

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 92
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<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)  
Committee to Elect Henry Hank Johnson

Full Name (Last, First, Middle Initial) <b>A. Patrick J. Frohling</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 2 / 2 0 0 6	
Mailing Address 6165 Riverside Drive		<b>Transaction ID: C3692613</b>	
City State Zip Code Atlanta GA 30328	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Joshua Landing LLC Real Estate Developer	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. David Frolich</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 6	
Mailing Address PO Box 28590		<b>Transaction ID: C3702254</b>	
City State Zip Code Macon GA 31221	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Mercer University School of Medicine Physician	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. David Gaillard, CPA</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 6	
Mailing Address P O Box 370274		<b>Transaction ID: C3709056</b>	
City State Zip Code Decatur GA 30037	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation Self Accounting	Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3019.30		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)