

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions From Individuals/Persons

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NAME OF COMMITTEE (In Full) (07/01/97 - 12/31/97)
 Condit for Congress - 1998 C00247544

<p>A. Full Name, Mailing Address and ZIP Code Dian Morelli 6401 Taylor Road Denair, CA 95316</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Morelli Ranch (Self)</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date \$ 1,120.00</p>	<p>Date (month, day, year) 08/25/97</p>	<p>Amount of Each Receipt this Period 70.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Dian Morelli 6401 Taylor Road Denair, CA 95316</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Morelli Ranch (Self)</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date \$ 1,120.00</p>	<p>Date (month, day, year) 10/21/97</p>	<p>Amount of Each Receipt this Period 430.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Dian Morelli 6401 Taylor Road Denair, CA 95316</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Morelli Ranch (Self)</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date \$ 1,120.00</p>	<p>Date (month, day, year) 10/21/97</p>	<p>Amount of Each Receipt this Period 120.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Terry L. Mundy 5718 Dale Rd. Modesto, CA 95356</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer English Oaks Conv/Rehab Hospital</p> <p>Occupation Nursing Home Administrator</p> <p>Aggregate Year-to-Date \$ 585.00</p>	<p>Date (month, day, year) 10/21/97</p>	<p>Amount of Each Receipt this Period 85.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Daniel G. Nelson 624 Monroe Avenue Los Banos, CA 93635</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer San Luis & Delta-Mendota Water Auth</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date \$ 285.00</p>	<p>Date (month, day, year) 10/21/97</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Denise Palagaard 2616 Piedmont Dr. Merced, CA 95340</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer California Home Care & Hospice, Inc</p> <p>Occupation R.N. President, Owner</p> <p>Aggregate Year-to-Date \$ 320.00</p>	<p>Date (month, day, year) 08/27/97</p>	<p>Amount of Each Receipt this Period 60.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Denise Palagaard 2616 Piedmont Dr. Merced, CA 95340</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer California Home Care & Hospice, Inc</p> <p>Occupation R.N. President, Owner</p> <p>Aggregate Year-to-Date \$ 320.00</p>	<p>Date (month, day, year) 08/27/97</p>	<p>Amount of Each Receipt this Period 10.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>1,025.00</p>
<p>TOTAL This Period (last page this line number only)</p>	