

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Matingly for Senate, Inc.

<p>A. Full Name, Mailing Address and Zip Code Mrs. Mary Dryton Osteen 12 Highgate West Augusta, GA 30909-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Special</p>	<p>Name of Employer Occupation Homemaker</p>	<p>Date (month, day, year) 09/27/2000</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Mr. H. M. Osteen 12 Highgate West Augusta, GA 30909-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Special</p>	<p>Name of Employer Occupation Retired</p>	<p>Date (month, day, year) 09/27/2000</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Ms. Susan DeCamp Conger 3029 Pine Needle Road Augusta, GA 30909-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Special</p>	<p>Name of Employer Self Employed Occupation Consultant</p>	<p>Date (month, day, year) 09/27/2000</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code Mr. Jave Barbee 2913 Lombard Court Augusta, GA 30909-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Special</p>	<p>Name of Employer HRE Nursing Services, Inc. Occupation Controller</p>	<p>Date (month, day, year) 09/27/2000</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Mr. Tom Lowe Post Office Box 52539 Atlanta, GA 30355-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Special</p>	<p>Name of Employer Fulton County Commission Occupation County Commissioner</p>	<p>Date (month, day, year) 09/28/2000</p> <p>Aggregate Year-to-Date -> 250.00</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and Zip Code Mr. William H. Gaik 19 Saratoga Place Atlanta, GA 30324-3137</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Special</p>	<p>Name of Employer Self Employed Occupation Management Consultant</p>	<p>Date (month, day, year) 09/28/2000</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Mr. Paul F. Thiele 1139 E. McCarthy Street Sandersville, GA 31082-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2000 Special</p>	<p>Name of Employer Thiele Kaolin Company Occupation Executive</p>	<p>Date (month, day, year) 09/28/2000</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Amount of Each Receipt this Period 1,000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>5,750.00</p>
<p>TOTAL This Period (last page this line number only)</p>	