SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a

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NAME OF COMMITTEE (In Full)

Democratic State Central Committee of LA C00071365

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
TERRY REEVES P.O. BOX 333 WINNFIELD LA 71483	WINN PARISH DIST. ATTY.	10/27/97	
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,250.00		500.00
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
RAYMOND C. REGGIE 46 MARYLAND DR. NEW ORLEANS LA 70124	SELF CONSULTANT	10/27/97	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 1,000.00		1,000.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
MARY LOU WINTERS P.O. BOX 1860 HEARN ISLAND COLUMBIA LA 71418	DR. H.H. WINTERS OFFICE MANAGER	11/10/97	
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 2,000.00		1,000.00
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
H.H. WINTERS P.O. BOX 1860 HEARN ISLAND COLUMBIA LA 71418	SELF PHYSICIAN	11/10/97	
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 2,000.00		1,000.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
HAL P. KILSHAW 6673 PIKES LN. BATON ROUGE LA 70808	SAVANT INS. CO. CFO	11/10/97	
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500.00		250.00
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
GLEN D. SMITH 148 DEVON LAPLACE LA 70068	SELF BUSSINESSMAN	11/14/97	
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $ 500.00		250.00
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
JERRY M. FOWLER 9007 HIGHLAND RD. #38 BATON ROUGE LA 70810	STATE OF LA COMM. OF ELECTIONS	11/14/97	
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 481.60		481.60

SUBTOTAL of Receipts This Page (optional) 4,481.60

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

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