount of Each Receipt this Period  
**33.33**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**HOOMAN SEDIGHI**

Mailing Address **13213 GLAD ACRES DRIVE**

City **DALLAS** State **TX** Zip Code **75234-5202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**MM / DD / YYYY**  
**03 / 31 / 2016**

Transaction ID : **SA12.3102874**

Amount of Each Receipt this Period  
**2300.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097945

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 421 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**KIM R. SMITH**

Mailing Address **1155 E. JOHNSON STREET**

City **TATUM** State **TX** Zip Code **75691-1908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SIERRA FRAC SAND** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102868**

Amount of Each Receipt this Period  
**625.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**PAMELA G. SMITH**

Mailing Address **1155 E. JOHNSON STREET**

City **TATUM** State **TX** Zip Code **75691-1908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SIERRA FRAC SAND** Occupation **VICE PRESIDENT**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **625.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102869**

Amount of Each Receipt this Period  
**625.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**ALAMO PAC**

Mailing Address **919 CONGRESS AVE., STE. 1400  
SUITE 1400**

City **AUSTIN** State **TX** Zip Code **78701-2102**

FEC ID number of contributing federal political committee. **C** **C00387464**

Name of Employer Occupation

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102871**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **KEEP THE SENATE MAJORITY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

20160414020097946

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 422 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

Mailing Address **228 S. WASHINGTON ST, STE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00608497**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **71890.19**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102897**

Amount of Each Receipt this Period **39038.60**

Memo Item  
TRANSFER  
TRANSFER OF JOINT FUNDRAISING PROCEEDS

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM H. AHMANSON**

Mailing Address **180 SOUTH HUDSON PLACE**

City **LOS ANGELES** State **CA** Zip Code **90004-1038**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**THE AHMANSON FOUNDATION** **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt **03 / 17 / 2016**

Transaction ID : **SA12.3102900**

Amount of Each Receipt this Period **2700.00**

Memo Item  
TRANSFER  
JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**MR. HERBERT F. BOECKMANN II**

Mailing Address **15505 ROSCOE BLVD.**

City **NORTH HILLS** State **CA** Zip Code **91343-6503**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**GALPIN MOTORS, INC.** **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **03 / 29 / 2016**

Transaction ID : **SA12.3102917**

Amount of Each Receipt this Period **2700.00**

Memo Item  
TRANSFER  
JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**39038.60**

201604140200097947

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 423 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. JERRY BRUCKHEIMER**

Mailing Address **16030 VENTURA BLVD. #380**  
**#380**

City **ENCINO** State **CA** Zip Code **91436-2778**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JERRY BRUCKHEIMER FILMS** Occupation **PRODUCER**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2016**

Transaction ID : **SA12.3102922**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**MELVIN B. GELIEBTER**

Mailing Address **P.O. BOX 1760**

City **SANTA MONICA** State **CA** Zip Code **90406-1760**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2016**

Transaction ID : **SA12.3102918**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**SUSAN HILLGREN**

Mailing Address **135 HARBOR ISLAND ROAD**

City **NEWPORT BEACH** State **CA** Zip Code **92660-7204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **JOURNALIST**

Receipt For: 2016  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2016**

Transaction ID : **SA12.3102910**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200097948

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 424 OF 590

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. DAVID L. HOROWITZ</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2016	
Mailing Address 27241 LA PAZ ROAD SUITE B.			Transaction ID : SA12.3102914	
City LAGUNA NIGUEL	State CA	Zip Code 92677-3636	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee.			<input checked="" type="checkbox"/> Memo Item TRANSFER	
Name of Employer HOROWITZ GROUP		Occupation PRESIDENT	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5300.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MRS. MARY S. JOHNSON</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2016	
Mailing Address 10741 W. TROPICANA CIRCLE			Transaction ID : SA12.3102919	
City SUN CITY	State AZ	Zip Code 85351-1507	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee.			<input checked="" type="checkbox"/> Memo Item TRANSFER	
Name of Employer HERBALIFE INTERNATIONAL		Occupation RETIRED	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2800.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>DAVID LEE</b>			Date of Receipt MM / DD / YYYY 03 / 30 / 2016	
Mailing Address 1021 OAK GROVE AVENUE			Transaction ID : SA12.3102921	
City SAN MARINO	State CA	Zip Code 91108-1025	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee.			<input checked="" type="checkbox"/> Memo Item TRANSFER	
Name of Employer CLARITY PARTNERS		Occupation MANAGING GENERAL PARTNER	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5000.00		
SUBTOTAL of Receipts This Page (optional).....			0.00	
TOTAL This Period (last page this line number only).....				

20160414020097949



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 425 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>CHARLES N. MATHEWSON</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2016
Mailing Address 4000 GOODSSELL LANE		Transaction ID : SA12.3102904
City RENO	State NV	Zip Code 89523-8834
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer RETIRED	Occupation RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) <b>RICHARD F. MOGAN</b>		Date of Receipt MM / DD / YYYY 03 / 19 / 2016
Mailing Address 10375 WILSHIRE BOULEVARD #14E		Transaction ID : SA12.3102908
City LOS ANGELES	State CA	Zip Code 90024-4713
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer RETIRED	Occupation RETIRED	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2700.00	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) <b>RUPERT MURDOCH</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2016
Mailing Address 10201 W. PICO BOULEVARD		Transaction ID : SA12.3102906
City LOS ANGELES	State CA	Zip Code 90064-2606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2700.00
Name of Employer 21ST CENTURY FOX	Occupation CHAIRMAN	<input checked="" type="checkbox"/> Memo Item TRANSFER
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201604140200097950

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 426 OF 590
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.**

Full Name (Last, First, Middle Initial)  
**JAMES R. PARKS**

Mailing Address **10474 SANTA MONICA BOULEVARD**

City **LOS ANGELES** State **CA** Zip Code **90025-6929**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CBIZ MHM LLC** Occupation **EXECUTIVE DIRECTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 17 / 2016**

Transaction ID : **SA12.3102901**

Amount of Each Receipt this Period **2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

**B.**

Full Name (Last, First, Middle Initial)  
**RICHARD J. RIORDAN**

Mailing Address **10880 WILSHIRE BOULEVARD  
SUITE 800**

City **LOS ANGELES** State **CA** Zip Code **90024-4124**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 31 / 2016**

Transaction ID : **SA12.3102924**

Amount of Each Receipt this Period **2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

**C.**

Full Name (Last, First, Middle Initial)  
**EDWARD P. ROSKI JR.**

Mailing Address **13191 CROSSROADS PARKWAY NORTH  
6TH FLOOR**

City **CITY OF INDUSTRY** State **CA** Zip Code **91746-3421**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MAJESTIC REALTY COMPANY** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt **03 / 17 / 2016**

Transaction ID : **SA12.3102907**

Amount of Each Receipt this Period **2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

**SUBTOTAL** of Receipts This Page (optional)..... **0.00**

**TOTAL** This Period (last page this line number only).....

201604140200097951

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 427 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. PAUL SCHWARTZ**

Mailing Address **1143 RONDA DRIVE**  
**#336**

City **MANHATTAN BEACH** State **CA** Zip Code **90266-6819**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF-EMPLOYED** Occupation **REAL ESTATE INVESTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 MM /  DD /  YYYY  
**03 / 17 / 2016**

Transaction ID : **SA12.3102905**

Amount of Each Receipt this Period  
**1000.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**RUTH B. SHANNON**

Mailing Address **14081 SUMMIT DRIVE**

City **WHITTIER** State **CA** Zip Code **90602-1955**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 MM /  DD /  YYYY  
**03 / 29 / 2016**

Transaction ID : **SA12.3102913**

Amount of Each Receipt this Period  
**1250.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**JERI SHAPIRO**

Mailing Address **14225 VENTURA BOULEVARD**

City **SHERMAN OAKS** State **CA** Zip Code **91423-2758**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WOODBRIIDGE STRUCTURED FUNDING** Occupation **CO-OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3200.00**

Date of Receipt  
 MM /  DD /  YYYY  
**03 / 17 / 2016**

Transaction ID : **SA12.3102903**

Amount of Each Receipt this Period  
**500.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Amount of Each Receipt this Period  
**0.00**

201604140200097952

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)		PAGE 428 OF 590	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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

Full Name (Last, First, Middle Initial) <b>A. JERI SHAPIRO</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2016	
Mailing Address 14225 VENTURA BOULEVARD			Transaction ID : SA12.3102912	
City SHERMAN OAKS	State CA	Zip Code 91423-2758	Amount of Each Receipt this Period 2200.00	
FEC ID number of contributing federal political committee.			<input checked="" type="checkbox"/> Memo Item TRANSFER	
Name of Employer WOODBRIDGE STRUCTURED FUNDING		Occupation CO-OWNER	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2200.00		
Full Name (Last, First, Middle Initial) <b>B. MR. ROBERT SHAPIRO</b>			Date of Receipt MM / DD / YYYY 03 / 17 / 2016	
Mailing Address 14225 VENTURA BLVD #100			Transaction ID : SA12.3102902	
City SHERMAN OAKS	State CA	Zip Code 91423-2758	Amount of Each Receipt this Period 2700.00	
FEC ID number of contributing federal political committee.			<input checked="" type="checkbox"/> Memo Item TRANSFER	
Name of Employer WOODBRIDGE		Occupation EXECUTIVE	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00		
Full Name (Last, First, Middle Initial) <b>C. ROBERT SIMONDS</b>			Date of Receipt MM / DD / YYYY 03 / 19 / 2016	
Mailing Address 16030 VENTURA BOULEVARD			Transaction ID : SA12.3102909	
City ENCINO	State CA	Zip Code 91436-2731	Amount of Each Receipt this Period 1350.00	
FEC ID number of contributing federal political committee.			<input checked="" type="checkbox"/> Memo Item TRANSFER	
Name of Employer STX FILMWORKS LLC		Occupation FILM PRODUCER	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1350.00		
SUBTOTAL of Receipts This Page (optional).....			0.00	
TOTAL This Period (last page this line number only).....				

20160414020097953

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 429 OF 590
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**FLORENCE SLOAN**

Mailing Address **21600 OXNARD STREET**  
**# 500**

City **WOODLAND HILLS** State **CA** Zip Code **91367-4947**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 29 / 2016**

Transaction ID : **SA12.3102915**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**MR. GLENN B. STEARNS**

Mailing Address **3185 TUCKER RANCH ROAD**

City **WILSON** State **WY** Zip Code **83014-9703**

FEC ID number of contributing federal political committee. **C**

Name of Employer **STEARNS LENDING LLC** Occupation **MORTGAGE LENDER**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5300.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA12.3102923**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL R. TOFALO**

Mailing Address **P.O. BOX 5021**

City **SANTA MONICA** State **CA** Zip Code **90409-5021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3950.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 29 / 2016**

Transaction ID : **SA12.3102911**

Amount of Each Receipt this Period  
**100.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

201604140200097954

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 430 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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

**A.** Full Name (Last, First, Middle Initial)  
**DENNIS A. TROESH**

Mailing Address **1370 JET STREAM DRIVE**  
**SUITE 100**

City **HENDERSON** State **NV** Zip Code **89052-4234**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ROBERTSON'S READY MIX** Occupation **PRESIDENT**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 29 / 2016**

Transaction ID : **SA12.3102916**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

**B.** Full Name (Last, First, Middle Initial)  
**GARY L. WILSON**

Mailing Address **355 S. GRAND AVENUE**  
**SUITE 1710**

City **LOS ANGELES** State **CA** Zip Code **90071-1532**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MANHATTAN PACIFIC PARTNERS** Occupation **PRIVATE INVESTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
MM / DD / YYYY  
**03 / 29 / 2016**

Transaction ID : **SA12.3102920**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
TRANSFER

JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

**C.** Full Name (Last, First, Middle Initial)  
**MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

Mailing Address **228 S. WASHINGTON ST, STE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C** **C00608497**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **71890.19**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2016**

Transaction ID : **SA12.3102898**

Amount of Each Receipt this Period  
**32851.59**

Memo Item  
TRANSFER

TRANSFER OF JOINT FUNDRAISING PROCEEDS

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**32851.59**

201604140200097955

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 431 OF 590
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MR. HERBERT F. BOECKMANN II</b>		Date of Receipt <input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>	
Mailing Address 15505 ROSCOE BLVD.		Transaction ID : SA12.3102937	
City NORTH HILLS	State CA	Amount of Each Receipt this Period <input type="text" value="2300.00"/>	
Zip Code 91343-6503		<input checked="" type="checkbox"/> Memo Item TRANSFER	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Name of Employer GALPIN MOTORS, INC.	Occupation PRESIDENT		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="5000.00"/>		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. JERRY BRUCKHEIMER</b>		Date of Receipt <input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>	
Mailing Address 16030 VENTURA BLVD. #380 #380		Transaction ID : SA12.3102944	
City ENCINO	State CA	Amount of Each Receipt this Period <input type="text" value="100.00"/>	
Zip Code 91436-2778		<input checked="" type="checkbox"/> Memo Item TRANSFER	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Name of Employer JERRY BRUCKHEIMER FILMS	Occupation PRODUCER		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="400.00"/>		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>DALE L. DYKEMA</b>		Date of Receipt <input type="text" value="03"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>	
Mailing Address 1969 VISTA CAUDAL		Transaction ID : SA12.3102933	
City NEWPORT BEACH	State CA	Amount of Each Receipt this Period <input type="text" value="500.00"/>	
Zip Code 92660-3915		<input checked="" type="checkbox"/> Memo Item TRANSFER	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	
Name of Employer TD SERVICE FINANCIAL CORP.	Occupation CEO		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="500.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value="0.00"/>

20160414020097956

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 432 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MELVIN B. GELIBTER</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2016		
Mailing Address P.O. BOX 1760			Transaction ID : SA12.3102938		
City	State	Zip Code	Amount of Each Receipt this Period 2500.00		
SANTA MONICA	CA	90406-1760	<input checked="" type="checkbox"/> Memo Item TRANSFER		
FEC ID number of contributing federal political committee.		C	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE		
Name of Employer RETIRED		Occupation RETIRED			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00			
<b>B.</b> Full Name (Last, First, Middle Initial) <b>MR. DAVID L. HOROWITZ</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2016		
Mailing Address 27241 LA PAZ ROAD SUITE B.			Transaction ID : SA12.3102934		
City	State	Zip Code	Amount of Each Receipt this Period 2600.00		
LAGUNA NIGUEL	CA	92677-3636	<input checked="" type="checkbox"/> Memo Item TRANSFER		
FEC ID number of contributing federal political committee.		C	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE		
Name of Employer HOROWITZ GROUP		Occupation PRESIDENT			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5300.00			
<b>C.</b> Full Name (Last, First, Middle Initial) <b>MRS. MARY S. JOHNSON</b>			Date of Receipt MM / DD / YYYY 03 / 29 / 2016		
Mailing Address 10741 W. TROPICANA CIRCLE			Transaction ID : SA12.3102939		
City	State	Zip Code	Amount of Each Receipt this Period 2700.00		
SUN CITY	AZ	85351-1507	<input checked="" type="checkbox"/> Memo Item TRANSFER		
FEC ID number of contributing federal political committee.		C	JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE		
Name of Employer HERBALIFE INTERNATIONAL		Occupation RETIRED			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2800.00			
<b>SUBTOTAL</b> of Receipts This Page (optional).....			0.00		
<b>TOTAL</b> This Period (last page this line number only).....					

20160414020097957



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 433 OF 590
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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

**A.** Full Name (Last, First, Middle Initial)  
**DAVID LEE**

Mailing Address **1021 OAK GROVE AVENUE**

City **SAN MARINO** State **CA** Zip Code **91108-1025**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CLARITY PARTNERS** Occupation **MANAGING GENERAL PARTNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 30 / 2016**

Transaction ID : **SA12.3102943**

Amount of Each Receipt this Period  
**2300.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES N. MATHEWSON**

Mailing Address **4000 GOODSSELL LANE**

City **RENO** State **NV** Zip Code **89523-8834**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 17 / 2016**

Transaction ID : **SA12.3102927**

Amount of Each Receipt this Period  
**2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. DIANE MENDEZ-PADEFORD**

Mailing Address **18104 S. SUMMER AVENUE**

City **ARTESIA** State **CA** Zip Code **90701-**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **8100.00**

Date of Receipt  
 MM / DD / YYYY  
**03 / 29 / 2016**

Transaction ID : **SA12.3102940**

Amount of Each Receipt this Period  
**144.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

20160414020097958

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 434 OF 590
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>RUPERT MURDOCH</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2016
Mailing Address 10201 W. PICO BOULEVARD		Transaction ID : SA12.3102929
City	State	Zip Code
LOS ANGELES	CA	90064-2606
FEC ID number of contributing federal political committee.	C	
Name of Employer 21ST CENTURY FOX	Occupation CHAIRMAN	Amount of Each Receipt this Period 2500.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	<input checked="" type="checkbox"/> Memo Item TRANSFER
		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) <b>JAMES R. PARKS</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2016
Mailing Address 10474 SANTA MONICA BOULEVARD		Transaction ID : SA12.3102925
City	State	Zip Code
LOS ANGELES	CA	90025-6929
FEC ID number of contributing federal political committee.	C	
Name of Employer CBIZ MHM LLC	Occupation EXECUTIVE DIRECTOR	Amount of Each Receipt this Period 2700.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	<input checked="" type="checkbox"/> Memo Item TRANSFER
		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

Full Name (Last, First, Middle Initial) <b>RICHARD J. RIORDAN</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2016
Mailing Address 10880 WILSHIRE BOULEVARD SUITE 800		Transaction ID : SA12.3102945
City	State	Zip Code
LOS ANGELES	CA	90024-4124
FEC ID number of contributing federal political committee.	C	
Name of Employer SELF-EMPLOYED	Occupation INVESTOR	Amount of Each Receipt this Period 2700.00
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5400.00	<input checked="" type="checkbox"/> Memo Item TRANSFER
		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE

SUBTOTAL of Receipts This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	

20160414020097959

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 435 OF 590
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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

**A.** Full Name (Last, First, Middle Initial)  
**MR. HOWARD ROSE**

Mailing Address **9460 WILSHIRE BLVD, STE. 310  
SUITE 310**

City **BEVERLY HILLS** State **CA** Zip Code **90212-2732**

FEC ID number of contributing federal political committee. **C**

Name of Employer **THE HOWARD ROSE AGENCY** Occupation **ARTIST MANAGER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
03			17			2016			

Transaction ID : **SA12.3102928**

Amount of Each Receipt this Period  

200.00
--------

Memo Item  
TRANSFER

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)  
**EDWARD P. ROSKI JR.**

Mailing Address **13191 CROSSROADS PARKWAY NORTH  
6TH FLOOR**

City **CITY OF INDUSTRY** State **CA** Zip Code **91746-3421**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MAJESTIC REALTY COMPANY** Occupation **CHAIRMAN**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
03			17			2016			

