

**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 133 OF 167
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
FRIENDS OF NEAL DUNN

Full Name (Last, First, Middle Initial) A. Andrew W Stein		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2015	
Mailing Address 3315 Harbour Place		Transaction ID : SA11AI.4201	
City Panama City	State FL	Zip Code 32405	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Summit Bank	Occupation Banker		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) B. William Bradford Stephens III		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2015	
Mailing Address 3789 Longfellow Road		Transaction ID : SA11AI.4996	
City Tallahassee	State FL	Zip Code 32311	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer TOC	Occupation Physician		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. David T Stewart		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2015	
Mailing Address 3730 Bobbin Brook Cir		Transaction ID : SA11AI.5056	
City Tallahassee	State FL	Zip Code 32312	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Pathology Associates	Occupation Physician		
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	2500.00