

**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 284 OF 516
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JOHN MCCAIN, INC.**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KRISTOPHER C. SPECTOR**

Mailing Address **6900 E. CAMELBACK RD, STE. 915**

City **SCOTTSDALE** State **AZ** Zip Code **85251-8059**

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

Name of Employer **SELF** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt  
 MM / DD / YYYY  
**11 / 03 / 2015**

Transaction ID : **SA11.3098307**

Amount of Each Receipt this Period  
**50.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. JAMES SPRAYREGEN**

Mailing Address **521 LONGWOOD**

City **GLENCOE** State **IL** Zip Code **60022-1736**

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

Name of Employer **KIRKLAND & ELLIS** Occupation **ATTORNEY**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 MM / DD / YYYY  
**11 / 10 / 2015**

Transaction ID : **SA11.3098411**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT E. SPRING**

Mailing Address **420 LEXINGTON AVENUE STE. 300  
GRACIE SQUARE CAPITAL**

City **NEW YORK** State **NY** Zip Code **10170-0399**

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

Name of Employer **GRACIE SQUARE CAPITAL FINANCE** Occupation **CONSULTANT**

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 MM / DD / YYYY  
**12 / 07 / 2015**

Transaction ID : **SA11.3099125**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**1550.00**

2016020200033616