

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 20  
(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)  
**COMMITTEE TO ELECT JEFF MILLER**

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. John F. Egolf</p> <p>Mailing Address 38 Mountain Lake Dr.</p> <p>City Hendersonville      State NC      Zip Code 28739</p> <p>FEC ID number of contributing federal political committee.      <b>C</b></p> <p>Name of Employer Egolf Motors      Occupation Owner/Executive</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 13 / 2010</span></p> <p><b>Transaction ID:</b> SA11AI.5076</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Ms Deanna Ellis</p> <p>Mailing Address 54 E. Memminger Ct.</p> <p>City Hendersonville      State NC      Zip Code 28739</p> <p>FEC ID number of contributing federal political committee.      <b>C</b></p> <p>Name of Employer David A. Ellis MD, PA      Occupation Business Manager</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">1150.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 13 / 2010</span></p> <p><b>Transaction ID:</b> SA11AI.5073</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">150.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Dr. Joe Farrar</p> <p>Mailing Address PO Box 6217</p> <p>City Hendersonville      State NC      Zip Code 28793</p> <p>FEC ID number of contributing federal political committee.      <b>C</b></p> <p>Name of Employer Dr. J.H. Farrar-Orthodontics      Occupation Orthodontist</p> <p>Receipt For: 2010  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">04 / 13 / 2010</span></p> <p><b>Transaction ID:</b> SA11AI.5079</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1150.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>