SCHEDULE A ITEMIZED RECEIPTS

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

For Line Number 11a (i)

Contributions from Individuals

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 for such committee.

NAME OF COMMITTEE (In Full)
Lazio 2000

Full Name, Mailing Address & Zip Code	Name of Employer	Date(month day, year)	Amount of Each Receipt this period
Peter A Fasseas 1555 N. Astor, 28W Chicago, IL 60610	Metropolitan Bank Group Occupation Banker	06/30/99	1000.00
Receipt for: |X| Primary | |General | |Other (specify)	Aggregate Year To Date> $ 1000.00		
Full Name, Mailing Address & Zip Code	**Name of Employer**	**Date(month day, year)**	**Amount of Each Receipt this period**
Lawrence J Pierzchalski W355 S2825 Manor House Road Oconomowoc, WI 53066	MGIG Occupation Mortgage Insurance	06/30/99	1000.00
Receipt for: |X| Primary | |General | |Other (specify)	Aggregate Year To Date> $ 1000.00		
Full Name, Mailing Address & Zip Code	**Name of Employer**	**Date(month day, year)**	**Amount of Each Receipt this period**
Steven C Krane P.O. Box 275 Bedford, NY 10506 0276	Proskauer Rose LLP Occupation Attorney	06/30/99	500.00
Receipt for: |X| Primary | |General | |Other (specify)	Aggregate Year To Date> $ 500.00		
Full Name, Mailing Address & Zip Code	**Name of Employer**	**Date(month day, year)**	**Amount of Each Receipt this period**
Stuart M Cohen 1328 Lydia Court Mohegan Lake, NY 10547 1907	Proskauer Rose LLP Occupation Attorney	06/30/99	500.00
Receipt for: |X| Primary | |General | |Other (specify)	Aggregate Year To Date> $ 500.00		
Full Name, Mailing Address & Zip Code	**Name of Employer**	**Date(month day, year)**	**Amount of Each Receipt this period**
Alan P Parnes 19 Harvest Drive Scarsdale, NY 10583	Proskauer Rose LLP Occupation Attorney	06/30/99	500.00
Receipt for: |X| Primary | |General | |Other (specify)	Aggregate Year To Date> $ 500.00		
Full Name, Mailing Address & Zip Code	**Name of Employer**	**Date(month day, year)**	**Amount of Each Receipt this period**
Ira Akselrad 26 Newport Drive Princeton Junction, NJ 08550	Proskauer Rose LLP Occupation Attorney	06/30/99	500.00
Receipt for: |X| Primary | |General | |Other (specify)	Aggregate Year To Date> $ 500.00		

SUBTOTAL of Receipts This Page (optional)-----------> 4000.00

TOTAL This Period(last page this line number only)----> 668412.50