

SCHEDULE A (FEC Form 3P) **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 type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<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)
JOHN MCCAIN 2008, INC.

<p>A. Full Name (Last, First, Middle Initial) MRS. MAXINE G. KEMBLE</p> <p>Mailing Address P.O. BOX 62114</p> <p>City State Zip Code SAN ANGELO TX 76906-2114</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation RETIRE</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 7 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17.784457</p>
<p>B. Full Name (Last, First, Middle Initial) MR. JACK KEMP</p> <p>Mailing Address 15213 RHONDA AVENUE</p> <p>City State Zip Code BATON ROUGE LA 70816-1367</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation RETIRE</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 3 0 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 220.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17.861524</p>
<p>C. Full Name (Last, First, Middle Initial) MRS. SANDRA S. KEMP</p> <p>Mailing Address P.O. BOX 7710</p> <p>City State Zip Code TIFTON GA 31793-7710</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer Occupation HEALTH SYSTEMS MANAGEMENT INC. C.E.O.</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 8 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17.784491</p>

SUBTOTAL of Receipts This Page (optional)

1720.00

TOTAL This Period (last page this line number only)