Transaction ID : **SA12.3102930**

Amount of Each Receipt this Period  

2700.00
---------

Memo Item  
TRANSFER

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**C.** Full Name (Last, First, Middle Initial)  
**JERI SHAPIRO**

Mailing Address **14225 VENTURA BOULEVARD**

City **SHERMAN OAKS** State **CA** Zip Code **91423-2758**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WOODBRIIDGE STRUCTURED FUNDING** Occupation **CO-OWNER**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3200.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
03			29			2016			

Transaction ID : **SA12.3102932**

Amount of Each Receipt this Period  

2700.00
---------

Memo Item  
TRANSFER

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Amount of Each Receipt this Period  

0.00
------

20160414020097960

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 436 OF 590
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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

Full Name (Last, First, Middle Initial) <b>MR. ROBERT SHAPIRO</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2016	
Mailing Address 14225 VENTURA BLVD #100		Transaction ID : SA12.3102926	
City SHERMAN OAKS	State CA	Zip Code 91423-2758	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2700.00	
Name of Employer WOODBRIDGE		Occupation EXECUTIVE	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00	
		<input checked="" type="checkbox"/> Memo Item TRANSFER	
		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	

Full Name (Last, First, Middle Initial) <b>FLORENCE SLOAN</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2016	
Mailing Address 21600 OXNARD STREET # 500		Transaction ID : SA12.3102936	
City WOODLAND HILLS	State CA	Zip Code 91367-4947	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2700.00	
Name of Employer HOMEMAKER		Occupation HOMEMAKER	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5400.00	
		<input checked="" type="checkbox"/> Memo Item TRANSFER	
		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	

Full Name (Last, First, Middle Initial) <b>MR. MICHAEL R. TOFALO</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2016	
Mailing Address P.O. BOX 5021		Transaction ID : SA12.3102931	
City SANTA MONICA	State CA	Zip Code 90409-5021	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1250.00	
Name of Employer RETIRED		Occupation RETIRED	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3950.00	
		<input checked="" type="checkbox"/> Memo Item TRANSFER	
		JFC ATTRIB: MCCAIN AYOTTE JOINT VICTORY COMMITTEE	

SUBTOTAL of Receipts This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	0.00

20160414020097961

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 437 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**GARY L. WILSON**

Mailing Address **355 S. GRAND AVENUE  
SUITE 1710**

City **LOS ANGELES** State **CA** Zip Code **90071-1532**

FEC ID number of contributing federal political committee.  C

Name of Employer **MANHATTAN PACIFIC PARTNERS** Occupation **PRIVATE INVESTOR**

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5400.00**

Date of Receipt  
 M M /  D D /  Y Y Y Y Y  
**03 / 29 / 2016**

Transaction ID : **SA12.3102941**

Amount of Each Receipt this Period  
 \$ **2700.00**

Memo Item  
**TRANSFER**

JFC ATTRIB: **MCCAIN AYOTTE JOINT VICTORY COMMITTEE**

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period  
 \$

Memo Item

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period  
 \$

Memo Item

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

148903.60

201604140200097962

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 438 OF 590  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**JEB 2016, INC.**

Mailing Address **6334 PUMPERNICKEL LANE**

City **MONROE** State **NC** Zip Code **28110**

FEC ID number of contributing federal political committee. **C C00579458**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **609.65**

Date of Receipt **MM / DD / YYYY**  
**02 / 29 / 2016**

Transaction ID : **SA15.4**

Amount of Each Receipt this Period **609.65**

Memo Item  
**LIST RENTAL INCOME**

**B.** Full Name (Last, First, Middle Initial)  
**CAMPAIGN SOLUTIONS**

Mailing Address **117 N ST ASAPH ST**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **896533.05**

Date of Receipt **MM / DD / YYYY**  
**02 / 26 / 2016**

Transaction ID : **SA15.5**

Amount of Each Receipt this Period **28537.58**

Memo Item  
**LIST RENTAL INCOME**

**C.** Full Name (Last, First, Middle Initial)  
**CAMPAIGN SOLUTIONS**

Mailing Address **117 N ST ASAPH ST**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date **896533.05**

Date of Receipt **MM / DD / YYYY**  
**03 / 22 / 2016**

Transaction ID : **SA15.6**

Amount of Each Receipt this Period **112385.07**

Memo Item  
**LIST RENTAL INCOME**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**141532.30**

20160414020097963

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 439 OF 590

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>JP MORGAN CHASE BANK</b>		Date of Receipt MM / DD / YYYY 01 / 31 / 2016
Mailing Address 10300 W THUNDERBIRD BLVD		Transaction ID : SA15.1
City SUN CITY	State AZ	Zip Code 85351
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 8.99	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item INTEREST EARNINGS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1669.68	

Full Name (Last, First, Middle Initial) <b>JP MORGAN CHASE BANK</b>		Date of Receipt MM / DD / YYYY 02 / 29 / 2016
Mailing Address 10300 W THUNDERBIRD BLVD		Transaction ID : SA15.2
City SUN CITY	State AZ	Zip Code 85351
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 8.41	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item INTEREST EARNINGS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1669.68	

Full Name (Last, First, Middle Initial) <b>JP MORGAN CHASE BANK</b>		Date of Receipt MM / DD / YYYY 02 / 29 / 2016
Mailing Address 10300 W THUNDERBIRD BLVD		Transaction ID : SA15.3
City SUN CITY	State AZ	Zip Code 85351
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 8.99	
Name of Employer	Occupation	<input type="checkbox"/> Memo Item INTEREST EARNINGS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1669.68	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	26.39
<b>TOTAL</b> This Period (last page this line number only) .....	141558.69

201604140200097964

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. TREVOR ABARZUA</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 6400 E THOMAS RD, APT 1060		Amount of Each Disbursement this Period 195.90
City SCOTTSDALE	State AZ	
Zip Code 85251	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.225
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TREVOR ABARZUA</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 6400 E THOMAS RD, APT 1060		Amount of Each Disbursement this Period 125.00
City SCOTTSDALE	State AZ	
Zip Code 85251	Purpose of Disbursement PER DIEM	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.600
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TREVOR ABARZUA</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 6400 E THOMAS RD, APT 1060		Amount of Each Disbursement this Period 70.90
City SCOTTSDALE	State AZ	
Zip Code 85251	Purpose of Disbursement MILEAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.601
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	195.90
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097965



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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

**A. TREVOR ABARZUA**

Full Name (Last, First, Middle Initial)

Mailing Address 6400 E THOMAS RD, APT 1060

City SCOTTSDALE State AZ Zip Code 85251

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 29 / 2016

Amount of Each Disbursement this Period: 158.64

Memo Item

Transaction ID : SB17B.226

**B. TREVOR ABARZUA**

Full Name (Last, First, Middle Initial)

Mailing Address 6400 E THOMAS RD, APT 1060

City SCOTTSDALE State AZ Zip Code 85251

Purpose of Disbursement PER DIEM

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period: 125.00

Memo Item

Transaction ID : SB17B.604

**C. UBER**

Full Name (Last, First, Middle Initial)

Mailing Address 706 MISSION ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period: 14.23

Memo Item

Transaction ID : SB17B.605

**SUBTOTAL** of Disbursements This Page (optional)..... 158.64

**TOTAL** This Period (last page this line number only).....

201604140200097966

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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

**A. UBER**

Full Name (Last, First, Middle Initial)  
Mailing Address 706 MISSION ST

City SAN FRANCISCO    State CA    Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 19.41

Memo Item

Transaction ID : SB17B.606

**B. TREVOR ABARZUA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 15 / 2016

Amount of Each Disbursement this Period: 798.89

Memo Item

Transaction ID : SB17B.227

**C. TREVOR ABARZUA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 31 / 2016

Amount of Each Disbursement this Period: 894.58

Memo Item

Transaction ID : SB17B.228

SUBTOTAL of Disbursements This Page (optional) ..... 1693.47

TOTAL This Period (last page this line number only) .....

20160414020097967

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. TREVOR ABARZUA</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 894.58 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.229
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. TREVOR ABARZUA</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 894.58 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.230
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. TREVOR ABARZUA</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 894.58 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.231
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2683.74
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097968

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. TREVOR ABARZUA</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 944.58 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.232
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. BLAZE BAGGS</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 525 E LOMA VISTA DR		Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item
City TEMPE	State AZ	
Zip Code 85282	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.44
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. AZ MLK CELEBRATION CMTEE</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 1202 N 3RD ST		Amount of Each Disbursement this Period 50.00 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement REGISTRATION FEE	Transaction ID : SB17B.520
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	944.58
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097969

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. BLAZE BAGGS</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 525 E LOMA VISTA DR		Amount of Each Disbursement this Period 834.10 <input type="checkbox"/> Memo Item
City TEMPE	State AZ	
Zip Code 85282	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.45
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. BLAZE BAGGS</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 525 E LOMA VISTA DR		Amount of Each Disbursement this Period 50.00 <input checked="" type="checkbox"/> Memo Item
City TEMPE	State AZ	
Zip Code 85282	Purpose of Disbursement PER DIEM	Transaction ID : SB17B.523
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. COSTCO WHOLESALE-PHOENIX</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 1703 W BETHANY HOME RD		Amount of Each Disbursement this Period 784.10 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85015	Purpose of Disbursement FOOD AND BEVERAGE	Transaction ID : SB17B.524
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	834.10
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097970

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. BLAZE BAGGS</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 1900.26	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name		Transaction ID : SB17B.46	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. BLAZE BAGGS</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 1900.26	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name		Transaction ID : SB17B.47	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. BLAZE BAGGS</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 1900.26	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name		Transaction ID : SB17B.48	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5700.78
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097971

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. BLAZE BAGGS**

Mailing Address 1702 E HIGHLAND

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 29 / 2016

City PHOENIX State AZ Zip Code 85016

Amount of Each Disbursement this Period

1900.26
---------

Purpose of Disbursement  
PAYROLL

--

Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17B.49

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. BLAZE BAGGS**

Mailing Address 1702 E HIGHLAND

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 15 / 2016

City PHOENIX State AZ Zip Code 85016

Amount of Each Disbursement this Period

1900.26
---------

Purpose of Disbursement  
PAYROLL

--

Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17B.50

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. BLAZE BAGGS**

Mailing Address 1702 E HIGHLAND

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 31 / 2016

City PHOENIX State AZ Zip Code 85016

Amount of Each Disbursement this Period

1900.26
---------

Purpose of Disbursement  
PAYROLL

--

Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17B.51

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

5700.78
---------

**TOTAL** This Period (last page this line number only).....

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201604140200097972

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. KATHERINE FRANQUIST</b>		Date of Disbursement MM / DD / YYYY <b>01 / 15 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period 1812.32 <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.142</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. KATHERINE FRANQUIST</b>		Date of Disbursement MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period 1812.32 <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.143</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. KATHERINE FRANQUIST</b>		Date of Disbursement MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period 1812.32 <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.144</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5436.96
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097973



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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

**A. KATHERINE FRANQUIST**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
02 / 29 / 2016

Amount of Each Disbursement this Period  
1812.32

Memo Item

Transaction ID : SB17B.145

**B. KATHERINE FRANQUIST**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
03 / 15 / 2016

Amount of Each Disbursement this Period  
1812.32

Memo Item

Transaction ID : SB17B.146

**C. KATHERINE FRANQUIST**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
03 / 31 / 2016

Amount of Each Disbursement this Period  
1812.32

Memo Item

Transaction ID : SB17B.147

**SUBTOTAL** of Disbursements This Page (optional)..... 5436.96

**TOTAL** This Period (last page this line number only).....

201604140200097974

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 450 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. TAMARA HALLISEY</b>		Date of Disbursement MM / DD / YYYY <b>01 / 15 / 2016</b>
Mailing Address <b>228 S WASHINGTON ST STE 115</b>		Amount of Each Disbursement this Period <b>1809.97</b> <input type="checkbox"/> Memo Item
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.208</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. TAMARA HALLISEY</b>		Date of Disbursement MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>228 S WASHINGTON ST STE 115</b>		Amount of Each Disbursement this Period <b>1809.97</b> <input type="checkbox"/> Memo Item
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.209</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TAMARA HALLISEY</b>		Date of Disbursement MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>228 S WASHINGTON ST STE 115</b>		Amount of Each Disbursement this Period <b>1809.97</b> <input type="checkbox"/> Memo Item
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.210</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5429.91</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200097975

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 451 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. TAMARA HALLISEY</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Disbursement this Period 1809.97 <input type="checkbox"/> Memo Item
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.211
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. TAMARA HALLISEY</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Disbursement this Period 1809.97 <input type="checkbox"/> Memo Item
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.212
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. TAMARA HALLISEY</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Disbursement this Period 1809.97 <input type="checkbox"/> Memo Item
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.213
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5429.91
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097976

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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

**A. TIMON G. HARPER**

Full Name (Last, First, Middle Initial)

Mailing Address 5317 E FOREST PLEASANT PL

City CAVE CREEK    State AZ    Zip Code 85331

Purpose of Disbursement PHOTOGRAPHY SVC

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 28 / 2016

Amount of Each Disbursement this Period: 1487.60

Memo Item

Transaction ID : SB17B.218

**B. MR. STEVEN J. HILTON**

Full Name (Last, First, Middle Initial)

Mailing Address 10387 E. ROB'S CAMP ROAD

City SCOTTSDALE    State AZ    Zip Code 85255-7165

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House     Senate     President

Disbursement For: 2016  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 08 / 2016

Amount of Each Disbursement this Period: 2200.00

Memo Item

Transaction ID : SB17.3100820  
CATERING

**C. MRS. SUZANNE HILTON**

Full Name (Last, First, Middle Initial)

Mailing Address 10387 E. ROB'S CAMP ROAD

City SCOTTSDALE    State AZ    Zip Code 85255-7165

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House     Senate     President

Disbursement For: 2016  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 08 / 2016

Amount of Each Disbursement this Period: 2340.16

Memo Item

Transaction ID : SB17.3100821  
CATERING

**SUBTOTAL** of Disbursements This Page (optional)..... 6027.76

**TOTAL** This Period (last page this line number only).....

201604140200097977

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. AMBER JOHNSON**

Mailing Address 228 S WASHINGTON ST STE 115

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2016

City State Zip Code  
ALEXANDRIA VA 22314

Amount of Each Disbursement this Period

3138.44

Purpose of Disbursement  
PAYROLL

Category/  
Type

Memo Item

Candidate Name

Transaction ID : SB17B.10

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. AMBER JOHNSON**

Mailing Address 228 S WASHINGTON ST STE 115

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2016

City State Zip Code  
ALEXANDRIA VA 22314

Amount of Each Disbursement this Period

3138.44

Purpose of Disbursement  
PAYROLL

Category/  
Type

Memo Item

Candidate Name

Transaction ID : SB17B.11

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. AMBER JOHNSON**

Mailing Address 228 S WASHINGTON ST STE 115

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

City State Zip Code  
ALEXANDRIA VA 22314

Amount of Each Disbursement this Period

3138.44

Purpose of Disbursement  
PAYROLL

Category/  
Type

Memo Item

Candidate Name

Transaction ID : SB17B.12

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

9415.32

TOTAL This Period (last page this line number only).....

201604140200097978

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 454 OF 590
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. AMBER JOHNSON</b>		Date of Disbursement MM / DD / YYYY <b>03 / 15 / 2016</b>
Mailing Address <b>228 S WASHINGTON ST STE 115</b>		Amount of Each Disbursement this Period <b>3138.44</b> <input type="checkbox"/> Memo Item
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.13</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMBER JOHNSON</b>		Date of Disbursement MM / DD / YYYY <b>03 / 31 / 2016</b>
Mailing Address <b>228 S WASHINGTON ST STE 115</b>		Amount of Each Disbursement this Period <b>3138.44</b> <input type="checkbox"/> Memo Item
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.14</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMBER JOHNSON</b>		Date of Disbursement MM / DD / YYYY <b>01 / 15 / 2016</b>
Mailing Address <b>228 S WASHINGTON ST STE 115</b>		Amount of Each Disbursement this Period <b>3138.44</b> <input type="checkbox"/> Memo Item
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.9</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>9415.32</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097979

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: PAGE 455 OF 590  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial)  
**A. AUSTIN KENNEDY**

Date of Disbursement  
MM / DD / YYYY  
02 / 18 / 2016

Mailing Address 116 3RD ST NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
305.30

Memo Item

Transaction ID : SB17B.27

Full Name (Last, First, Middle Initial)  
**B. AUSTIN KENNEDY**

Date of Disbursement  
MM / DD / YYYY  
02 / 18 / 2016

Mailing Address 116 3RD ST NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement LOGISTICS CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
249.10

Memo Item

Transaction ID : SB17B.512

Full Name (Last, First, Middle Initial)  
**C. UBER**

Date of Disbursement  
MM / DD / YYYY  
02 / 18 / 2016

Mailing Address 706 MISSION ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Amount of Each Disbursement this Period  
56.20

Memo Item

Transaction ID : SB17B.511

**SUBTOTAL** of Disbursements This Page (optional)..... 305.30

**TOTAL** This Period (last page this line number only).....

201604140200097980

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. HOLLY LANE**

Mailing Address 213 1/2 S PLEASANT ST

City PRESCOTT State AZ Zip Code 86303

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 01 / 2016

Amount of Each Disbursement this Period

395.43
--------

Memo Item

Transaction ID : SB17B.108

**B. HOLLY LANE**

Mailing Address 213 1/2 S PLEASANT ST

City PRESCOTT State AZ Zip Code 86303

Purpose of Disbursement  
MILEAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 01 / 2016

Amount of Each Disbursement this Period

350.75
--------

Memo Item

Transaction ID : SB17B.534

**C. FLAGSTAFF REPUBLICAN WOMEN**

Mailing Address 1122 N MARINA LN

City FLAGSTAFF State AZ Zip Code 86004

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 01 / 2016

Amount of Each Disbursement this Period

20.00
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Memo Item

Transaction ID : SB17B.536

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

395.43
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201604140200097981



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. VERDE VALLEY REPUBLICAN WOMEN**

Mailing Address PO BOX 2521

Date of Disbursement

M M / D D / Y Y Y Y
02 / 01 / 2016

City State Zip Code  
SEDONA AZ 86339

Amount of Each Disbursement this Period

7.00
------

Purpose of Disbursement  
REGISTRATION FEE

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Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17B.535

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. WALMART**

Mailing Address 3721 E THOMAS RD

Date of Disbursement

M M / D D / Y Y Y Y
02 / 01 / 2016

City State Zip Code  
PHOENIX AZ 85018

Amount of Each Disbursement this Period

7.68
------

Purpose of Disbursement  
PAPER

--

Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17B.537

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. HOLLY LANE**

Mailing Address 213 1/2 S PLEASANT ST

Date of Disbursement

M M / D D / Y Y Y Y
02 / 29 / 2016

City State Zip Code  
PRESCOTT AZ 86303

Amount of Each Disbursement this Period

767.39
--------

Purpose of Disbursement  
TRAVEL

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Memo Item

Candidate Name

Category/  
Type

Transaction ID : SB17B.109

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

767.39
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**TOTAL** This Period (last page this line number only).....

