

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 54 / 99</span> (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)  
Sandy Adams for Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Donna Y. Stephenson</p> <p>Mailing Address P. O. Box 43326</p> <p>City Atlanta State GA Zip Code 30336</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer n/a Occupation homemaker</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p><b>Transaction ID:</b> C-1948-00Z501</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: right;"> <tr><td>1491.00</td></tr> </table> </p> <p style="text-align: right;">1491.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	7	/	2	0	1	0	1491.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	7	/	2	0	1	0													
1491.00																						

<p><b>B.</b> Full Name (Last, First, Middle Initial) Paul J. Stich</p> <p>Mailing Address 6334 S. Atlantic Avenue</p> <p>City New Smyrna State FL Zip Code 32169</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer n/a Occupation retired</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p><b>Transaction ID:</b> C-1962-00WB01</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: right;"> <tr><td>100.00</td></tr> </table> </p> <p style="text-align: right;">100.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	2	/	2	0	1	0	100.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	2	/	2	0	1	0													
100.00																						

<p><b>C.</b> Full Name (Last, First, Middle Initial) Paul J. Stich</p> <p>Mailing Address 6334 S. Atlantic Avenue</p> <p>City New Smyrna State FL Zip Code 32169</p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer n/a Occupation retired</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼</p>	<p>Date of Receipt  <table border="1" style="width: 100%; text-align: center;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>0</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table> </p> <p><b>Transaction ID:</b> C-1963-00WB02</p> <p>Amount of Each Receipt this Period  <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table> </p> <p style="text-align: right;">250.00</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	8	/	2	0	1	0	250.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	0	8	/	2	0	1	0													
250.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1841.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	