SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Paul Perry for Congress

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Daniel Anderson 1600 Creekside Dr., # 1400 Folsom CA 95630 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Occupation: Physician Aggregate Year-to-Date > $ 250.00	03/02/2000	250.00
Ms. Rita Heathcotte 1830 W. Franklin St. Evansville IN 47712 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Name of Employer: Self Occupation: Accountant Aggregate Year-to-Date > $ 100.00	03/02/2000	100.00
Ms. Kathleen Hollfield 8571 Old Blairsville Rd. Wadesville IN 47638 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Name of Employer: MSD of North Posey Occupation: Teacher Aggregate Year-to-Date > $ 50.00	03/02/2000	50.00
Dr. Thomas Johnson 2900 12th Ave., Ste. 140 Billings MN 59101 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Occupation: Physician Aggregate Year-to-Date > $ 250.00	03/02/2000	250.00
Mr. Stephen Melcher 320 E. Delaware St. Evansville IN 47711 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Name of Employer: Evansville City Council Occupation: Councilman Aggregate Year-to-Date > $ 750.00	03/02/2000	750.00
Dr. E. Michael Dkin 1234 Fairacres Rd. Rydal PA 19046 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Occupation: Physician Aggregate Year-to-Date > $ 250.00	03/02/2000	250.00
Dr. James Benjamin 6941 Placita Lagarto Tucson AZ 85718 Receipt For: [X] Primary [ ] General [ ] Other (specify) :	Name of Employer: University of Arizona Occupation: Physician Aggregate Year-to-Date > $ 100.00	03/03/2000	100.00

SUBTOTALS of Receipts This Page (Optional) .....

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