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201604140200097982

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. HOLLY LANE</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 213 1/2 S PLEASANT ST		Amount of Each Disbursement this Period 118.45
City PRESCOTT	State AZ	
Zip Code 86303	Purpose of Disbursement MILEAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.563
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHEVRON</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 27.36
City SAN RAMON	State CA	
Zip Code 94583	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.558
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CIRCLE K</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address PO BOX 52085		Amount of Each Disbursement this Period 34.30
City PHOENIX	State AZ	
Zip Code 85072	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.543
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097983

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. CIRCLE K**

Mailing Address PO BOX 52085

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 09 / 2016

Amount of Each Disbursement this Period

10.08
-------

Memo Item

Transaction ID : SB17B.545

**B. CIRCLE K**

Mailing Address PO BOX 52085

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 09 / 2016

Amount of Each Disbursement this Period

15.22
-------

Memo Item

Transaction ID : SB17B.551

**C. CIRCLE K**

Mailing Address PO BOX 52085

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 09 / 2016

Amount of Each Disbursement this Period

13.32
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Memo Item

Transaction ID : SB17B.554

**SUBTOTAL** of Disbursements This Page (optional).....

0.00
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**TOTAL** This Period (last page this line number only).....

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201604140200097984

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. GOOD 2 GO</b>		Date of Disbursement <b>MM / DD / YYYY</b> 03 / 09 / 2016
Mailing Address 1555 E HWY 69		Amount of Each Disbursement this Period <b>23.95</b>
City PRESCOTT	State AZ	
Zip Code 86327	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.560
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HASTINGS</b>		Date of Disbursement <b>MM / DD / YYYY</b> 03 / 09 / 2016
Mailing Address 940 WILLOW CREEK RD		Amount of Each Disbursement this Period <b>3.24</b>
City PRESCOTT	State AZ	
Zip Code 86301	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.540
State: District:		

Full Name (Last, First, Middle Initial) <b>C. KARMA SUSHI</b>		Date of Disbursement <b>MM / DD / YYYY</b> 03 / 09 / 2016
Mailing Address 6 E ROUTE 66		Amount of Each Disbursement this Period <b>46.67</b>
City FLAGSTAFF	State AZ	
Zip Code 86001	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.550
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<b>0.00</b>
TOTAL This Period (last page this line number only).....	

201604140200097985

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 461 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. MAVERICK COUNTRY STORE</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 1690 W ROUTE 66		Amount of Each Disbursement this Period 25.04
City FLAGSTAFF	State AZ	
Zip Code 86001	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.559
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. MINGUS MOUNTAIN REPUBLICAN CLUB</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address PO BOX 696		Amount of Each Disbursement this Period 11.00
City COTTONWOD	State AZ	
Zip Code 86326	Purpose of Disbursement TICKETS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.546
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. RWOP</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address PO BOX 10932		Amount of Each Disbursement this Period 20.00
City PRESCOTT	State AZ	
Zip Code 86304	Purpose of Disbursement TICKETS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.553
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097986

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: PAGE 462 OF 590  
(check only one)  
 17 18 19a 19b  
20a 20b 20c 21

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

Full Name (Last, First, Middle Initial)  
**A. STAPLES**

Mailing Address **963 NORLAND AVE**

City **CHAMBERSBURG** State **PA** Zip Code **17201**

Purpose of Disbursement  
**PAPER**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**03 / 09 / 2016**

Amount of Each Disbursement this Period  
**36.89**

Memo Item

Transaction ID : **SB17B.548**

Full Name (Last, First, Middle Initial)  
**B. STAPLES**

Mailing Address **963 NORLAND AVE**

City **CHAMBERSBURG** State **PA** Zip Code **17201**

Purpose of Disbursement  
**PAPER**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**03 / 09 / 2016**

Amount of Each Disbursement this Period  
**53.34**

Memo Item

Transaction ID : **SB17B.549**

Full Name (Last, First, Middle Initial)  
**C. STAPLES**

Mailing Address **963 NORLAND AVE**

City **CHAMBERSBURG** State **PA** Zip Code **17201**

Purpose of Disbursement  
**PAPER**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**03 / 09 / 2016**

Amount of Each Disbursement this Period  
**112.31**

Memo Item

Transaction ID : **SB17B.552**

**SUBTOTAL** of Disbursements This Page (optional)..... **0.00**

**TOTAL** This Period (last page this line number only).....

201604140200097987

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: PAGE 463 OF 590  
 17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial)  
**A. STAPLES**

Mailing Address 963 NORLAND AVE

City CHAMBERSBURG    State PA    Zip Code 17201

Purpose of Disbursement PAPER

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 7.15

Memo Item

Transaction ID : SB17B.562

Full Name (Last, First, Middle Initial)  
**B. STARBUCKS-PHOENIX**

Mailing Address 2824 N 44TH ST

City PHOENIX    State AZ    Zip Code 85001

Purpose of Disbursement FOOD AND BEVERAGES

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 30.00

Memo Item

Transaction ID : SB17B.555

Full Name (Last, First, Middle Initial)  
**C. STARBUCKS-PHOENIX**

Mailing Address 2824 N 44TH ST

City PHOENIX    State AZ    Zip Code 85001

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 16.12

Memo Item

Transaction ID : SB17B.557

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

201604140200097988

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<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)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY	03 / 09 / 2016
----------------	----------------

**A. TARGET**

Mailing Address 4515 E THOMAS RD

Amount of Each Disbursement this Period

25.75
-------

City State Zip Code  
PHOENIX AZ 85018

Purpose of Disbursement  
PAPER

Category/Type
---------------

Memo Item

Candidate Name

Transaction ID : SB17B.547

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY	03 / 09 / 2016
----------------	----------------

**B. TARGET PHOENIX**

Mailing Address 5715 N 19TH AVE

Amount of Each Disbursement this Period

16.18
-------

City State Zip Code  
PHOENIX AZ 85015

Purpose of Disbursement  
PAPER

Category/Type
---------------

Memo Item

Candidate Name

Transaction ID : SB17B.541

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY	03 / 09 / 2016
----------------	----------------

**C. TARGET PHOENIX**

Mailing Address 5715 N 19TH AVE

Amount of Each Disbursement this Period

4.31
------

City State Zip Code  
PHOENIX AZ 85015

Purpose of Disbursement  
PAPER

Category/Type
---------------

Memo Item

Candidate Name

Transaction ID : SB17B.542

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00
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TOTAL This Period (last page this line number only).....

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201604140200097989



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17  
20a     18  
20b     19a  
20c     19b  
21

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

**A. WALMART**

Full Name (Last, First, Middle Initial)  
Mailing Address 3721 E THOMAS RD

City PHOENIX State AZ Zip Code 85018

Purpose of Disbursement PAPER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period: 61.21

Memo Item

Transaction ID : SB17B.556

**B. WALMART**

Full Name (Last, First, Middle Initial)  
Mailing Address 3721 E THOMAS RD

City PHOENIX State AZ Zip Code 85018

Purpose of Disbursement PAPER

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period: 37.50

Memo Item

Transaction ID : SB17B.561

**C. YAVAPAI FAIR**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 1271

City CHINO VALLEY State AZ Zip Code 86323

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period: 18.00

Memo Item

Transaction ID : SB17B.544

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

201604140200097990

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. HOLLY LANE</b>		Date of Disbursement MM / DD / YYYY <b>01 / 15 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>679.11</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : <b>SB17B.110</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HOLLY LANE</b>		Date of Disbursement MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1374.63</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : <b>SB17B.111</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HOLLY LANE</b>		Date of Disbursement MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1390.38</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : <b>SB17B.112</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3444.12</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097991

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. HOLLY LANE</b>		Date of Disbursement MM / DD / YYYY <b>02 / 29 / 2016</b>	
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1390.38</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85016</b>	<input type="checkbox"/> Memo Item
Purpose of Disbursement <b>PAYROLL</b>		Category/ Type	Transaction ID : <b>SB17B.113</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. HOLLY LANE</b>		Date of Disbursement MM / DD / YYYY <b>03 / 15 / 2016</b>	
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1577.01</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85016</b>	<input type="checkbox"/> Memo Item
Purpose of Disbursement <b>PAYROLL</b>		Category/ Type	Transaction ID : <b>SB17B.114</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HOLLY LANE</b>		Date of Disbursement MM / DD / YYYY <b>03 / 31 / 2016</b>	
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1577.01</b>	
City <b>PHOENIX</b>	State <b>AZ</b>	Zip Code <b>85016</b>	<input type="checkbox"/> Memo Item
Purpose of Disbursement <b>PAYROLL</b>		Category/ Type	Transaction ID : <b>SB17B.115</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4544.40</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097992

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. DYLAN LEFLER</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 2803 E ROSEWOOD DR		Amount of Each Disbursement this Period 26.15
City CHANDLER	State AZ	
Zip Code 85224	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.80
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. FRYS FOOD-PHOENIX</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 4724 N 20TH ST		Amount of Each Disbursement this Period 21.16
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement UMBRELLAS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.528
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. QUICKTRIP CORPORATION</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 1610 E HIGHLAND AVE		Amount of Each Disbursement this Period 4.99
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.527
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	26.15
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097993

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 469 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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

Full Name (Last, First, Middle Initial) <b>A. DYLAN LEFLER</b>			Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 2803 E ROSEWOOD DR			Amount of Each Disbursement this Period 17.38	
City CHANDLER	State AZ	Zip Code 85224	Memo Item <input type="checkbox"/>	
Purpose of Disbursement TRAVEL		Category/ Type		
Candidate Name		Transaction ID : SB17B.81		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. BARNES &amp; NOBLE.COM</b>			Date of Disbursement MM / DD / YYYY 03 / 16 / 2016	
Mailing Address 111 8TH AVE FL 9			Amount of Each Disbursement this Period 17.38	
City NEW YORK	State NY	Zip Code 10011	Memo Item <input checked="" type="checkbox"/>	
Purpose of Disbursement BOOKS		Category/ Type		
Candidate Name		Transaction ID : SB17B.531		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. DYLAN LEFLER</b>			Date of Disbursement MM / DD / YYYY 01 / 15 / 2016	
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 1390.38	
City PHOENIX	State AZ	Zip Code 85016	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17B.82		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1407.76
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097994

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 470 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. DYLAN LEFLER</b>		Date of Disbursement MM / DD / YYYY <b>01 / 31 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1605.01</b> <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.83</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DYLAN LEFLER</b>		Date of Disbursement MM / DD / YYYY <b>02 / 15 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1605.01</b> <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.84</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DYLAN LEFLER</b>		Date of Disbursement MM / DD / YYYY <b>02 / 29 / 2016</b>
Mailing Address <b>1702 E HIGHLAND</b>		Amount of Each Disbursement this Period <b>1605.01</b> <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85016</b>	Purpose of Disbursement <b>PAYROLL</b>	Transaction ID : <b>SB17B.85</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4815.03</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097995

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 471 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. DYLAN LEFLER</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016		
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 1605.01		
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item		
Purpose of Disbursement PAYROLL		Candidate Name	Transaction ID : SB17B.86		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	Category/ Type			

Full Name (Last, First, Middle Initial) <b>B. DYLAN LEFLER</b>			Date of Disbursement MM / DD / YYYY 03 / 31 / 2016		
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 1605.01		
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item		
Purpose of Disbursement PAYROLL		Candidate Name	Transaction ID : SB17B.87		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	Category/ Type			

Full Name (Last, First, Middle Initial) <b>C. ALEX MILLIKEN</b>			Date of Disbursement MM / DD / YYYY 02 / 01 / 2016		
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 125.00		
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item		
Purpose of Disbursement PER DIEM		Candidate Name	Transaction ID : SB17B.1		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	Category/ Type			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3335.02
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097996

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 125.00
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PER DIEM	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.500
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 225.80
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.2
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 125.00
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.510
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	225.80
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200097997



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. CHEVRON</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 4.99 <input checked="" type="checkbox"/> Memo Item
City SAN RAMON	State CA	
Zip Code 94583	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.503
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. CHEVRON</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 6001 BOLLINGER CANYON RD		Amount of Each Disbursement this Period 8.53 <input checked="" type="checkbox"/> Memo Item
City SAN RAMON	State CA	
Zip Code 94583	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.506
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. CHIPOTLE PHOENIX</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 1660 E CAMELBACK RD		Amount of Each Disbursement this Period 17.32 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement FOOD AND BEVERAGE	Transaction ID : SB17B.501
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200097998

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 474 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

**A. DUNKIN DONUTS**

Full Name (Last, First, Middle Initial)  
Mailing Address 2322 E THOMAS RD

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period  
9.98

Memo Item

Transaction ID : SB17B.505

**B. DUTCH BROTHERS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1037 S RURAL RD

City TEMPE State AZ Zip Code 85282

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period  
11.97

Memo Item

Transaction ID : SB17B.508

**C. GIANT**

Full Name (Last, First, Middle Initial)  
Mailing Address 1161 MARYLAND ROUTE 3 N

City CROFTON State MD Zip Code 21054

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 09 / 2016

Amount of Each Disbursement this Period  
16.68

Memo Item

Transaction ID : SB17B.509

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

201604140200097999

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 475 OF 590
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. HOME DEPOT</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 3609 E THOMAS RD		Amount of Each Disbursement this Period 7.96 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement STAKES		Transaction ID : SB17B.502
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. QUICKTRIP CORPORATION</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 1610 E HIGHLAND AVE		Amount of Each Disbursement this Period 13.22 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement TRAVEL		Transaction ID : SB17B.507
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SHAY OIL</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 500 E 32ND ST		Amount of Each Disbursement this Period 10.15 <input checked="" type="checkbox"/> Memo Item
City YUMA	State AZ	
Purpose of Disbursement TRAVEL		Transaction ID : SB17B.504
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201604140200098000

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 824.20 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.3
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 919.89 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.4
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 919.89 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2663.98
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098001

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 919.89 <input type="checkbox"/> Memo Item Transaction ID : SB17B.6
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 919.89 <input type="checkbox"/> Memo Item Transaction ID : SB17B.7
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. ALEX MILLIKEN</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 919.89 <input type="checkbox"/> Memo Item Transaction ID : SB17B.8
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

**SUBTOTAL** of Disbursements This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

2759.67

201604140200098002

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 478 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial)  
**A. SHAWN MORAN**

Date of Disbursement  
MM / DD / YYYY  
**03 / 09 / 2016**

Mailing Address **C/O OF NATIONAL BORDER PATROL COUN**

Amount of Each Disbursement this Period  
**2983.14**

City State Zip Code  
**SOLANA BEACH CA 92075**

Purpose of Disbursement  
**EQUIPMENT PURCHASE**

Memo Item

Candidate Name

Transaction ID : **SB17B.195**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)  
**B. 511 TACTICAL**

Date of Disbursement  
MM / DD / YYYY  
**03 / 09 / 2016**

Mailing Address **810 E 22ND ST**

Amount of Each Disbursement this Period  
**2983.14**

City State Zip Code  
**TUCSON AZ 85713**

Purpose of Disbursement  
**EQUIPMENT PURCHASE**

Memo Item

Candidate Name

Transaction ID : **SB17B.597**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)  
**C. LAUREN PENLAND**

Date of Disbursement  
MM / DD / YYYY  
**02 / 01 / 2016**

Mailing Address **1702 E HIGHLAND AVE**

Amount of Each Disbursement this Period  
**125.00**

City State Zip Code  
**PHOENIX AZ 85016**

Purpose of Disbursement  
**TRAVEL**

Memo Item

Candidate Name

Transaction ID : **SB17B.148**

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3108.14**

201604140200098003

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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

**A. LAUREN PENLAND**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND AVE

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement PER DIEM

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 02 / 01 / 2016

Amount of Each Disbursement this Period: 125.00

Memo Item

Transaction ID : SB17B.584

**B. LAUREN PENLAND**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND AVE

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 02 / 29 / 2016

Amount of Each Disbursement this Period: 168.07

Memo Item

Transaction ID : SB17B.149

**C. LAUREN PENLAND**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND AVE

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement PER DIEM

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 03 / 09 / 2016

Amount of Each Disbursement this Period: 125.00

Memo Item

Transaction ID : SB17B.587

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

168.07

201604140200098004

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. CIRCLE K 06770 MARANA</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 5633 W CORTARO FARMS RD		Amount of Each Disbursement this Period 14.94 <input checked="" type="checkbox"/> Memo Item
City MARANA	State AZ	
Zip Code 85741	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.590
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. MICHAELS PHOENIX</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 1925 E CAMELBACK RD STE 132		Amount of Each Disbursement this Period 7.81 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement MARKERS	Transaction ID : SB17B.591
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. UPS</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 8409 LEE HWY		Amount of Each Disbursement this Period 13.17 <input checked="" type="checkbox"/> Memo Item
City MERRIFIELD	State VA	
Zip Code 22081	Purpose of Disbursement DELIVERY	Transaction ID : SB17B.588
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098005



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. WENDYS PHOENIX</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 301 E INDIAN SCHOOL RD		Amount of Each Disbursement this Period 7.15
City PHOENIX	State AZ	
Zip Code 85012	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.589
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LAUREN PENLAND</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 790.71
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.150
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LAUREN PENLAND</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 849.51
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.151
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1640.22
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098006

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. LAUREN PENLAND</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 849.51	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name		Transaction ID : SB17B.152	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. LAUREN PENLAND</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 849.51	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name		Transaction ID : SB17B.153	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. LAUREN PENLAND</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 849.51	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item
Purpose of Disbursement PAYROLL		Category/ Type	
Candidate Name		Transaction ID : SB17B.154	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2548.53
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098007

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 483 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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

Full Name (Last, First, Middle Initial) <b>A. LAUREN PENLAND</b>			Date of Disbursement MM / DD / YYYY 03 / 31 / 2016		
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 849.51		
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item Transaction ID : SB17B.155		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. ANA PEREIRA</b>			Date of Disbursement MM / DD / YYYY 01 / 15 / 2016		
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 2252.01		
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item Transaction ID : SB17B.18		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. ANA PEREIRA</b>			Date of Disbursement MM / DD / YYYY 01 / 31 / 2016		
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 2567.76		
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item Transaction ID : SB17B.19		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:			
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify)			

SUBTOTAL of Disbursements This Page (optional).....			5669.28		
TOTAL This Period (last page this line number only).....					

