

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)**

Hillary Rodham Clinton for US Senate, Inc. C00346544

<b>A. Full Name, Mailing Address and ZIP Code</b> Ketan Shah 7204 Downing Court Clarksville, MD 21029  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Public Affairs International, Inc.	Date (month, day, year) 5/18/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Management Aggregate Year-to-Date > \$		\$2,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Ketan Shah 7204 Downing Court Clarksville, MD 21029  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Public Affairs International, Inc.	Date (month, day, year) 5/18/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Management Aggregate Year-to-Date > \$		\$2,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Nargah Shah Post Office Box 398 Allenwood, NJ 08720  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self	Date (month, day, year) 6/29/00	Amount of Each Receipt this Period \$500.00
	Occupation Doctor Aggregate Year-to-Date > \$		\$500.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Nayin Shah 11412 Rowan Drive Potomac, MD 20854  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period \$500.00
	Occupation Doctor Aggregate Year-to-Date > \$		\$500.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Parul Shah 7204 Downing Court Clarksville, MD 21029  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Maryland	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Academic Coordinator Aggregate Year-to-Date > \$		\$2,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Parul Shah 7204 Downing Court Clarksville, MD 21029  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Maryland	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Academic Coordinator Aggregate Year-to-Date > \$		\$2,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Satish Shah 401 Clarkstown Road Maya Landing, NJ 08330  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self	Date (month, day, year) 6/30/00	Amount of Each Receipt this Period \$500.00
	Occupation Doctor Aggregate Year-to-Date > \$		\$500.00

**SUBTOTAL** of Receipts This Page (optional) ..... \$5,500.00

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