

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 39

(check only one)

<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)  
Brian Davis for Congress

**A.**

Full Name (Last, First, Middle Initial)  
Louis Potters

Mailing Address Dept of Radiation Oncology 270-05

City State Zip Code  
New Hyde Park NY 11040

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

Name of Employer  
New York Prostate Institute

Occupation  
Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 22 / 2007

Transaction ID: SA11AI.4325

Amount of Each Receipt this Period

250.00

Contribution

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
Bradley R Prestidge

Mailing Address 10924 Reyes Canyons

City State Zip Code  
Helotes TX 78023

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

Name of Employer  
Texas Cancer Clinic

Occupation  
Radiation Oncologist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2007

Transaction ID: SA11AI.4247

Amount of Each Receipt this Period

1000.00

Contribution

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
Adam Raben

Mailing Address 10 School Rd

City State Zip Code  
Wilmington DE 19803

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

Name of Employer  
Christiana Health Care

Occupation  
Physician

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 04 / 2007

Transaction ID: SA11AI.4309

Amount of Each Receipt this Period

500.00

Contribution

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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