20160414020098008

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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

**A. ANA PEREIRA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
02 / 15 / 2016

Amount of Each Disbursement this Period  
2409.89

Memo Item

Transaction ID : SB17B.20

**B. ANA PEREIRA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
02 / 29 / 2016

Amount of Each Disbursement this Period  
2409.89

Memo Item

Transaction ID : SB17B.21

**C. ANA PEREIRA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
03 / 15 / 2016

Amount of Each Disbursement this Period  
2409.89

Memo Item

Transaction ID : SB17B.22

**SUBTOTAL** of Disbursements This Page (optional)..... 7229.67

**TOTAL** This Period (last page this line number only).....

201604140200098009

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 485 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ANA PEREIRA</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 2409.89 <input type="checkbox"/> Memo Item Transaction ID : SB17B.23
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SANFORD PERL</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 300 N LASALLE ST		Amount of Each Disbursement this Period 540.00 <input type="checkbox"/> Memo Item Transaction ID : SB17B.193
City CHICAGO	State IL	
Zip Code 60654	Purpose of Disbursement FACILITY RENTAL/CATERING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. TOBY PHILLIPS</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 1699.31 <input type="checkbox"/> Memo Item Transaction ID : SB17B.219
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4649.20
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098010

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 486 OF 590
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. TOBY PHILLIPS</b>			Date of Disbursement MM / DD / YYYY 01 / 31 / 2016	
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 1820.57	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17B.220		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TOBY PHILLIPS</b>			Date of Disbursement MM / DD / YYYY 02 / 15 / 2016	
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 1820.57	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17B.221		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. TOBY PHILLIPS</b>			Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 1820.57	
City PHOENIX	State AZ	Zip Code 85016	<input type="checkbox"/> Memo Item	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17B.222		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5461.71
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098011

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 487 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. TOBY PHILLIPS</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 1820.57 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement PAYROLL		Transaction ID : SB17B.223
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. TOBY PHILLIPS</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 1820.57 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement PAYROLL		Transaction ID : SB17B.224
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SALVATORE PURPURA</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2016
Mailing Address 2475 BRICKELL AVE		Amount of Each Disbursement this Period 8843.75 <input type="checkbox"/> Memo Item
City MIAMI	State FL	
Purpose of Disbursement COMPLIANCE CONSULTING		Transaction ID : SB17B.192
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	12484.89
TOTAL This Period (last page this line number only).....	

20160414020098012

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. LORNA ROMERO</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 2573.20 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement PAYROLL		Transaction ID : SB17B.157
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. LORNA ROMERO</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 2573.20 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement PAYROLL		Transaction ID : SB17B.158
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. LORNA ROMERO</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 2573.20 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement PAYROLL		Transaction ID : SB17B.159
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7719.60
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098013



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 489 OF 590

17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial) <b>A. LORNA ROMERO</b>			Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 2573.20	
City PHOENIX	State AZ	Zip Code 85016	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17B.160		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. LORNA ROMERO</b>			Date of Disbursement MM / DD / YYYY 03 / 15 / 2016	
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 2573.20	
City PHOENIX	State AZ	Zip Code 85016	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17B.161		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. LORNA ROMERO</b>			Date of Disbursement MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 1702 E HIGHLAND			Amount of Each Disbursement this Period 2573.20	
City PHOENIX	State AZ	Zip Code 85016	Memo Item <input type="checkbox"/>	
Purpose of Disbursement PAYROLL		Category/ Type		
Candidate Name		Transaction ID : SB17B.162		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	7719.60
TOTAL This Period (last page this line number only).....	

201604140200098014

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. MR. WILL ROUSSEAU**

Full Name (Last, First, Middle Initial)

Mailing Address 3216 N. MANOR DRIVE

City WEST PHOENIX State AZ Zip Code 85014-5527

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 01 / 22 / 2016

Amount of Each Disbursement this Period 2657.66

Memo Item

Transaction ID : SB17.3100819  
CATERING

**B. HEATHER SANDSTROM**

Full Name (Last, First, Middle Initial)

Mailing Address 3730 E. HUBER STREET

City MESA State AZ Zip Code 85205-3901

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 01 / 25 / 2016

Amount of Each Disbursement this Period 1000.00

Memo Item

Transaction ID : SB17.3100763  
CATERING AND MUSIC

**C. DR. PAUL R. SANDSTROM**

Full Name (Last, First, Middle Initial)

Mailing Address 3730 E. HUBER STREET

City MESA State AZ Zip Code 85205-3901

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2016  Primary  General  Other (specify)

State: District:

Date of Disbursement 01 / 25 / 2016

Amount of Each Disbursement this Period 1000.00

Memo Item

Transaction ID : SB17.3100762  
CATERING & RENTALS

**SUBTOTAL** of Disbursements This Page (optional)..... 4657.66

**TOTAL** This Period (last page this line number only).....

201604140200098015

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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

**A. AVI SCHRANZ**

Full Name (Last, First, Middle Initial)  
Mailing Address NORPAC

City ENGLEWOOD CLIFFS    State NJ    Zip Code 07632

Purpose of Disbursement DELIVERY

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 03 / 23 / 2016

Amount of Each Disbursement this Period: 7.50

Memo Item

Transaction ID : SB17B.28

**B. FEDEX.COM**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 FED EX DR

City CORAOPOLIS    State PA    Zip Code 15108

Purpose of Disbursement DELIVERY

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 03 / 23 / 2016

Amount of Each Disbursement this Period: 7.50

Memo Item

Transaction ID : SB17B.517

**C. STEPHEN SHADEGG**

Full Name (Last, First, Middle Initial)  
Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 15 / 2016

Amount of Each Disbursement this Period: 2571.07

Memo Item

Transaction ID : SB17B.202

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2578.57

201604140200098016

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. STEPHEN SHADEGG**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
01 / 31 / 2016

Amount of Each Disbursement this Period  
2571.07

Memo Item

Transaction ID : SB17B.203

**B. STEPHEN SHADEGG**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
02 / 15 / 2016

Amount of Each Disbursement this Period  
2571.07

Memo Item

Transaction ID : SB17B.204

**C. STEPHEN SHADEGG**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX    State AZ    Zip Code 85016

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
02 / 29 / 2016

Amount of Each Disbursement this Period  
2571.07

Memo Item

Transaction ID : SB17B.205

**SUBTOTAL** of Disbursements This Page (optional)..... 7713.21

**TOTAL** This Period (last page this line number only).....

201604140200098017

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 493 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. STEPHEN SHADEGG</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 2571.07 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.206
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STEPHEN SHADEGG</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 2571.07 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.207
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MICHELLE SHIPLEY</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 2114 E MONTEBELLO AVE		Amount of Each Disbursement this Period 692.82 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement LOGISTICS CONSULTING	Transaction ID : SB17B.174
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5834.96
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098018

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. MICHELLE SHIPLEY</b>		Date of Disbursement MM / DD / YYYY 01 / 29 / 2016
Mailing Address 2114 E MONTEBELLO AVE		Amount of Each Disbursement this Period 692.82 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement LOGISTICS CONSULTING		Transaction ID : SB17B.175
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. DERBY H WATKINS</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2016
Mailing Address 16301 KELLY WOODS DR #206		Amount of Each Disbursement this Period 4500.00 <input type="checkbox"/> Memo Item
City FT MYERS	State FL	
Purpose of Disbursement FINANCE CONSULTING		Transaction ID : SB17B.77
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. DERBY H WATKINS</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2016
Mailing Address 16301 KELLY WOODS DR #206		Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Memo Item
City FT MYERS	State FL	
Purpose of Disbursement FINANCE CONSULTING		Transaction ID : SB17B.78
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8192.82
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201604140200098019

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. JARRED WHICKER</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 157.11	
City PHOENIX	State AZ	Zip Code 85016	Category/ Type
Purpose of Disbursement TRAVEL		<input type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17B.133
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. JARRED WHICKER</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 125.00	
City PHOENIX	State AZ	Zip Code 85016	Category/ Type
Purpose of Disbursement PER DIEM		<input checked="" type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17B.568
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. ASU</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016	
Mailing Address PO BOX 2260		Amount of Each Disbursement this Period 5.00	
City TEMPE	State AZ	Zip Code 85280	Category/ Type
Purpose of Disbursement PARKING SVC		<input checked="" type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17B.571
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	157.11
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098020

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. STAPLES BUSINESS ADVANTAGE**

Full Name (Last, First, Middle Initial)

Mailing Address **DEPT DC PO BOX 415256**

City **BOSTON** State **MA** Zip Code **02241**

Purpose of Disbursement **PAPER**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **02 / 01 / 2016**

Amount of Each Disbursement this Period: **21.70**

Memo Item

Transaction ID : **SB17B.569**

Category/Type

**B. TACO BELL**

Full Name (Last, First, Middle Initial)

Mailing Address **310 ORANGE ST**

City **TEMPE** State **AZ** Zip Code **85267**

Purpose of Disbursement **FOOD AND BEVERAGE**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **02 / 01 / 2016**

Amount of Each Disbursement this Period: **5.41**

Memo Item

Transaction ID : **SB17B.570**

Category/Type

**C. JARRED WHICKER**

Full Name (Last, First, Middle Initial)

Mailing Address **1702 E HIGHLAND**

City **PHOENIX** State **AZ** Zip Code **85016**

Purpose of Disbursement **TRAVEL**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY **02 / 29 / 2016**

Amount of Each Disbursement this Period: **143.33**

Memo Item

Transaction ID : **SB17B.134**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Amount of Each Disbursement this Period: **143.33**

201604140200098021



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 497 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. JARRED WHICKER</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 125.00 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.574
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PER DIEM	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CIRCLE K</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address PO BOX 52085		Amount of Each Disbursement this Period 12.01 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.577
City PHOENIX	State AZ	
Zip Code 85072	Purpose of Disbursement TRAVEL	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CIRCLE K 8838 TUCSON</b>		Date of Disbursement MM / DD / YYYY 03 / 09 / 2016
Mailing Address 2 N FWY		Amount of Each Disbursement this Period 2.59 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.575
City TUCSON	State AZ	
Zip Code 85745	Purpose of Disbursement BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200098022

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 498 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. STARBUCKS-TUCSON**

Full Name (Last, First, Middle Initial)

Mailing Address 6370 N CAMPBELL AVE

City TUCSON State AZ Zip Code 87015

Purpose of Disbursement BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement 03 / 09 / 2016

Amount of Each Disbursement this Period 3.73

Memo Item

Transaction ID : SB17B.576

**B. JARRED WHICKER**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement 01 / 15 / 2016

Amount of Each Disbursement this Period 838.67

Memo Item

Transaction ID : SB17B.135

**C. JARRED WHICKER**

Full Name (Last, First, Middle Initial)

Mailing Address 1702 E HIGHLAND

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement 01 / 31 / 2016

Amount of Each Disbursement this Period 945.20

Memo Item

Transaction ID : SB17B.136

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1783.87

201604140200098023

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 499 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. JARRED WHICKER</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 945.20 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.137
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. JARRED WHICKER</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 945.20 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.138
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. JARRED WHICKER</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 945.20 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement PAYROLL	Transaction ID : SB17B.139
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2835.60
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098024

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 500 OF 590			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. JARRED WHICKER</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016	
Mailing Address 1702 E HIGHLAND		Amount of Each Disbursement this Period 945.20	
City PHOENIX State AZ Zip Code 85016	Purpose of Disbursement PAYROLL	<input type="checkbox"/> Memo Item	
Candidate Name	Category/ Type	Transaction ID : SB17B.140	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 01 / 05 / 2016	
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 1303.67	
City NEWARK State NJ Zip Code 07101	Purpose of Disbursement CREDIT CARD MERCHANT FEE	<input type="checkbox"/> Memo Item	
Candidate Name	Category/ Type	Transaction ID : SB17B.15	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016	
Mailing Address PO BOX 1270		Amount of Each Disbursement this Period 156.36	
City NEWARK State NJ Zip Code 07101	Purpose of Disbursement CREDIT CARD MERCHANT FEE	<input type="checkbox"/> Memo Item	
Candidate Name	Category/ Type	Transaction ID : SB17B.16	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2405.23
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200098025

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 501 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. AMERICAN EXPRESS**

Mailing Address **PO BOX 1270**

City **NEWARK** State **NJ** Zip Code **07101**

Purpose of Disbursement  
**CREDIT CARD MERCHANT FEE**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	03 / 07 / 2016
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Amount of Each Disbursement this Period

Amount	190.75
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Memo Item

Transaction ID : **SB17B.17**

Full Name (Last, First, Middle Initial)

**B. ARIZONA CORPORATION COMMISSION**

Mailing Address **1300 W WASHINGTON 1ST FL**

City **PHOENIX** State **AZ** Zip Code **85007**

Purpose of Disbursement  
**REGISTRATION FEE**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	02 / 03 / 2016
----------------	----------------

Amount of Each Disbursement this Period

Amount	175.00
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Memo Item

Transaction ID : **SB17B.24**

Full Name (Last, First, Middle Initial)

**C. ARIZONA DEPARTMENT OF REVENUE**

Mailing Address **PO BOX 29079**

City **PHOENIX** State **AZ** Zip Code **85038**

Purpose of Disbursement  
**TAXES**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY	01 / 12 / 2016
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Amount of Each Disbursement this Period

Amount	6685.00
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Memo Item

Transaction ID : **SB17B.25**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

Amount	7050.75
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201604140200098026

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 502 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ARIZONA DEPARTMENT OF REVENUE</b>		Date of Disbursement MM / DD / YYYY 01 / 13 / 2016
Mailing Address PO BOX 29079		Amount of Each Disbursement this Period 6720.00
City PHOENIX	State AZ	
Zip Code 85038	Purpose of Disbursement TAXES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.26
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AZ DEPARTMENT OF REVENUE</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address PO BOX 52138		Amount of Each Disbursement this Period 618.04
City PHOENIX	State AZ	
Zip Code 85072	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.29
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AZ DEPARTMENT OF REVENUE</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2016
Mailing Address PO BOX 52138		Amount of Each Disbursement this Period 663.50
City PHOENIX	State AZ	
Zip Code 85072	Purpose of Disbursement PAYROLL TAXES	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.30
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8001.54
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098027

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 503 OF 590		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. AZ DEPARTMENT OF REVENUE</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2016
Mailing Address <b>PO BOX 52138</b>		Amount of Each Disbursement this Period 637.25 <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85072</b>	Purpose of Disbursement <b>PAYROLL TAXES</b>	Transaction ID : <b>SB17B.31</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AZ DEPARTMENT OF REVENUE</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address <b>PO BOX 52138</b>		Amount of Each Disbursement this Period 637.25 <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85072</b>	Purpose of Disbursement <b>PAYROLL TAXES</b>	Transaction ID : <b>SB17B.32</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AZ DEPARTMENT OF REVENUE</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address <b>PO BOX 52138</b>		Amount of Each Disbursement this Period 644.00 <input type="checkbox"/> Memo Item
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85072</b>	Purpose of Disbursement <b>PAYROLL TAXES</b>	Transaction ID : <b>SB17B.33</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1918.50
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098028

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. AZ DEPARTMENT OF REVENUE**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 52138

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 31 / 2016

Amount of Each Disbursement this Period: 644.00

Memo Item

Transaction ID : SB17B.34

**B. BASK DIGITAL MEDIA LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1953 SAN ELIJO AVE

City CARDIFF-BY-THE-SEA State CA Zip Code 92007

Purpose of Disbursement WEB ADS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 05 / 2016

Amount of Each Disbursement this Period: 2000.00

Memo Item

Transaction ID : SB17B.35

**C. BASK DIGITAL MEDIA LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1953 SAN ELIJO AVE

City CARDIFF-BY-THE-SEA State CA Zip Code 92007

Purpose of Disbursement WEB ADS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 07 / 2016

Amount of Each Disbursement this Period: 2620.00

Memo Item

Transaction ID : SB17B.36

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5264.00

201604140200098029



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. BASK DIGITAL MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2016
Mailing Address 1953 SAN ELIJO AVE		Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Memo Item
City CARDIFF-BY-THE-SEA	State CA	
Zip Code 92007	Purpose of Disbursement WEB ADS	Transaction ID : SB17B.37
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. BASK DIGITAL MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 19 / 2016
Mailing Address 1953 SAN ELIJO AVE		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City CARDIFF-BY-THE-SEA	State CA	
Zip Code 92007	Purpose of Disbursement WEB ADS	Transaction ID : SB17B.38
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. BASK DIGITAL MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2016
Mailing Address 1953 SAN ELIJO AVE		Amount of Each Disbursement this Period 5500.00 <input type="checkbox"/> Memo Item
City CARDIFF-BY-THE-SEA	State CA	
Zip Code 92007	Purpose of Disbursement WEB ADS	Transaction ID : SB17B.39
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8100.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098030

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 506 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. BASK DIGITAL MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 1953 SAN ELIJO AVE		Amount of Each Disbursement this Period 2120.00 <input type="checkbox"/> Memo Item
City CARDIFF-BY-THE-SEA	State CA	
Zip Code 92007	Purpose of Disbursement WEB ADS	Transaction ID : SB17B.40
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. BASK DIGITAL MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016
Mailing Address 1953 SAN ELIJO AVE		Amount of Each Disbursement this Period 7000.00 <input type="checkbox"/> Memo Item
City CARDIFF-BY-THE-SEA	State CA	
Zip Code 92007	Purpose of Disbursement WEB ADS	Transaction ID : SB17B.41
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. BASK DIGITAL MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 16 / 2016
Mailing Address 1953 SAN ELIJO AVE		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item
City CARDIFF-BY-THE-SEA	State CA	
Zip Code 92007	Purpose of Disbursement WEB ADS	Transaction ID : SB17B.42
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11120.00
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020098031

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17  
 20a
  18  
 20b
  19a  
 20c
  19b  
 21

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

**A. BASK DIGITAL MEDIA LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1953 SAN ELIJO AVE

City CARDIFF-BY-THE-SEA State CA Zip Code 92007

Purpose of Disbursement WEB CONSULTING/WEB ADS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY  
02 / 24 / 2016

Amount of Each Disbursement this Period  
5500.00

Memo Item

Transaction ID : SB17B.43

**B. BRADLEY PATRICK GROUP LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1020 N FAIRFAX ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement FINANCE CONSULTING/PHONE SVC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period  
5153.78

Memo Item

Transaction ID : SB17B.52

**C. BRADLEY PATRICK GROUP LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 1020 N FAIRFAX ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement FINANCE CONSULTING/TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement MM / DD / YYYY  
02 / 25 / 2016

Amount of Each Disbursement this Period  
5014.56

Memo Item

Transaction ID : SB17B.53

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

15668.34

201604140200098032

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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

**A. BRADLEY PATRICK GROUP LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1020 N FAIRFAX ST

City ALEXANDRIA    State VA    Zip Code 22314

Purpose of Disbursement  
FINANCE CONSULTING/WEB SERVICE

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
02 / 05 / 2016

Amount of Each Disbursement this Period  
5380.31

Memo Item

Transaction ID : SB17B.54

**B. BUSE CONSULTING LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 11 S CENTRAL AVE

City PHOENIX    State AZ    Zip Code 85004

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING/TRAVEL

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period  
12570.00

Memo Item

Transaction ID : SB17B.55

**C. BUSE CONSULTING LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 11 S CENTRAL AVE

City PHOENIX    State AZ    Zip Code 85004

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING/TRAVEL

Candidate Name

Office Sought:  House     Senate     President  
Disbursement For:  Primary     General  
 Other (specify)

