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 / 630

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
McCaskill for Missouri

A.
Full Name (Last, First, Middle Initial)
Mrs. Edith R. Lauderdale

Mailing Address 55 Nonquitt Avenue
Post Office Box P-244

City: South Dartmouth State: MA Zip Code: 02748

FEC ID number of contributing federal political committee. C

Name of Employer: Retired
Occupation: Retired

Receipt For: 2008
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 02 / 2006

Transaction ID: SA197322-001

Amount of Each Receipt this Period: 250.00

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Earmarked: conduit info below

B.
Full Name (Last, First, Middle Initial)
Above earmarked through Emily's List

Mailing Address 1120 Connecticut Avenue NW
Suite 1100

City: Washington State: DC Zip Code: 20036

FEC ID number of contributing federal political committee. C

Name of Employer:
Occupation:

Receipt For: 2008
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date: 297387.50

Date of Receipt: 02 / 02 / 2006

Transaction ID: SAConduit197322-001

Amount of Each Receipt this Period: 297387.50

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
total from conduit

C.
Full Name (Last, First, Middle Initial)
Dr. Robert Keohane

Mailing Address 179 Prospect Avenue

City: Princeton State: NJ Zip Code: 08540

FEC ID number of contributing federal political committee. C

Name of Employer: Duke University
Occupation: Professor

Receipt For: 2008
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 03 / 15 / 2006

Transaction ID: SA198480-001

Amount of Each Receipt this Period: 250.00

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Earmarked: conduit info below

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

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

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