

# **SCHEDULE 9-A** **Donation(s) Received**

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**A. Full Name of Donor**

Andrew Waters

Mailing Address of Donor  
3221 Cadenberry Ave

City	State	Zip
Dallas	TX	75225-4832

**Date of Receipt**

M	N	D	Y	Y	Y
0	9	1	6	2	0

**Amount**

100,000.00

(M E M O)

Transaction ID: 0915300431014  
(Partnership: Waters & Kraus)**B. Full Name of Donor**

John Collins

Mailing Address of Donor  
3150 Hickcomb Bridge Rd  
Suite 200

City	State	Zip
Norcross	GA	30071-1370

**Date of Receipt**

M	N	D	Y	Y	Y
0	9	1	6	2	0

**Amount**

25000.00

Transaction ID: 0916200444015

**C. Full Name of Donor**

Crymes Pittman

Mailing Address of Donor  
410 S President St

City	State	Zip
Jackson	MS	39201-5007

**Date of Receipt**

M	N	D	Y	Y	Y
0	9	2	4	2	0

**Amount**

25000.00

Transaction ID: 41012.016

**D. Full Name of Donor**

Alex MacDonnell

Mailing Address of Donor  
24 Coolidge Hill Rd

City	State	Zip
Cambridge	MA	02138-5527

**Date of Receipt**

M	N	D	Y	Y	Y
0	9	2	8	2	0

**Amount**

10000.00

Transaction ID: 41012.017

**E. Full Name of Donor**

Larry Morris

Mailing Address of Donor  
PO Box 1660

City	State	Zip
Alexander City	AL	35011-1680

**Date of Receipt**

M	N	D	Y	Y	Y
1	0	0	5	2	0

**Amount**

25000.00

Transaction ID: 41012.018

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

25000.00

**TOTAL** This Period (last page (this line number only)).....  
(carry total from last page to Line 9)