State:    District:

Date of Disbursement  
MM / DD / YYYY  
02 / 02 / 2016

Amount of Each Disbursement this Period  
13282.72

Memo Item

Transaction ID : SB17B.56

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

31233.03

20160414020098033

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 509 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. BUSE CONSULTING LLC</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2016	
Mailing Address 11 S CENTRAL AVE		Amount of Each Disbursement this Period 12621.78	
City PHOENIX	State AZ	Zip Code 85004	<input type="checkbox"/> Memo Item
Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL		Category/ Type	
Candidate Name		Transaction ID : SB17B.57	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGN SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2016	
Mailing Address 117 N ST ASAPH ST		Amount of Each Disbursement this Period 4632.97	
City ALEXANDRIA	State VA	Zip Code 22314	<input type="checkbox"/> Memo Item
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name		Transaction ID : SB17B.58	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGN SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016	
Mailing Address 117 N ST ASAPH ST		Amount of Each Disbursement this Period 25532.08	
City ALEXANDRIA	State VA	Zip Code 22314	<input type="checkbox"/> Memo Item
Purpose of Disbursement WEB SERVICE		Category/ Type	
Candidate Name		Transaction ID : SB17B.59	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

42786.83

201604140200098034

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 510 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

**A. CAPITAL CITY PARTNERS LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1100 G ST NW STE 840

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
01 / 13 / 2016

Amount of Each Disbursement this Period  
7500.00

Memo Item

Transaction ID : SB17B.60

**B. CAPITAL CITY PARTNERS LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1100 G ST NW STE 840

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 16 / 2016

Amount of Each Disbursement this Period  
7500.00

Memo Item

Transaction ID : SB17B.61

**C. CAPITAL CITY PARTNERS LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1100 G ST NW STE 840

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 17 / 2016

Amount of Each Disbursement this Period  
7500.00

Memo Item

Transaction ID : SB17B.62

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

22500.00

201604140200098035

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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

**A. CAPITOL TECHNOLOGY SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 540 COLUMBIA RD NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement COMPUTER EQUIPMENT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 01 / 2016

Amount of Each Disbursement this Period: 794.96

Memo Item

Transaction ID : SB17B.63

**B. CAPITOL TECHNOLOGY SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 540 COLUMBIA RD NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement COMPUTER SUPPORT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2016

Amount of Each Disbursement this Period: 606.23

Memo Item

Transaction ID : SB17B.64

**C. CAPITOL TECHNOLOGY SOLUTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 540 COLUMBIA RD NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement COMPUTER SUPPORT

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 29 / 2016

Amount of Each Disbursement this Period: 500.00

Memo Item

Transaction ID : SB17B.65

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1901.19

201604140200098036

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. CAPLIN &amp; DRYSDALE</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address ONE THOMAS CIR NW STE 1100		Amount of Each Disbursement this Period 7500.00 <input type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement LEGAL CONSULTING	Transaction ID : SB17B.66
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAPLIN &amp; DRYSDALE</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2016
Mailing Address ONE THOMAS CIR NW STE 1100		Amount of Each Disbursement this Period 7500.00 <input type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement LEGAL CONSULTING	Transaction ID : SB17B.67
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAPLIN &amp; DRYSDALE</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address ONE THOMAS CIR NW STE 1100		Amount of Each Disbursement this Period 7500.00 <input type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20005	Purpose of Disbursement LEGAL CONSULTING	Transaction ID : SB17B.68
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	22500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200098037



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2016
Mailing Address 1593 SPRING HILL RD		Amount of Each Disbursement this Period 2.70
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.69
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2016
Mailing Address 1593 SPRING HILL RD		Amount of Each Disbursement this Period 132.55
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.70
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2016
Mailing Address 1593 SPRING HILL RD		Amount of Each Disbursement this Period 49.25
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement CREDIT CARD MERCHANT FEE	Memo Item <input type="checkbox"/>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.71
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	184.50
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098038

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. CMDI INC</b>		Date of Disbursement MM / DD / YYYY <b>03 / 21 / 2016</b>
Mailing Address <b>1593 SPRING HILL RD</b>		Amount of Each Disbursement this Period <b>24.75</b>
City <b>TYSONS CORNER</b>	State <b>VA</b>	
Zip Code <b>22182</b>	Purpose of Disbursement <b>CREDIT CARD MERCHANT FEE</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17B.72</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI INC</b>		Date of Disbursement MM / DD / YYYY <b>01 / 06 / 2016</b>
Mailing Address <b>1593 SPRING HILL RD</b>		Amount of Each Disbursement this Period <b>5393.33</b>
City <b>TYSONS CORNER</b>	State <b>VA</b>	
Zip Code <b>22182</b>	Purpose of Disbursement <b>DATABASE MANAGEMENT</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17B.73</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI INC</b>		Date of Disbursement MM / DD / YYYY <b>02 / 02 / 2016</b>
Mailing Address <b>1593 SPRING HILL RD</b>		Amount of Each Disbursement this Period <b>7077.14</b>
City <b>TYSONS CORNER</b>	State <b>VA</b>	
Zip Code <b>22182</b>	Purpose of Disbursement <b>DATABASE MANAGEMENT</b>	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17B.74</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>12495.22</b>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098039

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 1593 SPRING HILL RD		Amount of Each Disbursement this Period 3922.14 <input type="checkbox"/> Memo Item
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT	Transaction ID : SB17B.75
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. CMDI INC</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2016
Mailing Address 1593 SPRING HILL RD		Amount of Each Disbursement this Period 1962.52 <input type="checkbox"/> Memo Item
City TYSONS CORNER	State VA	
Zip Code 22182	Purpose of Disbursement DATABASE MANAGEMENT	Transaction ID : SB17B.76
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. DORI RANDALL MAKEUP AND HAIR INC</b>		Date of Disbursement MM / DD / YYYY 01 / 25 / 2016
Mailing Address PO BOX 5657		Amount of Each Disbursement this Period 1417.98 <input type="checkbox"/> Memo Item
City SCOTTSDALE	State AZ	
Zip Code 85261	Purpose of Disbursement MEDIA PRODUCTION SERVICE	Transaction ID : SB17B.79
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7302.64
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098040

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. EDONATION**

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2016

Amount of Each Disbursement this Period

2943.35

Memo Item

Transaction ID : SB17B.238

**B. EDONATION**

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 08 / 2016

Amount of Each Disbursement this Period

1522.14

Memo Item

Transaction ID : SB17B.88

**C. EDONATION**

Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2016

Amount of Each Disbursement this Period

2033.30

Memo Item

Transaction ID : SB17B.89

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

6498.79

201604140200098041

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 517 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. EPIC LIGHT MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1652 N JONES CIR		Amount of Each Disbursement this Period 4048.78 <input type="checkbox"/> Memo Item
City MESA	State AZ	
Zip Code 85203	Purpose of Disbursement MEDIA PRODUCTION	Transaction ID : SB17B.90
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. EPIC LIGHT MEDIA LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2016
Mailing Address 1652 N JONES CIR		Amount of Each Disbursement this Period 2750.00 <input type="checkbox"/> Memo Item
City MESA	State AZ	
Zip Code 85203	Purpose of Disbursement MEDIA PRODUCTION	Transaction ID : SB17B.91
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. EUDY COMPANY</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 4200 MASSACHUSETTS AVE NW		Amount of Each Disbursement this Period 20000.00 <input type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20016	Purpose of Disbursement FINANCE CONSULTING	Transaction ID : SB17B.92
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	26798.78
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098042

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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17  
20a     18  
20b     19a  
20c     19b  
21

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. EUDY COMPANY**

Full Name (Last, First, Middle Initial)  
Mailing Address **4200 MASSACHUSETTS AVE NW**

City **WASHINGTON** State **DC** Zip Code **20016**

Purpose of Disbursement  
**FINANCE CONSULTING**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**01 / 29 / 2016**

Amount of Each Disbursement this Period  
**7500.00**

Memo Item

Transaction ID : **SB17B.93**

**B. EUDY COMPANY**

Full Name (Last, First, Middle Initial)  
Mailing Address **4200 MASSACHUSETTS AVE NW**

City **WASHINGTON** State **DC** Zip Code **20016**

Purpose of Disbursement  
**TRAVEL/POSTAGE/DELIVERY**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**02 / 24 / 2016**

Amount of Each Disbursement this Period  
**985.66**

Memo Item

Transaction ID : **SB17B.94**

**C. FIRST BANKCARD**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO BOX 2340**

City **OMAHA** State **NE** Zip Code **68103**

Purpose of Disbursement  
**CREDIT CARD TRAVEL**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**02 / 09 / 2016**

Amount of Each Disbursement this Period  
**9877.67**

Memo Item

Transaction ID : **SB17B.100**

**SUBTOTAL** of Disbursements This Page (optional)..... **18363.33**

**TOTAL** This Period (last page this line number only).....

201604140200098043

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial)

**A. ADVANTAGE MAIL**

Mailing Address 1258 W SOUTHERN AVE STE 102

City State Zip Code  
TEMPE AZ 85282

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period

80.00

Memo Item

Transaction ID : SB17B.690

Full Name (Last, First, Middle Initial)

**B. AMAZON.COM**

Mailing Address PO BOX 821226

City State Zip Code  
SEATTLE WA 98108

Purpose of Disbursement  
EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period

656.53

Memo Item

Transaction ID : SB17B.691

Full Name (Last, First, Middle Initial)

**C. AMERICAN PRINTHOUSE**

Mailing Address 2205 E UNIVERSITY DR

City State Zip Code  
PHOENIX AZ 85034

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period

335.65

Memo Item

Transaction ID : SB17B.692

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098044

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 520 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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

Full Name (Last, First, Middle Initial) <b>A. ARIZONA INN</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 2200 E ELM ST		Amount of Each Disbursement this Period 717.22	
City TUCSON	State AZ	Zip Code 85719	<input checked="" type="checkbox"/> Memo Item
Purpose of Disbursement TRAVEL	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____	Transaction ID : SB17B.693		

Full Name (Last, First, Middle Initial) <b>B. ASSURED DOCUMENT DESTRUCTION</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 7225 W ROOSEVELT ST		Amount of Each Disbursement this Period 24.95	
City PHOENIX	State AZ	Zip Code 85043	<input checked="" type="checkbox"/> Memo Item
Purpose of Disbursement SHREDDING SVC	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____	Transaction ID : SB17B.694		

Full Name (Last, First, Middle Initial) <b>C. BEST WESTERN TUCSON</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 6801 S TUCSON BLVD		Amount of Each Disbursement this Period 120.01	
City TUCSON	State AZ	Zip Code 85756	<input checked="" type="checkbox"/> Memo Item
Purpose of Disbursement TRAVEL	Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____	Transaction ID : SB17B.695		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098045



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)  
 17  
 18  
 19a  
 19b  
 20a  
 20b  
 20c  
 21

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

**A. BLUE SODA**

Full Name (Last, First, Middle Initial)  
Mailing Address 595 N LAKEVIEW PKWY

City VERNON HILLS State IL Zip Code 60061

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 1129.40

Memo Item

Transaction ID : SB17B.696

**B. BOSA DONUTS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1835 E SOUTHERN AVE

City TEMPE State AZ Zip Code 85282

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 81.15

Memo Item

Transaction ID : SB17B.697

**C. CIRCLE K 8838 TUCSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 2 N FWY

City TUCSON State AZ Zip Code 85745

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 26.04

Memo Item

Transaction ID : SB17B.698

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

201604140200098046

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. COX COMMUNICATIONS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 78071

City PHOENIX State AZ Zip Code 85062

Purpose of Disbursement  
UTILITIES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period

760.18

Memo Item

Transaction ID : SB17B.699

**B. DOMINOS PIZZA 761**

Full Name (Last, First, Middle Initial)

Mailing Address 914 E CAMELBACK RD STE 10

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period

125.78

Memo Item

Transaction ID : SB17B.700

**C. EL BUTTONS**

Full Name (Last, First, Middle Initial)

Mailing Address 20801 N 19TH AVE

City PHOENIX State AZ Zip Code 85027

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period

129.10

Memo Item

Transaction ID : SB17B.702

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098047

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 523 OF 590
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. EL CHARRO-TUCSON</b>		Date of Disbursement MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address <b>311 N COURT AVE</b>		Amount of Each Disbursement this Period 109.56 <input checked="" type="checkbox"/> Memo Item Transaction ID : <b>SB17B.701</b>
City <b>TUCSON</b>	State <b>AZ</b>	
Zip Code <b>85701</b>	Purpose of Disbursement <b>FOOD AND BEVERAGE</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ENTERPRISE RENT-A-CAR</b>		Date of Disbursement MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address <b>PO BOX 402383</b>		Amount of Each Disbursement this Period 756.05 <input checked="" type="checkbox"/> Memo Item Transaction ID : <b>SB17B.703</b>
City <b>ATLANTA</b>	State <b>GA</b>	
Zip Code <b>30384</b>	Purpose of Disbursement <b>TRAVEL</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. FEDEX.COM</b>		Date of Disbursement MM / DD / YYYY <b>02 / 09 / 2016</b>
Mailing Address <b>100 FED EX DR</b>		Amount of Each Disbursement this Period 61.86 <input checked="" type="checkbox"/> Memo Item Transaction ID : <b>SB17B.704</b>
City <b>CORAOPOLIS</b>	State <b>PA</b>	
Zip Code <b>15108</b>	Purpose of Disbursement <b>DELIVERY</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098048

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. FRY'S FOOD-PHOENIX</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 4724 N 20TH ST		Amount of Each Disbursement this Period 75.62
City PHOENIX	State AZ	
Purpose of Disbursement FOOD AND BEVERAGE		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.705
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. GRAPHIC IDEALS</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 4631 E THOMAS RD		Amount of Each Disbursement this Period 222.90
City PHOENIX	State AZ	
Purpose of Disbursement PRINTING		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.706
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. HOTELS.COM</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 333 108TH AVE NE		Amount of Each Disbursement this Period 58.48
City BELLEVUE	State WA	
Purpose of Disbursement TRAVEL		<input checked="" type="checkbox"/> Memo Item
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.707
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

201604140200098049

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 525 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. IHOP**

Mailing Address 450 BRAND BLVD

City State Zip Code  
GLENDALE CA 91203

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 09 / 2016

Amount of Each Disbursement this Period

26.75
-------

Memo Item

Transaction ID : SB17B.708

**B. IN-N-OUT BURGER**

Mailing Address 1979 E AJO WAY

City State Zip Code  
TUCSON AZ 85718

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 09 / 2016

Amount of Each Disbursement this Period

125.00
--------

Memo Item

Transaction ID : SB17B.709

**C. JACKSONS CAR WASH**

Mailing Address 2501 W HAPPY VALLEY RD

City State Zip Code  
PHOENIX AZ 85027

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 09 / 2016

Amount of Each Disbursement this Period

34.99
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Memo Item

Transaction ID : SB17B.710

**SUBTOTAL** of Disbursements This Page (optional).....

0.00
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**TOTAL** This Period (last page this line number only).....

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201604140200098050

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. JET.COM</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 221 RIVER ST		Amount of Each Disbursement this Period 147.50	
City HOBOKEN	State NJ	Zip Code 07030	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.711
Purpose of Disbursement EQUIPMENT PURCHASE		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		
Full Name (Last, First, Middle Initial) <b>B. MARRIOTT-TUCSON</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 3800 W STARR PASS BLVD		Amount of Each Disbursement this Period 225.57	
City TUCSON	State AZ	Zip Code 85745	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.712
Purpose of Disbursement TRAVEL		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		
Full Name (Last, First, Middle Initial) <b>C. MCDONALDS-85013</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 750 W CAMELBACK RD		Amount of Each Disbursement this Period 1.63	
City PHOENIX	State AZ	Zip Code 85013	<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.713
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		
SUBTOTAL of Disbursements This Page (optional).....		0.00	
TOTAL This Period (last page this line number only).....			

201604140200098051

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. MICHAELS PHOENIX**

Full Name (Last, First, Middle Initial)  
Mailing Address 1925 E CAMELBACK RD STE 132

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
PAPER

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period  
16.68

Memo Item

Transaction ID : SB17B.714

**B. NATIVE GRILL**

Full Name (Last, First, Middle Initial)  
Mailing Address 1301 E BROADWAY RD

City TEMPE State AZ Zip Code 85282

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period  
444.97

Memo Item

Transaction ID : SB17B.715

**C. PAPA JOHNS #1694 PHOENIX**

Full Name (Last, First, Middle Initial)  
Mailing Address 2836 E INDIAN SCHOOL RD

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period  
573.90

Memo Item

Transaction ID : SB17B.716

0.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

201604140200098052

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. PAYPAL.COM</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 2211 N 1ST ST		Amount of Each Disbursement this Period 272.50 <input checked="" type="checkbox"/> Memo Item
City SAN JOSE	State CA	
Zip Code 95131	Purpose of Disbursement REGISTRATION FEE/TICKETS	Transaction ID : SB17B.717
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PIZZA HUT PHOENIX</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 5832 N 16TH ST		Amount of Each Disbursement this Period 259.55 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement FOOD AND BEVERAGE	Transaction ID : SB17B.718
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. QT 435 PHOENIX</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 1610 E HIGHLAND AVE		Amount of Each Disbursement this Period 101.41 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.719
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098053



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 529 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. ROYALTY RENTALS</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 3400 N ARIZONA AVE		Amount of Each Disbursement this Period 786.94
City CHANDLER	State AZ	
Zip Code 85225	Purpose of Disbursement FURNITURE LEASE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.720
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. SAFEWAY STORE MESA</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 1225 W GUADALUPE RD		Amount of Each Disbursement this Period 25.88
City MESA	State AZ	
Zip Code 85202	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.721
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. SOUTHWESTERN FAIR</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 11300 S HOUGHTON RD		Amount of Each Disbursement this Period 510.00
City TUCSON	State AZ	
Zip Code 85747	Purpose of Disbursement REGISTRATION FEE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.722
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

0.00
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201604140200098054

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 530 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. SPORTS AUTHORITY</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 1625 E CAMELBACK RD		Amount of Each Disbursement this Period 194.39
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement JACKETS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.723
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 963 NORLAND AVE		Amount of Each Disbursement this Period 133.67
City CHAMBERSBURG	State PA	
Zip Code 17201	Purpose of Disbursement PAPER	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.724
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STARBUCKS-PHOENIX</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 2824 N 44TH ST		Amount of Each Disbursement this Period 65.52
City PHOENIX	State AZ	
Zip Code 85001	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.725
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00
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201604140200098055

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. TACO BELL**

Full Name (Last, First, Middle Initial)

