

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

| | | |
|---|--|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 56 / 82 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17 | |

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)
MCCAIN LEADERSHIP FUND

| | | |
|---|--|---|
| A. | Full Name (Last, First, Middle Initial) MRS. MARGARET C. WHITMAN | Date of Receipt MM / DD / YYYY 06 / 23 / 2009 |
| | Mailing Address 24 EDGE ROAD | Transaction ID: SA11.2962623 |
| | City State Zip Code ATHERTON CA 94027-2226 | Amount of Each Receipt this Period 2400.00 |
| | FEC ID number of contributing federal political committee. C | CONTRIBUTION |
| | Name of Employer Occupation SELF-EMPLOYED CANDIDATE | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2400.00 | |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) MRS. MARGILEE B. WILLIAMS | Date of Receipt MM / DD / YYYY 05 / 28 / 2009 |
| | Mailing Address 5500 TAWNEY AVENUE | Transaction ID: SA11.2960109 |
| | City State Zip Code AMARILLO TX 79106-4808 | Amount of Each Receipt this Period 250.00 |
| | FEC ID number of contributing federal political committee. C | CONTRIBUTION |
| | Name of Employer Occupation HOMEMAKER HOMEMAKER | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 250.00 | |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) MS. VIRGINIA L. WILSON | Date of Receipt MM / DD / YYYY 05 / 20 / 2009 |
| | Mailing Address P.O. BOX 4381 | Transaction ID: SA11.2958747 |
| | City State Zip Code HOUSTON TX 77210-4381 | Amount of Each Receipt this Period 1000.00 |
| | FEC ID number of contributing federal political committee. C | CONTRIBUTION |
| | Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

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|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3650.00 |
| TOTAL This Period (last page this line number only) | |