

| <b>SCHEDULE A</b>  |  | <b>ITEMIZED RECEIPTS</b>  |   | <b>12 / 59</b>                 |
|--|--|---|---|--------------------------------|
|  |  | Use separate schedule(s) for each category of the Detailed Summary Page |   | FOR LINE NUMBER<br><b>11A1</b> |
| 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. |  |   |   |                                |
| <b>NAME OF COMMITTEE (In Full)</b><br><b>Citigroup Inc. PAC - Federal/State</b>  |  |   |   |                                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>DAWKINS PETER M<br><br>80 West River Road<br><br>Rumson NJ 07760<br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                              | <b>Name of Employer</b><br>CITIGROUP INC.<br><br><b>Occupation</b><br>CHAIRMAN/CEO<br><br><b>Aggregate Year-to-Date</b> > \$ 1698.64             | <b>Date (month, day, year)</b><br>04/27/2001                            | <b>Amount of Each Receipt this Period</b><br>208.33 |                                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>DEVLIN EDWARD C<br><br>490 STAFFORD AVE<br><br>STATEN ISLAND NY 10312<br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                         | <b>Name of Employer</b><br>CITICORP<br><br><b>Occupation</b><br>SPECIALIST<br><br><b>Aggregate Year-to-Date</b> > \$ 415.00                      | <b>Date (month, day, year)</b><br>04/15/2001                            | <b>Amount of Each Receipt this Period</b><br>125.00 |                                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>DEVLIN EDWARD C<br><br>490 STAFFORD AVE<br><br>STATEN ISLAND NY 10312<br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                         | <b>Name of Employer</b><br>CITICORP<br><br><b>Occupation</b><br>SPECIALIST<br><br><b>Aggregate Year-to-Date</b> > \$ 540.00                      | <b>Date (month, day, year)</b><br>04/30/2001                            | <b>Amount of Each Receipt this Period</b><br>125.00 |                                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>DOWD JR KENNETH L<br><br>17 TOQUAM ROAD<br><br>NEW CANAAN CT 06840<br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                            | <b>Name of Employer</b><br>CITICORP<br><br><b>Occupation</b><br>DIRECTOR<br><br><b>Aggregate Year-to-Date</b> > \$ 1368.00                       | <b>Date (month, day, year)</b><br>04/30/2001                            | <b>Amount of Each Receipt this Period</b><br>350.00 |                                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>DOWLING STEVEN COLIN<br><br>519 Queen Street<br><br>Alexandria VA 22314<br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | <b>Name of Employer</b><br>CITIGROUP INC.<br><br><b>Occupation</b><br>FEDERAL RELATIONS COUNSEL<br><br><b>Aggregate Year-to-Date</b> > \$ 530.00 | <b>Date (month, day, year)</b><br>04/13/2001                            | <b>Amount of Each Receipt this Period</b><br>100.00 |                                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>DOWLING STEVEN COLIN<br><br>519 Queen Street<br><br>Alexandria VA 22314<br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                       | <b>Name of Employer</b><br>CITIGROUP INC.<br><br><b>Occupation</b><br>FEDERAL RELATIONS COUNSEL<br><br><b>Aggregate Year-to-Date</b> > \$ 630.00 | <b>Date (month, day, year)</b><br>04/27/2001                            | <b>Amount of Each Receipt this Period</b><br>100.00 |                                |
| <b>Full Name, Mailing Address, and ZIP Code</b><br>DUFFIN DENNIS<br><br>1916 DIAMOND CLUSTER<br><br>CARROLLTO TX 75010<br><br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) :                           | <b>Name of Employer</b><br>ASSOCIATES CORPORATION<br><br><b>Occupation</b><br>EXECUTIVE<br><br><b>Aggregate Year-to-Date</b> > \$ 218.95         | <b>Date (month, day, year)</b><br>04/14/2001                            | <b>Amount of Each Receipt this Period</b><br>32.29  |                                |
| <b>SUBTOTALS</b> of Receipts This Page (Optional) .....  |  |   |   |                                |
| <b>TOTALS</b> This Period (last page this line number only) .....  |  |   |   |                                |