

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11 (8)

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NAME OF COMMITTEE (in Full)
THE 2000 REPUBLICAN HOUSE-SENATE DINNER COMMITTEE

A. Full Name, Mailing Address and ZIP Code Mr. G.W. James P.O. Box 1260 Ruston, LA 71273 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 2/11/00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Saginaw Chippewa Indian Tribe 7070 E. Broadway Mount Pleasant, MI 48858 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation N/A Aggregate Year-to-Date > \$ 20,000.00	Date (month, day, year) 2/11/00	Amount of Each Receipt this Period \$20,000.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$20,500.00