

SCHEDULE A		ITEMIZED RECEIPTS		488 / 1063
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 17A
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.				
NAME OF COMMITTEE (In Full) BUSH FOR PRESIDENT, INC.				
Full Name, Mailing Address, and ZIP Code Mr. James A. Norris 12896 Beacon Cove Lane Fort Myers FL 33910 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Retired Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/19/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code Ms. Jean K. Norris 913 Oakdale Circle Millersville MD 21108 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Retired Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/06/2000	Amount of Each Receipt this Period 250.00	
Full Name, Mailing Address, and ZIP Code Mr. Lloyd Norris 5005 Saddle Ridge Trail San Angelo TX 76904 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Town & Country Food Services Occupation Vice President Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/19/2000	Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code Ms. Gale Norton 410 17th Street 22nd Floor Denver CO 80202 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Brownstein Hyatt & Farber Occupation Attorney Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 06/09/2000 <small>REATTRIBUTION OF REDESIGNATION REQUESTED (AUTOMATIC)</small>	Amount of Each Receipt this Period 1000.00	
Full Name, Mailing Address, and ZIP Code Mrs. Naoma P. Norton 17300 N 86th Avenue, #234 Peoria AZ 85302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Retired Aggregate Year-to-Date > \$ 525.00	Date (month, day, year) 06/08/2000	Amount of Each Receipt this Period 250.00	
Full Name, Mailing Address, and ZIP Code Mrs. Naoma P. Norton 17300 N 86th Avenue, #234 Peoria AZ 85382 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Retired Aggregate Year-to-Date > \$ 525.00	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period 200.00	
Full Name, Mailing Address, and ZIP Code Mr. William A. Norton PO Box 487 Center Harbor NH 03226 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Retired Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 06/07/2000	Amount of Each Receipt this Period 250.00	
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				