

**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 102 OF 692
	<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	

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 Jack Kingston**

Full Name (Last, First, Middle Initial) <b>Mr. James Kaufman</b>		Date of Receipt MM / DD / YYYY 03 / 17 / 2014	
Mailing Address 3305 Mathieson Dr		Transaction ID : AF5D8717A09314EF7B5F	
City Atlanta	State GA	Zip Code 30305-1722	Amount of Each Receipt this Period contribution 250.00
FEC ID number of contributing federal political committee.		<input type="checkbox"/> C	
Name of Employer Bank of America	Occupation Financial Advisor		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>Dr. Victor E. Corrigan MD</b>		Date of Receipt MM / DD / YYYY 03 / 25 / 2014	
Mailing Address 1199 Bellaire Dr		Transaction ID : A7CDEC0A60F624F4CAFF	
City Atlanta	State GA	Zip Code 30319-1105	Amount of Each Receipt this Period contribution 2600.00
FEC ID number of contributing federal political committee.		<input type="checkbox"/> C	
Name of Employer Piedmont Hospital	Occupation Physician		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>Mr. James S. Mathews</b>		Date of Receipt MM / DD / YYYY 02 / 24 / 2014	
Mailing Address PO Box 188		Transaction ID : A7E6BF28758ED4A0F975	
City Calhoun	State GA	Zip Code 30703-0188	Amount of Each Receipt this Period contribution 500.00
FEC ID number of contributing federal political committee.		<input type="checkbox"/> C	
Name of Employer Starr-Mathews Insurance Agency	Occupation Insurance		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.00
<b>TOTAL</b> This Period (last page this line number only).....	

1021254405