

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
MAC COLLINS FOR CONGRESS

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kenneth S. Janke, Jr. 6644 Woodberry Court Columbus, GA 31904	AFLAC	9/30/2000	1000.00
	Occupation SR. VP	Aggregate Year-to-Date > \$	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Dr. Todd Jarrel 8901 Hilltop Court Columbus, GA 31904	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Physician	9/11/2000	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	750.00	
C. Full Name, Mailing Address and ZIP Code George Jeter 1028 First Avenue Columbus, GA 31901	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Consultant - Retired	9/30/2000 8/31/2000	500.00 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1500.00	
D. Full Name, Mailing Address and ZIP Code Paul A. Jones 9510 Bakers Bridge Road Douglasville, GA 30134	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Retired	8/25/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	500.00	
E. Full Name, Mailing Address and ZIP Code William B. Jones P.O. Box 933 Jackson, GA 30233	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Owner	8/25/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code Lewis Jordan 610 Wingspread Peachtree City, GA 30269	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Investor	8/31/2000 7/14/2000	500.00 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1000.00	
G. Full Name, Mailing Address and ZIP Code Peggy Jordan 610 Wingspread Peachtree City, GA 30269	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Homemaker	8/31/2000 7/14/2000	500.00 C 500.00 P
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	1000.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)