

**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 114 OF 2536	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 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 Max Baucus**

**A.** Full Name (Last, First, Middle Initial)  
**Kathleen Drago**

Mailing Address 166 Brookstone Park

City Newnan	State GA	Zip Code 30265-2244
----------------	-------------	------------------------

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

Name of Employer Disabled	Occupation none
------------------------------	--------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10.00

Date of Receipt  

MM	DD	YYYY
03	30	2013

Transaction ID : **C19774441**

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
**Carolynne Drori**

Mailing Address 48 Beverly Park

City Beverly Hills	State CA	Zip Code 90210
-----------------------	-------------	-------------------

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

Name of Employer self	Occupation investor
--------------------------	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  

MM	DD	YYYY
03	19	2013

Transaction ID : **C19762889**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**Michael Dube**

Mailing Address 55 Tumbleweed Lane

City Great Falls	State MT	Zip Code 59404
---------------------	-------------	-------------------

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

Name of Employer self	Occupation Physician
--------------------------	-------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  

MM	DD	YYYY
03	08	2013

Transaction ID : **C19759751**

Amount of Each Receipt this Period  
250.00

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

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

760.00

13020180114