Mailing Address 310 ORANGE ST

City TEMPE State AZ Zip Code 85267

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 271.49

Memo Item

Transaction ID : SB17B.726

**B. UNITED STATES SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 232 HART BLDG

City WASHINGTON State DC Zip Code 20510

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 33.00

Memo Item

Transaction ID : SB17B.727

**C. WALMART**

Full Name (Last, First, Middle Initial)

Mailing Address 3721 E THOMAS RD

City PHOENIX State AZ Zip Code 85018

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 155.85

Memo Item

Transaction ID : SB17B.728

0.00

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

201604140200098056

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 532 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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

**A. FIRST BANKCARD**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO BOX 2340**

City **OMAHA** State **NE** Zip Code **68103**

Purpose of Disbursement  
**CREDIT CARD TRAVEL**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**01 / 04 / 2016**

Amount of Each Disbursement this Period  
**13089.24**

Memo Item

Transaction ID : **SB17B.95**

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO BOX 582820 MD 766**

City **TULSA** State **OK** Zip Code **74158**

Purpose of Disbursement  
**TRAVEL**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**01 / 04 / 2016**

Amount of Each Disbursement this Period  
**1703.20**

Memo Item

Transaction ID : **SB17B.733**

**C. BISTRO BIS**

Full Name (Last, First, Middle Initial)  
Mailing Address **15 E ST, NW**

City **WASHINGTON** State **DC** Zip Code **20001**

Purpose of Disbursement  
**FACILITY RENTAL/CATERING**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**01 / 04 / 2016**

Amount of Each Disbursement this Period  
**1314.40**

Memo Item

Transaction ID : **SB17B.734**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**13089.24**

201604140200098057

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. CAIRO WINE &amp; LIQUOR</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1618 17TH ST BW		Amount of Each Disbursement this Period 160.40 <input checked="" type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20009	Purpose of Disbursement CATERING	Transaction ID : SB17B.735
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAREY INTERNATIONAL INC</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 4530 WISCONSIN AVE NW		Amount of Each Disbursement this Period 1986.65 <input checked="" type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20016	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.736
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FEDEX.COM</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 100 FED EX DR		Amount of Each Disbursement this Period 68.30 <input checked="" type="checkbox"/> Memo Item
City CORAOPOLIS	State PA	
Zip Code 15108	Purpose of Disbursement DELIVERY	Transaction ID : SB17B.737
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

0.00
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201604140200098058

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. MACNAIR TRAVEL AGENCY</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 4100 FAIRFAX DR STE 600		Amount of Each Disbursement this Period 320.00 <input checked="" type="checkbox"/> Memo Item
City ARLINGTON	State VA	
Zip Code 22203	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.732
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. MYFAX SERVICES</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 6922 HOLLYWOOD BLVD #800		Amount of Each Disbursement this Period 10.00 <input checked="" type="checkbox"/> Memo Item
City LOS ANGELES	State CA	
Zip Code 90028	Purpose of Disbursement PHONE SVC	Transaction ID : SB17B.739
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SINPLICITY</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 6402 ARLINGTON BLVD		Amount of Each Disbursement this Period 386.93 <input checked="" type="checkbox"/> Memo Item
City FALLS CHURCH	State VA	
Zip Code 22042	Purpose of Disbursement CATERING	Transaction ID : SB17B.740
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098059

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial)

**A. SPRINT-60197**

Mailing Address PO BOX 4181

City State Zip Code  
CAROL STREAM IL 60197

Purpose of Disbursement  
PHONE SVC

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

196.50

Memo Item

Transaction ID : SB17B.741

Full Name (Last, First, Middle Initial)

**B. ST REGIS HOTEL- NEW YORK**

Mailing Address 2 E 55TH ST

City State Zip Code  
NEW YORK NY 10022

Purpose of Disbursement  
FACILITY RENTAL/CATERING/TRAVEL

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

6399.73

Memo Item

Transaction ID : SB17B.742

Full Name (Last, First, Middle Initial)

**C. VIPS CATERING BY CAFE**

Mailing Address 1750 PENNSYLVANIA AVE, NW

City State Zip Code  
WASHINGTON DC 20006

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

543.13

Memo Item

Transaction ID : SB17B.738

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098060

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 536 OF 590

17     18     19a     19b  
 20a     20b     20c     21

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

Full Name (Last, First, Middle Initial)

**A. FIRST BANKCARD**

Mailing Address PO BOX 2340

City State Zip Code  
OMAHA NE 68103

Purpose of Disbursement  
CREDIT CARD TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)  
 State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

9089.16

Memo Item

Transaction ID : SB17B.96

Full Name (Last, First, Middle Initial)

**B. ALBERTSONS-LAKE HAVASU**

Mailing Address 1980 MCCULLOCH BLVD N

City State Zip Code  
LAKE HAVASU CITY AZ 86403

Purpose of Disbursement  
FOOD AND BEVERAGES

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)  
 State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

27.86

Memo Item

Transaction ID : SB17B.625

Full Name (Last, First, Middle Initial)

**C. AMAZON.COM**

Mailing Address PO BOX 821226

City State Zip Code  
SEATTLE WA 98108

Purpose of Disbursement  
PENS

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify)  
 State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

17.90

Memo Item

Transaction ID : SB17B.626

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

9089.16

201604140200098061



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 537 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. ARIZONA AIR BOUTIQUE</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 10401 N 32ND ST		Amount of Each Disbursement this Period 172.74 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.627
City PHOENIX	State AZ Zip Code 85028	
Purpose of Disbursement BALLOONS	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ARIZONA ASIAN AMERICAN ASSOC</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address PO BOX 64864		Amount of Each Disbursement this Period 200.00 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.624
City PHOENIX	State AZ Zip Code 85082	
Purpose of Disbursement EVENT TICKETS	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ASSURED DOCUMENT DESTRUCTION</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 7225 W ROOSEVELT ST		Amount of Each Disbursement this Period 49.90 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.628
City PHOENIX	State AZ Zip Code 85043	
Purpose of Disbursement SHREDDING SVC	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098062

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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

**A. BARRIO CAFE**

Full Name (Last, First, Middle Initial)  
Mailing Address 2814 N 16TH ST

City PHOENIX    State AZ    Zip Code 85006

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 04 / 2016

Amount of Each Disbursement this Period: 178.71

Memo Item

Transaction ID : SB17B.629

**B. BEST BUY.COM**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 9312

City MINNEAPOLIS    State MN    Zip Code 55440

Purpose of Disbursement  
EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 04 / 2016

Amount of Each Disbursement this Period: 2334.89

Memo Item

Transaction ID : SB17B.630

**C. BLUE SODA**

Full Name (Last, First, Middle Initial)  
Mailing Address 595 N LAKEVIEW PKWY

City VERNON HILLS    State IL    Zip Code 60061

Purpose of Disbursement  
BALLOONS

Candidate Name

Office Sought:  House     Senate     President

Disbursement For:  Primary     General     Other (specify)

State:    District:

Date of Disbursement: 01 / 04 / 2016

Amount of Each Disbursement this Period: 287.40

Memo Item

Transaction ID : SB17B.631

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098063

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 539 OF 590
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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

Full Name (Last, First, Middle Initial) <b>A. COCOS BAKERY RESTAURANT</b>			Date of Disbursement MM / DD / YYYY 01 / 04 / 2016	
Mailing Address 360 W FOREST MEADOWS ST			Amount of Each Disbursement this Period 8.40	
City FLAGSTAFF	State AZ	Zip Code 86001	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement FOOD AND BEVERAGE		Category/ Type	Transaction ID : SB17B.632	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. COX COMMUNICATIONS</b>			Date of Disbursement MM / DD / YYYY 01 / 04 / 2016	
Mailing Address PO BOX 78071			Amount of Each Disbursement this Period 760.18	
City PHOENIX	State AZ	Zip Code 85062	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17B.633	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. COYOTE COIN AND PAWN</b>			Date of Disbursement MM / DD / YYYY 01 / 04 / 2016	
Mailing Address 1320 S 4TH AVE			Amount of Each Disbursement this Period 65.00	
City YUMA	State AZ	Zip Code 85364	<input checked="" type="checkbox"/> Memo Item	
Purpose of Disbursement PENS		Category/ Type	Transaction ID : SB17B.634	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098064

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. CROSSROADS OF THE WEST GUN SHOWS**

Mailing Address PO BOX 290

City State Zip Code  
KAYSVILLE UT 84037

Purpose of Disbursement  
EVENT TICKETS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

350.00

Memo Item

Transaction ID : SB17B.643

Full Name (Last, First, Middle Initial)

**B. CVS-85016**

Mailing Address 1610 E CAMELBACK RD

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

49.00

Memo Item

Transaction ID : SB17B.635

Full Name (Last, First, Middle Initial)

**C. DOLLAR RADIO RENTALS**

Mailing Address 4824 S 35TH ST

City State Zip Code  
PHOENIX AZ 85040

Purpose of Disbursement  
EQUIPMENT LEASE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

164.66

Memo Item

Transaction ID : SB17B.644

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098065

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. DOLLAR TREE STORES</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 7750 E MCDOWELL AVE		Amount of Each Disbursement this Period 10.83
City SCOTTSDALE	State AZ	
Zip Code 85257	Purpose of Disbursement PAPER	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.636
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. DOMINOS PIZZA 761</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 914 E CAMELBACK RD STE 10		Amount of Each Disbursement this Period 55.40
City PHOENIX	State AZ	
Zip Code 85034	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.637
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. DUCK &amp; DECANTER</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1651 E CAMELBACK RD		Amount of Each Disbursement this Period 94.91
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.638
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098066

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 542 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

**A. EDONATION**

Full Name (Last, First, Middle Initial)  
Mailing Address 117 N ST ASAPH ST

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement WEB SERVICE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2016

Amount of Each Disbursement this Period: 275.00

Memo Item

Transaction ID : SB17B.663

**B. EINSTEIN BROS #3090**

Full Name (Last, First, Middle Initial)  
Mailing Address 1641 E CAMELBACK RD STE 103

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2016

Amount of Each Disbursement this Period: 17.32

Memo Item

Transaction ID : SB17B.639

**C. FEDEX.COM**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 FED EX DR

City CORAOPOLIS State PA Zip Code 15108

Purpose of Disbursement DELIVERY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2016

Amount of Each Disbursement this Period: 222.99

Memo Item

Transaction ID : SB17B.640

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

201604140200098067

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 543 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. FRY'S FOOD-PHOENIX</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016	
Mailing Address 4724 N 20TH ST		Amount of Each Disbursement this Period 70.01	
City PHOENIX	State AZ	Zip Code 85016	Category/ Type
Purpose of Disbursement FOOD AND BEVERAGE		<input checked="" type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17B.641
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. GRAPHIC IDEALS</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016	
Mailing Address 4631 E THOMAS RD		Amount of Each Disbursement this Period 765.99	
City PHOENIX	State AZ	Zip Code 85018	Category/ Type
Purpose of Disbursement PRINTING		<input checked="" type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17B.642
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. HOME DEPOT 477 6 PHOENIX</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016	
Mailing Address 3609 E THOMAS RD		Amount of Each Disbursement this Period 163.08	
City PHOENIX	State AZ	Zip Code 85018	Category/ Type
Purpose of Disbursement PAINT		<input checked="" type="checkbox"/> Memo Item	
Candidate Name			Transaction ID : SB17B.660
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098068

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 544 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. KICKSTAND KAFE</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 719 N HUMPHREYS ST		Amount of Each Disbursement this Period 11.13
City FLAGSTAFF	State AZ	
Zip Code 86001	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.657
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LATE FOR THE TRAIN</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1071 E OLD CANYON CT		Amount of Each Disbursement this Period 10.10
City FLAGSTAFF	State AZ	
Zip Code 86001	Purpose of Disbursement FOOD AND BEVERAGE	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.645
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LINKEDIN</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 2029 STIERLIN CY		Amount of Each Disbursement this Period 299.00
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement SUBSCRIPTIONS	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.646
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098069



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)  
**A. MICHAELS PHOENIX**

Mailing Address **1925 E CAMELBACK RD STE 132**

City **PHOENIX** State **AZ** Zip Code **85016**

Purpose of Disbursement  
**POSTER SUPPLIES**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**01 / 04 / 2016**

Amount of Each Disbursement this Period  
**123.41**

Memo Item

Transaction ID : **SB17B.647**

Full Name (Last, First, Middle Initial)  
**B. NETBRANDS MEDIA**

Mailing Address **14550 BEECHNUT ST**

City **HOUSTON** State **TX** Zip Code **77083**

Purpose of Disbursement  
**PRINTING**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**01 / 04 / 2016**

Amount of Each Disbursement this Period  
**88.16**

Memo Item

Transaction ID : **SB17B.648**

Full Name (Last, First, Middle Initial)  
**C. PAPA JOHNS #1694 PHOENIX**

Mailing Address **2836 E INDIAN SCHOOL RD**

City **PHOENIX** State **AZ** Zip Code **85016**

Purpose of Disbursement  
**FOOD AND BEVERAGE**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
**01 / 04 / 2016**

Amount of Each Disbursement this Period  
**117.60**

Memo Item

Transaction ID : **SB17B.650**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

201604140200098070

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 546 OF 590

17     18     19a     19b  
 20a     20b     20c     21

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

**A. PARTY STANDUPS**

Full Name (Last, First, Middle Initial)  
Mailing Address 1195 TALLEVAST RD

City SARASOTA State FL Zip Code 34243

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period: 193.44

Memo Item

Transaction ID : SB17B.651

**B. RED RAVEN RESTAURANT**

Full Name (Last, First, Middle Initial)  
Mailing Address 135 HISTORIC RTE 66

City WILLIAMS State AZ Zip Code 86046

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period: 104.66

Memo Item

Transaction ID : SB17B.652

**C. SAFEWAY STORE MESA**

Full Name (Last, First, Middle Initial)  
Mailing Address 1225 W GUADALUPE RD

City MESA State AZ Zip Code 85202

Purpose of Disbursement FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period: 25.92

Memo Item

Transaction ID : SB17B.653

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098071

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 547 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. SALLY BEAUTY</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 4727 E BELL RD		Amount of Each Disbursement this Period 14.25 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85032	Purpose of Disbursement SPONGES	Transaction ID : SB17B.654
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. SIMON &amp; SCHUSTER</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1230 AVENUE OF THE AMERICAS		Amount of Each Disbursement this Period 303.24 <input checked="" type="checkbox"/> Memo Item
City NEW YORK	State NY	
Zip Code 10020	Purpose of Disbursement BOOKS	Transaction ID : SB17B.655
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST AIRLINES</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address PO BOX 36647 - 1CR		Amount of Each Disbursement this Period 471.96 <input checked="" type="checkbox"/> Memo Item
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement TRAVEL	Transaction ID : SB17B.656
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098072

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 963 NORLAND AVE

City State Zip Code  
CHAMBERSBURG PA 17201

Purpose of Disbursement  
PAPER/TONER/PENS/EQUIPMENT PURCHASE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
01	04	2016

Amount of Each Disbursement this Period

653.69
--------

Memo Item

Transaction ID : SB17B.658

Full Name (Last, First, Middle Initial)

**B. STARBUCKS-PHOENIX**

Mailing Address 2824 N 44TH ST

City State Zip Code  
PHOENIX AZ 85001

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
01	04	2016

Amount of Each Disbursement this Period

40.91
-------

Memo Item

Transaction ID : SB17B.659

Full Name (Last, First, Middle Initial)

**C. UNITED STATES FLAG**

Mailing Address 1000 WESTINGHOUSE DR

City State Zip Code  
NEW STANTON PA 15672

Purpose of Disbursement  
FLAGS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
01	04	2016

Amount of Each Disbursement this Period

90.00
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Memo Item

Transaction ID : SB17B.649

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00
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201604140200098073

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 549 OF 590			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. WALMART</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 3721 E THOMAS RD		Amount of Each Disbursement this Period 116.04 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Purpose of Disbursement FOOD AND BEVERAGE		Transaction ID : SB17B.662
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. WINGATE BY WYNDHAM</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 1760 SUNRIDGE DR		Amount of Each Disbursement this Period 83.48 <input checked="" type="checkbox"/> Memo Item
City YUMA	State AZ	
Purpose of Disbursement TRAVEL		Transaction ID : SB17B.661
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. FIRST BANKCARD</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2016
Mailing Address PO BOX 2340		Amount of Each Disbursement this Period 4970.59 <input type="checkbox"/> Memo Item
City OMAHA	State NE	
Purpose of Disbursement CREDIT CARD TRAVEL		Transaction ID : SB17B.97
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4970.59
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098074

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 550 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. ALL THE KINGS FLAGS PHOENIX**

Mailing Address 3333 N 24TH ST

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
01	15	2016

Amount of Each Disbursement this Period

52.67
-------

Memo Item

Transaction ID : SB17B.665

**B. AMERICAN PRINTHOUSE**

Mailing Address 2205 E UNIVERSITY DR

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
01	15	2016

Amount of Each Disbursement this Period

2365.50
---------

Memo Item

Transaction ID : SB17B.666

**C. DUCK & DECANter**

Mailing Address 1651 E CAMELBACK RD

City PHOENIX State AZ Zip Code 85016

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
01	15	2016

Amount of Each Disbursement this Period

34.23
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Memo Item

Transaction ID : SB17B.667

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00
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201604140200098075

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. FEDEX.COM**

Mailing Address 100 FED EX DR

City State Zip Code  
CORAOPOLIS PA 15108

Purpose of Disbursement  
DELIVERY

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

42.11

Memo Item

Transaction ID : SB17B.668

Full Name (Last, First, Middle Initial)

**B. FRYS FOOD-PHOENIX**

Mailing Address 4724 N 20TH ST

City State Zip Code  
PHOENIX AZ 85016

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

20.25

Memo Item

Transaction ID : SB17B.669

Full Name (Last, First, Middle Initial)

**C. GIANT**

Mailing Address 1161 MARYLAND ROUTE 3 N

City State Zip Code  
CROFTON MD 21054

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

11.62

Memo Item

Transaction ID : SB17B.670

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098076

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. GRAPHIC IDEALS**

Mailing Address 4631 E THOMAS RD

City State Zip Code  
PHOENIX AZ 85018

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

97.74

Memo Item

Transaction ID : SB17B.671

**B. HOME DEPOT 477 6 PHOENIX**

Mailing Address 3609 E THOMAS RD

City State Zip Code  
PHOENIX AZ 85018

Purpose of Disbursement  
PAINT

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

21.85

Memo Item

Transaction ID : SB17B.685

**C. IHOP**

Mailing Address 450 BRAND BLVD

City State Zip Code  
GLENDALE CA 91203

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

20.61

Memo Item

Transaction ID : SB17B.672

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098077



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 553 OF 590			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. MAIN STREET CAFE</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 920 MAIN ST		Amount of Each Disbursement this Period 7.56
City CLARKDALE	State AZ	Zip Code 86324
Purpose of Disbursement FOOD AND BEVERAGE	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	
		<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.673

Full Name (Last, First, Middle Initial) <b>B. MARRIOTT PHOENIX</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 5350 E MARRIOTT DR		Amount of Each Disbursement this Period 1111.27
City PHOENIX	State AZ	Zip Code 85054
Purpose of Disbursement TRAVEL	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	
		<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.674

Full Name (Last, First, Middle Initial) <b>C. MCDONALDS-85013</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 750 W CAMELBACK RD		Amount of Each Disbursement this Period 4.98
City PHOENIX	State AZ	Zip Code 85013
Purpose of Disbursement FOOD AND BEVERAGE	Category/ Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	
		<input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.675

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098078

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. MURPHYS</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 201 N CORTEZ ST		Amount of Each Disbursement this Period 249.36 <input checked="" type="checkbox"/> Memo Item
City PRESCOTT	State AZ	
Zip Code 86301	Purpose of Disbursement FOOD AND BEVERAGE	Transaction ID : SB17B.676
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. PAPA JOHNS #1694 PHOENIX</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 2836 E INDIAN SCHOOL RD		Amount of Each Disbursement this Period 225.19 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement FOOD AND BEVERAGE	Transaction ID : SB17B.677
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. PEACOCK ROOM</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 122 E GURLEY ST		Amount of Each Disbursement this Period 4.00 <input checked="" type="checkbox"/> Memo Item
City PRESCOTT	State AZ	
Zip Code 86301	Purpose of Disbursement FOOD AND BEVERAGE	Transaction ID : SB17B.686
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098079

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. PHOENIX METER PARKING**

Mailing Address 200 W WASHINGTON ST

City PHOENIX State AZ Zip Code 85003

Purpose of Disbursement  
PARKING SVC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

0.75

Memo Item

Transaction ID : SB17B.678

Full Name (Last, First, Middle Initial)

**B. PRICELINE HOTELS**

Mailing Address HQ OFFICE

City NORWALK State CT Zip Code 06850

Purpose of Disbursement  
TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

113.32

Memo Item

Transaction ID : SB17B.679

Full Name (Last, First, Middle Initial)

**C. SAFEWAY STORE MESA**

Mailing Address 1225 W GUADALUPE RD

City MESA State AZ Zip Code 85202

Purpose of Disbursement  
FOOD AND BEVERAGE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

8.86

Memo Item

Transaction ID : SB17B.680

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

0.00

201604140200098080

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 556 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. SHELL OIL-77067</b>		Date of Disbursement
Mailing Address 12700 NORTHBOROUGH		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City HOUSTON	State TX	Zip Code 77067
Purpose of Disbursement TRAVEL	<input type="text" value=""/>	Amount of Each Disbursement this Period <input type="text" value="54.80"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.681
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STAPLES</b>		Date of Disbursement
Mailing Address 963 NORLAND AVE		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City CHAMBERSBURG	State PA	Zip Code 17201
Purpose of Disbursement PAPER	<input type="text" value=""/>	Amount of Each Disbursement this Period <input type="text" value="8.12"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.682
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STARBUCKS-PHOENIX</b>		Date of Disbursement
Mailing Address 2824 N 44TH ST		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City PHOENIX	State AZ	Zip Code 85001
Purpose of Disbursement FOOD AND BEVERAGE	<input type="text" value=""/>	Amount of Each Disbursement this Period <input type="text" value="24.47"/>
Candidate Name	Category/ Type	<input checked="" type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17B.683
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098081

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. TARGET PHOENIX</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 5715 N 19TH AVE		Amount of Each Disbursement this Period 77.63 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85015	Purpose of Disbursement UMBRELLAS	Transaction ID : SB17B.684
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. UNITED STATES SENATE</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 232 HART BLDG		Amount of Each Disbursement this Period 33.00 <input checked="" type="checkbox"/> Memo Item
City WASHINGTON	State DC	
Zip Code 20510	Purpose of Disbursement FLAGS	Transaction ID : SB17B.687
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. WALMART</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 3721 E THOMAS RD		Amount of Each Disbursement this Period 380.70 <input checked="" type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85018	Purpose of Disbursement BINDERS/FOOD AND BEVERAGE	Transaction ID : SB17B.688
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020098082

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. FIRST BANKCARD</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address PO BOX 2340		Amount of Each Disbursement this Period 3927.01
City OMAHA	State NE	
Zip Code 68103	Purpose of Disbursement CREDIT CARD TRAVEL	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.98
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address PO BOX 582820 MD 766		Amount of Each Disbursement this Period 171.10
City TULSA	State OK	
Zip Code 74158	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.749
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. MACNAIR TRAVEL AGENCY</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 4100 FAIRFAX DR STE 600		Amount of Each Disbursement this Period 105.00
City ARLINGTON	State VA	
Zip Code 22203	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.748
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3927.01
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098083

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. MYFAX SERVICES</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 6922 HOLLYWOOD BLVD #800		Amount of Each Disbursement this Period 10.00 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.750
City LOS ANGELES	State CA	
Zip Code 90028	Purpose of Disbursement PHONE SVC	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PHOENICIAN HOTEL</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 6000 E CAMELBACK RD		Amount of Each Disbursement this Period 1345.00 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.746
City SCOTTSDALE	State AZ	
Zip Code 85251	Purpose of Disbursement FACILITY RENTAL/CATERING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. SOURCE</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address 575 PENNSYLVANIA AVE NW		Amount of Each Disbursement this Period 1750.00 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17B.744
City WASHINGTON	State DC	
Zip Code 20565	Purpose of Disbursement FACILITY RENTAL/CATERING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020098084

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 560 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial) <b>A. SOUTHWEST AIRLINES</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address <b>PO BOX 36647 - 1CR</b>		Amount of Each Disbursement this Period 147.96 <input checked="" type="checkbox"/> Memo Item
City <b>DALLAS</b>	State <b>TX</b>	
Zip Code <b>75235</b>	Purpose of Disbursement <b>TRAVEL</b>	Transaction ID : <b>SB17B.751</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address <b>1200 E ALGONQUIN RD ELK GROVE</b>		Amount of Each Disbursement this Period 151.10 <input checked="" type="checkbox"/> Memo Item
City <b>VILLAGE</b>	State <b>IL</b>	
Zip Code <b>60007</b>	Purpose of Disbursement <b>TRAVEL</b>	Transaction ID : <b>SB17B.747</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS- CRYSTAL CITY STATION</b>		Date of Disbursement MM / DD / YYYY 01 / 15 / 2016
Mailing Address <b>1632 CRYSTAL SQ ARC</b>		Amount of Each Disbursement this Period 246.85 <input checked="" type="checkbox"/> Memo Item
City <b>ARLINGTON</b>	State <b>VA</b>	
Zip Code <b>22202</b>	Purpose of Disbursement <b>POSTAGE</b>	Transaction ID : <b>SB17B.745</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098085



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

**A. FIRST BANKCARD**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 2340

City OMAHA State NE Zip Code 68103

Purpose of Disbursement CREDIT CARD TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 8407.44

Memo Item

Transaction ID : SB17B.99

**B. AMERICAN AIRLINES**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 582820 MD 766

City TULSA State OK Zip Code 74158

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 1525.50

Memo Item

Transaction ID : SB17B.754

**C. CAIRO WINE & LIQUOR**

Full Name (Last, First, Middle Initial)  
Mailing Address 1618 17TH ST BW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement CATERING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 02 / 09 / 2016

Amount of Each Disbursement this Period: 191.93

Memo Item

Transaction ID : SB17B.755

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8407.44

201604140200098086

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 562 OF 590			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. CAREY INTERNATIONAL INC</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 4530 WISCONSIN AVE NW		Amount of Each Disbursement this Period 1188.50
City WASHINGTON	State DC	
Zip Code 20016	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17B.756
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. DELTA AIRLINES</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address ATLANTA AIRPORT		Amount of Each Disbursement this Period 2724.60
City ATLANTA	State GA	
Zip Code 30344	Purpose of Disbursement TRAVEL	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17B.757
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. HARVARD CLUB OF NEW YORK</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 35 W 44TH ST		Amount of Each Disbursement this Period 500.00
City NEW YORK	State NY	
Zip Code 10036	Purpose of Disbursement FACILITY RENTAL/CATERING	<input checked="" type="checkbox"/> Memo Item
Candidate Name	Category/Type	Transaction ID : SB17B.758
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020098087

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. MACNAIR TRAVEL AGENCY**

Full Name (Last, First, Middle Initial)  
Mailing Address 4100 FAIRFAX DR STE 600

City ARLINGTON State VA Zip Code 22203

Purpose of Disbursement TRAVEL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period: 630.00

Memo Item

Transaction ID : SB17B.753

**B. MYFAX SERVICES**

Full Name (Last, First, Middle Initial)  
Mailing Address 6922 HOLLYWOOD BLVD #800

City LOS ANGELES State CA Zip Code 90028

Purpose of Disbursement PHONE SVC

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period: 10.00

Memo Item

Transaction ID : SB17B.759

**C. PHOENICIAN HOTEL**

Full Name (Last, First, Middle Initial)  
Mailing Address 6000 E CAMELBACK RD

City SCOTTSDALE State AZ Zip Code 85251

Purpose of Disbursement FACILITY RENTAL/CATERING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 09 / 2016

Amount of Each Disbursement this Period: 571.16

Memo Item

Transaction ID : SB17B.760

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

201604140200098088

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

17  
 18  
 19a  
 19b  
 20a  
 20b  
 20c  
 21

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

**A. SOUTHWEST AIRLINES**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO BOX 36647 - 1CR**

City **DALLAS** State **TX** Zip Code **75235**

Purpose of Disbursement **TRAVEL**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **02 / 09 / 2016**

Amount of Each Disbursement this Period: **148.96**

Memo Item

Transaction ID : **SB17B.761**

**B. SPRINT-60197**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO BOX 4181**

City **CAROL STREAM** State **IL** Zip Code **60197**

Purpose of Disbursement **PHONE SVC**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **02 / 09 / 2016**

Amount of Each Disbursement this Period: **98.38**

Memo Item

Transaction ID : **SB17B.762**

**C. STAPLES**

Full Name (Last, First, Middle Initial)  
Mailing Address **963 NORLAND AVE**

City **CHAMBERSBURG** State **PA** Zip Code **17201**

Purpose of Disbursement **PAPER**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: **02 / 09 / 2016**

Amount of Each Disbursement this Period: **55.63**

Memo Item

Transaction ID : **SB17B.763**

**SUBTOTAL** of Disbursements This Page (optional)..... **0.00**

**TOTAL** This Period (last page this line number only).....

201604140200098089

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 565 OF 590			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement
Mailing Address 1200 E ALGONQUIN RD ELK GROVE		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City	State	Zip Code
VILLAGE	IL	60007
Purpose of Disbursement TRAVEL	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="756.33"/>
Office Sought:	House <input type="checkbox"/>	Disbursement For:
	Senate <input type="checkbox"/>	
	President <input type="checkbox"/>	<input type="checkbox"/> Other (specify)
State:	District:	<input checked="" type="checkbox"/> Memo Item
		Transaction ID : SB17B.764

Full Name (Last, First, Middle Initial) <b>B. USPS- 22081</b>		Date of Disbursement
Mailing Address 8409 LEE HWY		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City	State	Zip Code
MERRIFIELD	VA	22081
Purpose of Disbursement POSTAGE	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="6.45"/>
Office Sought:	House <input type="checkbox"/>	Disbursement For:
	Senate <input type="checkbox"/>	
	President <input type="checkbox"/>	<input type="checkbox"/> Other (specify)
State:	District:	<input checked="" type="checkbox"/> Memo Item
		Transaction ID : SB17B.765

Full Name (Last, First, Middle Initial) <b>C. GRIFFIN PARTNERS, PARKWAY FOUNTAIN, L.P.</b>		Date of Disbursement
Mailing Address 1702 E HIGHLAND AVE, SUITE 313		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City	State	Zip Code
PHOENIX	AZ	85016
Purpose of Disbursement RENT	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="9346.60"/>
Office Sought:	House <input type="checkbox"/>	Disbursement For:
	Senate <input type="checkbox"/>	
	President <input type="checkbox"/>	<input type="checkbox"/> Other (specify)
State:	District:	<input type="checkbox"/> Memo Item
		Transaction ID : SB17B.101

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<input type="text" value="9346.60"/>
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098090

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 566 OF 590

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. GRIFFIN PARTNERS, PARKWAY FOUNTAIN, L.P.</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 1702 E HIGHLAND AVE, SUITE 313		Amount of Each Disbursement this Period 9346.60 <input type="checkbox"/> Memo Item Transaction ID : SB17B.102
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. GRIFFIN PARTNERS, PARKWAY FOUNTAIN, L.P.</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2016
Mailing Address 1702 E HIGHLAND AVE, SUITE 313		Amount of Each Disbursement this Period 9428.59 <input type="checkbox"/> Memo Item Transaction ID : SB17B.103
City PHOENIX	State AZ	
Zip Code 85016	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. GTT COMMUNICATIONS INC</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address PO BOX 150421		Amount of Each Disbursement this Period 1219.86 <input type="checkbox"/> Memo Item Transaction ID : SB17B.104
City HARTFORD	State CT	
Zip Code 06115	Purpose of Disbursement UTILITIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19995.05
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098091

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. GTT COMMUNICATIONS INC**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 150421

City HARTFORD State CT Zip Code 06115

Purpose of Disbursement UTILITIES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 16 / 2016

Amount of Each Disbursement this Period  
2396.83

Memo Item

Transaction ID : SB17B.105

**B. HAPPY HOLLOW CLUB**

Full Name (Last, First, Middle Initial)  
Mailing Address 1701 S 105TH ST

City OMAHA State NE Zip Code 68124

Purpose of Disbursement FACILITY RENTAL/CATERING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 25 / 2016

Amount of Each Disbursement this Period  
1287.86

Memo Item

Transaction ID : SB17B.106

**C. HEARTLAND CAMPAIGN MANAGEMENT**

Full Name (Last, First, Middle Initial)  
Mailing Address 10312 S 177TH ST

City OMAHA State NE Zip Code 68136

Purpose of Disbursement FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 29 / 2016

Amount of Each Disbursement this Period  
4375.00

Memo Item

Transaction ID : SB17B.107

**SUBTOTAL** of Disbursements This Page (optional)..... 8059.69

**TOTAL** This Period (last page this line number only).....

201604140200099092

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. HUCKABY DAVIS LISKER</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2016
Mailing Address 228 S WASHINGTON ST STE 115		Amount of Each Disbursement this Period 3289.82
City ALEXANDRIA	State VA	
Zip Code 22314	Purpose of Disbursement COMPLIANCE CONSULTING	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.116
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. I360, LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2016
Mailing Address PO BOX 37046		Amount of Each Disbursement this Period 1481.08
City BALTIMORE	State MD	
Zip Code 21297	Purpose of Disbursement DATABASE MANAGEMENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.117
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. I360, LLC</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address PO BOX 37046		Amount of Each Disbursement this Period 6114.70
City BALTIMORE	State MD	
Zip Code 21297	Purpose of Disbursement DATABASE MANAGEMENT	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type	Transaction ID : SB17B.118
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10885.60
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098093



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

Date of Disbursement

M M / D D / Y Y Y Y
01 / 15 / 2016

City State Zip Code  
KINGWOOD TX 77339

Amount of Each Disbursement this Period

5910.06
---------

Purpose of Disbursement  
PAYROLL SVC-INSUR-TAXES

Category/ Type
-------------------

Memo Item

Candidate Name

Transaction ID : SB17B.119

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

Date of Disbursement

M M / D D / Y Y Y Y
01 / 31 / 2016

City State Zip Code  
KINGWOOD TX 77339

Amount of Each Disbursement this Period

6731.85
---------

Purpose of Disbursement  
PAYROLL SVC-INSUR-TAXES

Category/ Type
-------------------

Memo Item

Candidate Name

Transaction ID : SB17B.120

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. INSPERITY**

Mailing Address 19001 CRESCENT SPRINGS DR

Date of Disbursement

M M / D D / Y Y Y Y
02 / 15 / 2016

City State Zip Code  
KINGWOOD TX 77339

Amount of Each Disbursement this Period

5468.13
---------

Purpose of Disbursement  
PAYROLL SVC-INSUR-TAXES

Category/ Type
-------------------

Memo Item

Candidate Name

Transaction ID : SB17B.121

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

18110.04
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**TOTAL** This Period (last page this line number only).....

20160414020098094

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 570 OF 590			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. INSPERITY</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 19001 CRESCENT SPRINGS DR		Amount of Each Disbursement this Period 4838.83 <input type="checkbox"/> Memo Item
City KINGWOOD	State TX	
Purpose of Disbursement PAYROLL SVC-INSUR-TAXES		Transaction ID : SB17B.122
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. INSPERITY</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2016
Mailing Address 19001 CRESCENT SPRINGS DR		Amount of Each Disbursement this Period 5723.09 <input type="checkbox"/> Memo Item
City KINGWOOD	State TX	
Purpose of Disbursement PAYROLL SVC-INSUR-TAXES		Transaction ID : SB17B.123
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. INSPERITY</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 19001 CRESCENT SPRINGS DR		Amount of Each Disbursement this Period 5958.69 <input type="checkbox"/> Memo Item
City KINGWOOD	State TX	
Purpose of Disbursement PAYROLL SVC-INSUR-TAXES		Transaction ID : SB17B.124
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16520.61
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098095

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE**

Mailing Address **PO BOX 970011**

City **ST LOUIS** State **MO** Zip Code **63197**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Transaction ID : **SB17B.126**

Full Name (Last, First, Middle Initial)

**B. INTERNAL REVENUE SERVICE**

Mailing Address **PO BOX 970011**

City **ST LOUIS** State **MO** Zip Code **63197**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Transaction ID : **SB17B.127**

Full Name (Last, First, Middle Initial)

**C. INTERNAL REVENUE SERVICE**

Mailing Address **PO BOX 970011**

City **ST LOUIS** State **MO** Zip Code **63197**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Transaction ID : **SB17B.128**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**27445.29**

20160414020098096

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 572 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. INTERNAL REVENUE SERVICE</b>		Date of Disbursement
Mailing Address <b>PO BOX 970011</b>		<input type="text" value="02"/> / <input type="text" value="29"/> / <input type="text" value="2016"/>
City <b>ST LOUIS</b>	State <b>MO</b>	Zip Code <b>63197</b>
Purpose of Disbursement <b>PAYROLL TAXES</b>	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="9341.53"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17B.129</b>
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. INTERNAL REVENUE SERVICE</b>		Date of Disbursement
Mailing Address <b>PO BOX 970011</b>		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2016"/>
City <b>ST LOUIS</b>	State <b>MO</b>	Zip Code <b>63197</b>
Purpose of Disbursement <b>PAYROLL TAXES</b>	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="9417.27"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17B.130</b>
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>C. INTERNAL REVENUE SERVICE</b>		Date of Disbursement
Mailing Address <b>PO BOX 970011</b>		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2016"/>
City <b>ST LOUIS</b>	State <b>MO</b>	Zip Code <b>63197</b>
Purpose of Disbursement <b>PAYROLL TAXES</b>	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="9417.27"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>SB17B.131</b>
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<input type="text" value="28176.07"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

201604140200098097

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 573 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. INTERNAL REVENUE SERVICE**

Mailing Address PO BOX 970011

City State Zip Code  
ST LOUIS MO 63197

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 11 / 2016

Amount of Each Disbursement this Period

59071.00
----------

Memo Item

Transaction ID : SB17B.132

**B. JIM CLICK AUTOMOTIVE GROUP**

Mailing Address 6725 E CAMINO PRINCIPAL

City State Zip Code  
TUCSON AZ 85715

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 04 / 2016

Amount of Each Disbursement this Period

125.00
--------

Memo Item

Transaction ID : SB17B.141

**C. LOCKTON AFFINITY**

Mailing Address PO BOX 87-9610

City State Zip Code  
KANSAS CITY MO 64187

Purpose of Disbursement  
INSURANCE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 19 / 2016

Amount of Each Disbursement this Period

500.00
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Memo Item

Transaction ID : SB17B.156

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

59696.00
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201604140200098098

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. LOVAS CO LLC**

Mailing Address 6635 W HAPPY VALLEY RD

City State Zip Code  
GLENDALE AZ 85310

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 04 / 2016

Amount of Each Disbursement this Period

12000.00

Memo Item

Transaction ID : SB17B.163

Full Name (Last, First, Middle Initial)

**B. LOVAS CO LLC**

Mailing Address 6635 W HAPPY VALLEY RD

City State Zip Code  
GLENDALE AZ 85310

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 01 / 2016

Amount of Each Disbursement this Period

12000.00

Memo Item

Transaction ID : SB17B.164

Full Name (Last, First, Middle Initial)

**C. LOVAS CO LLC**

Mailing Address 6635 W HAPPY VALLEY RD

City State Zip Code  
GLENDALE AZ 85310

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 03 / 2016

Amount of Each Disbursement this Period

10000.00

Memo Item

Transaction ID : SB17B.165

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

34000.00

20160414020098099

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 17  
 18  
 19a  
 19b  
 20a  
 20b  
 20c  
 21  
 PAGE 575 OF 590

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. MCCARTHY HENNINGS WHALEN INC**

Full Name (Last, First, Middle Initial)  
 Mailing Address 1850 M ST NW

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement MEDIA PRODUCTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
 03 / 10 / 2016

Amount of Each Disbursement this Period: 34751.53

Memo Item

Transaction ID : SB17B.166

**B. MD COMPTROLLER**

Full Name (Last, First, Middle Initial)  
 Mailing Address 80 CALVERT ST

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
 01 / 15 / 2016

Amount of Each Disbursement this Period: 282.02

Memo Item

Transaction ID : SB17B.167

**C. MD COMPTROLLER**

Full Name (Last, First, Middle Initial)  
 Mailing Address 80 CALVERT ST

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
 01 / 31 / 2016

Amount of Each Disbursement this Period: 282.02

Memo Item

Transaction ID : SB17B.168

**SUBTOTAL** of Disbursements This Page (optional) ..... 35315.57

**TOTAL** This Period (last page this line number only) .....

201604140200098100

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. MD COMPTROLLER**

Mailing Address 80 CALVERT ST

City State Zip Code  
ANNAPOLIS MD 21401

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
02	15	2016

Amount of Each Disbursement this Period

282.02
--------

Memo Item

Transaction ID : SB17B.169

Full Name (Last, First, Middle Initial)

**B. MD COMPTROLLER**

Mailing Address 80 CALVERT ST

City State Zip Code  
ANNAPOLIS MD 21401

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
02	29	2016

Amount of Each Disbursement this Period

282.02
--------

Memo Item

Transaction ID : SB17B.170

Full Name (Last, First, Middle Initial)

**C. MD COMPTROLLER**

Mailing Address 80 CALVERT ST

City State Zip Code  
ANNAPOLIS MD 21401

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
03	15	2016

Amount of Each Disbursement this Period

282.02
--------

Memo Item

Transaction ID : SB17B.171

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

846.06
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201604140200098101



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. MD COMPTROLLER**

Mailing Address 80 CALVERT ST

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2016

Amount of Each Disbursement this Period

282.02

Memo Item

Transaction ID : SB17B.172

**B. MESA PUBLIC SCHOOLS**

Mailing Address 63 E MAIN ST #101

City MESA State AZ Zip Code 85201

Purpose of Disbursement  
FACILITY RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 12 / 2016

Amount of Each Disbursement this Period

346.10

Memo Item

Transaction ID : SB17B.173

**C. NYS TAX DEPARTMENT**

Mailing Address WA HARRIMAN CAMPUS

City ALBANY State NY Zip Code 12227

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2016

Amount of Each Disbursement this Period

199.98

Memo Item

Transaction ID : SB17B.176

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

828.10

201604140200098102

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 578 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. NYS TAX DEPARTMENT**

Mailing Address WA HARRIMAN CAMPUS

City ALBANY State NY Zip Code 12227

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2016

Amount of Each Disbursement this Period

199.98

Memo Item

Transaction ID : SB17B.177

Full Name (Last, First, Middle Initial)

**B. NYS TAX DEPARTMENT**

Mailing Address WA HARRIMAN CAMPUS

City ALBANY State NY Zip Code 12227

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2016

Amount of Each Disbursement this Period

199.98

Memo Item

Transaction ID : SB17B.178

Full Name (Last, First, Middle Initial)

**C. NYS TAX DEPARTMENT**

Mailing Address WA HARRIMAN CAMPUS

City ALBANY State NY Zip Code 12227

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 29 / 2016

Amount of Each Disbursement this Period

199.98

Memo Item

Transaction ID : SB17B.179

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

599.94

201604140200093103

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. NYS TAX DEPARTMENT**

Mailing Address **WA HARRIMAN CAMPUS**

City **ALBANY** State **NY** Zip Code **12227**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y  
**03 / 15 / 2016**

Amount of Each Disbursement this Period

Memo Item  
**199.98**

Transaction ID : **SB17B.180**

**B. NYS TAX DEPARTMENT**

Mailing Address **WA HARRIMAN CAMPUS**

City **ALBANY** State **NY** Zip Code **12227**

Purpose of Disbursement  
**PAYROLL TAXES**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y  
**03 / 31 / 2016**

Amount of Each Disbursement this Period

Memo Item  
**199.98**

Transaction ID : **SB17B.181**

**C. O'DANIEL COMPANIES LLC**

Mailing Address **6418 E CLAIRE DR**

City **SCOTTSDALE** State **AZ** Zip Code **85254**

Purpose of Disbursement  
**POLITICAL STRATEGY CONSULTING/TRAVEL**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y  
**01 / 04 / 2016**

Amount of Each Disbursement this Period

Memo Item  
**10322.51**

Transaction ID : **SB17B.182**

**SUBTOTAL** of Disbursements This Page (optional).....

**10722.47**

**TOTAL** This Period (last page this line number only).....

201604140200098104

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. O'DANIEL COMPANIES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 6418 E CLAIRE DR

City SCOTTSDALE State AZ Zip Code 85254

Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 03 / 2016

Amount of Each Disbursement this Period: 11019.61

Memo Item

Transaction ID : SB17B.183

**B. O'DANIEL COMPANIES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 6418 E CLAIRE DR

City SCOTTSDALE State AZ Zip Code 85254

Purpose of Disbursement POLITICAL STRATEGY CONSULTING/TRAVEL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
03 / 07 / 2016

Amount of Each Disbursement this Period: 10096.06

Memo Item

Transaction ID : SB17B.184

**C. PACIFIC OFFICE AUTOMATION**

Full Name (Last, First, Middle Initial)  
Mailing Address 14747 NW GREENBRIER PKWY

City BEAVERTON State OR Zip Code 97006

Purpose of Disbursement EQUIPMENT LEASE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 06 / 2016

Amount of Each Disbursement this Period: 298.47

Memo Item

Transaction ID : SB17B.185

**SUBTOTAL** of Disbursements This Page (optional)..... 21414.14

**TOTAL** This Period (last page this line number only).....

201604140200098105

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 581 OF 590	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. PACIFIC OFFICE AUTOMATION</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2016
Mailing Address 14747 NW GREENBRIER PKWY		Amount of Each Disbursement this Period 353.55 <input type="checkbox"/> Memo Item Transaction ID : SB17B.186
City BEAVERTON	State OR	
Zip Code 97006	Purpose of Disbursement EQUIPMENT LEASE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PACIFIC OFFICE AUTOMATION</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 14747 NW GREENBRIER PKWY		Amount of Each Disbursement this Period 386.81 <input type="checkbox"/> Memo Item Transaction ID : SB17B.187
City BEAVERTON	State OR	
Zip Code 97006	Purpose of Disbursement EQUIPMENT LEASE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PRO PRODUCTION SERVICES</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2016
Mailing Address 3532 E ELWOOD ST		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Memo Item Transaction ID : SB17B.189
City PHOENIX	State AZ	
Zip Code 85040	Purpose of Disbursement EQUIPMENT LEASE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5740.36
<b>TOTAL</b> This Period (last page this line number only).....	

20160414020098106

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 582 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A. PRUES-HECKER LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 10900 HARPER AVE

City State Zip Code  
DETROIT MI 48213

Purpose of Disbursement  
FINANCE CONSULTING/PRINTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 10 / 2016

Amount of Each Disbursement this Period  
7335.92

Memo Item

Transaction ID : SB17B.190

**B. ROUNDTABLE STRATEGIES LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 911 W BUTLER DR

City State Zip Code  
PHOENIX AZ 85021

Purpose of Disbursement  
MESSAGE PHONE CALLS

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 21 / 2016

Amount of Each Disbursement this Period  
416.67

Memo Item

Transaction ID : SB17B.191

**C. SCR & ASSOCIATES**

Full Name (Last, First, Middle Initial)  
Mailing Address 100 TRADE CENTER

City State Zip Code  
WOBURN MA 01801

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 12 / 2016

Amount of Each Disbursement this Period  
2500.00

Memo Item

Transaction ID : SB17B.194

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

10252.59

201604140200098107

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 583 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
FRIENDS OF JOHN MCCAIN, INC.

Full Name (Last, First, Middle Initial) <b>A. SNELL &amp; WILMER LLP</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2016
Mailing Address 400 E VAN BUREN , SUITE 1900		Amount of Each Disbursement this Period 4872.00 <input type="checkbox"/> Memo Item
City PHOENIX	State AZ	
Zip Code 85004	Purpose of Disbursement LEGAL CONSULTING	Transaction ID : SB17B.196
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. SOCIAL MEDIA CONSULTING</b>		Date of Disbursement MM / DD / YYYY 02 / 09 / 2016
Mailing Address 856 N 85TH PLACE		Amount of Each Disbursement this Period 180.00 <input type="checkbox"/> Memo Item
City SCOTTSDALE	State AZ	
Zip Code 85257	Purpose of Disbursement WEB CONSULTING	Transaction ID : SB17B.197
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SOUTHWEST PUBLISHING</b>		Date of Disbursement MM / DD / YYYY 01 / 12 / 2016
Mailing Address 4000 SE ADAMS ST		Amount of Each Disbursement this Period 10726.14 <input type="checkbox"/> Memo Item
City TOPEKA	State KS	
Zip Code 66609	Purpose of Disbursement POSTAGE	Transaction ID : SB17B.198
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15778.14
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098108

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 584 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST PUBLISHING**

Mailing Address 4000 SE ADAMS ST

City TOPEKA State KS Zip Code 66609

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Transaction ID : SB17B.199

**B. SOUTHWEST PUBLISHING**

Mailing Address 4000 SE ADAMS ST

City TOPEKA State KS Zip Code 66609

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Transaction ID : SB17B.200

**C. SOUTHWEST PUBLISHING**

Mailing Address 4000 SE ADAMS ST

City TOPEKA State KS Zip Code 66609

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

Transaction ID : SB17B.201

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

16865.55

201604140200098109



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 585 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. SQUARE**

Mailing Address 1455 MARKET ST

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement  
CREDIT CARD MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
03	07	2016

Amount of Each Disbursement this Period

Amount	0.69
--------	------

Memo Item

Transaction ID : SB17B.239

Full Name (Last, First, Middle Initial)

**B. TASTEFUL AFFAIRS CATERING**

Mailing Address 5700 GENERAL WASHINGTON DR

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement  
CATERING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
02	09	2016

Amount of Each Disbursement this Period

Amount	2449.75
--------	---------

Memo Item

Transaction ID : SB17B.214

Full Name (Last, First, Middle Initial)

**C. THE HALLISEY GROUP**

Mailing Address 38 E 85TH ST, STE 5E

City NEW YORK State NY Zip Code 10028

Purpose of Disbursement  
FINANCE CONSULTING

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
01	27	2016

Amount of Each Disbursement this Period

Amount	10000.00
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Memo Item

Transaction ID : SB17B.215

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

Amount	12450.44
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201604140200098110

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 586 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. THE HALLISEY GROUP</b>		Date of Disbursement MM / DD / YYYY 02 / 01 / 2016
Mailing Address 38 E 85TH ST, STE 5E		Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Memo Item
City NEW YORK	State NY	
Zip Code 10028	Purpose of Disbursement FINANCE CONSULTING	Transaction ID : SB17B.216
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THOMAS GRAPHICS</b>		Date of Disbursement MM / DD / YYYY 01 / 22 / 2016
Mailing Address PO BOX 142226		Amount of Each Disbursement this Period 680.67 <input type="checkbox"/> Memo Item
City AUSTIN	State TX	
Zip Code 78714	Purpose of Disbursement PRINTING	Transaction ID : SB17B.217
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TV EYES INC.</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016
Mailing Address 1150 POST ROAD		Amount of Each Disbursement this Period 1125.00 <input type="checkbox"/> Memo Item
City FAIRFIELD	State CT	
Zip Code 06824	Purpose of Disbursement SUBSCRIPTIONS	Transaction ID : SB17B.234
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11805.67
<b>TOTAL</b> This Period (last page this line number only).....	

201604140200098111

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. US MONITOR</b>		Date of Disbursement MM / DD / YYYY 02 / 29 / 2016
Mailing Address 86 MAPLE AVE		Amount of Each Disbursement this Period 3.25 <input type="checkbox"/> Memo Item
City NEW CITY	State NY	
Zip Code 10956	Purpose of Disbursement SUBSCRIPTIONS	Transaction ID : SB17B.235
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016
Mailing Address 8409 LEE HWY		Amount of Each Disbursement this Period 225.00 <input type="checkbox"/> Memo Item
City MERRIFIELD	State VA	
Zip Code 22081	Purpose of Disbursement BRE PERMIT	Transaction ID : SB17B.236
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY 02 / 02 / 2016
Mailing Address 8409 LEE HWY		Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Memo Item
City MERRIFIELD	State VA	
Zip Code 22081	Purpose of Disbursement POSTAGE	Transaction ID : SB17B.237
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2728.25
<b>TOTAL</b> This Period (last page this line number only) .....	

201604140200098112

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 588 OF 590

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)

**A. TRW PAC**

Mailing Address PO BOX 16185

City TUCSON State AZ Zip Code 85732

Purpose of Disbursement  
REGISTRATION FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY
03	22	2016

Amount of Each Disbursement this Period

25.00
-------

Memo Item

Transaction ID : SB17B.233

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY

Amount of Each Disbursement this Period

--

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

MM	DD	YYYY

Amount of Each Disbursement this Period

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Memo Item

SUBTOTAL of Disbursements This Page (optional).....

25.00
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TOTAL This Period (last page this line number only).....

850673.56
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201604140200098113

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 589 OF 590

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input checked="" type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial)  
**A. CHARLIE BLACK**

Mailing Address **208 VIRGINA AVE**

City **ALEXANDRIA** State **VA** Zip Code **22302**

Purpose of Disbursement  
**CONTRIBUTION REFUND**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y  
**03 / 29 / 2016**

Amount of Each Disbursement this Period

Memo Item  
**1000.00**

Transaction ID : **SB20B.4**

Full Name (Last, First, Middle Initial)  
**B. SUZANNE HILTON**

Mailing Address **10387 E ROBS CAMP RD**

City **SCOTTSDALE** State **AZ** Zip Code **85255**

Purpose of Disbursement  
**CONTRIBUTION REFUND**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y  
**02 / 25 / 2016**

Amount of Each Disbursement this Period

Memo Item  
**140.16**

Transaction ID : **SB20B.3**

Full Name (Last, First, Middle Initial)  
**C. MARY NICHOLSON**

Mailing Address **1672 N RENAUD RD**

City **GROSSE POINTE WOODS** State **MI** Zip Code **48236**

Purpose of Disbursement  
**CONTRIBUTION REFUND**

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

M M /  D D /  Y Y Y Y  
**02 / 25 / 2016**

Amount of Each Disbursement this Period

Memo Item  
**100.00**

Transaction ID : **SB20B.2**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1240.16**

201604140200098114

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 590 OF 590

<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

Full Name (Last, First, Middle Initial) <b>A. JEFFREY SCHWARTZ</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2016
Mailing Address 8701 E SAN FELIPE DR		Amount of Each Disbursement this Period 50.00 <input type="checkbox"/> Memo Item
City SCOTTSDALE	State AZ	
Purpose of Disbursement CONTRIBUTION REFUND		Transaction ID : SB20B.1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City	State	
Purpose of Disbursement		Transaction ID : SB20B.1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period  <input type="checkbox"/> Memo Item
City	State	
Purpose of Disbursement		Transaction ID : SB20B.1
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	50.00
TOTAL This Period (last page this line number only).....	1290.16

201604140200098115

**Hand Delivered**

201604140200098116

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

ELECTRONICALLY DELIVERED \_\_\_\_\_

Date of Receipt

HAND DELIVERED \_\_\_\_\_

**4-14-16**

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Date of Receipt

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

### OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

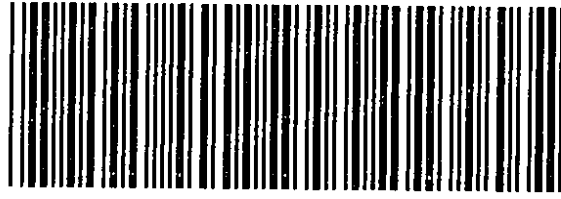
PREPARER **DH**

DATE PREPARED **4-14-16**

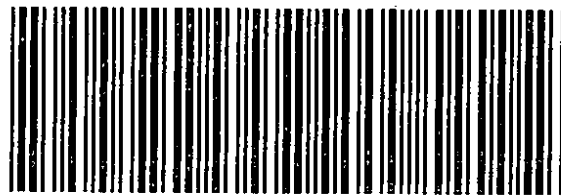
4/04/16

201604140200098117





SEN PATCH



SEN PATCH

201604140200098118