

SCHEDULE A-P

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed summary page	PAGE 8	OF (total pages) 235
	LINE NUMBER 17A	

NAME OF COMMITTEE (in Full) McCain 2000, Inc.			DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
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NAME, ADDRESS, CITY, STATE, ZIP CODE Baker, Mr. Alton W. 1407 Avon Circle Birmingham, AL 35213	NAME OF EMPLOYER Retired RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$250.00	02-23-99	\$250.00
NAME, ADDRESS, CITY, STATE, ZIP CODE Baker, Mr. George F. 767 Fifth Avenue Suite 2800 New York, NY 10153	NAME OF EMPLOYER Info Requested RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$1,000.00	03-30-99	\$1,000.00
NAME, ADDRESS, CITY, STATE, ZIP CODE Baker, Dr. Mary L. 1407 Avon Circle Birmingham, AL 35213	NAME OF EMPLOYER Birmingham Radiological Group RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$250.00	02-23-99	\$250.00
NAME, ADDRESS, CITY, STATE, ZIP CODE Baker, Mr. Paul L. 3740 E. 34th Street Tucson, AZ 85713	NAME OF EMPLOYER AZ Mail Order RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$1,000.00	03-16-99	\$1,000.00
NAME, ADDRESS, CITY, STATE, ZIP CODE Baker, Ms. Sarah J. 245 - E. 63rd Street, #1222 New York, NY 10021	NAME OF EMPLOYER Homemaker RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$1,000.00	03-30-99	\$1,000.00
NAME, ADDRESS, CITY, STATE, ZIP CODE Baker-Schenk, Mr. Philip 6720 Remsburg Road Sharpsburg, MD 21782	NAME OF EMPLOYER Dorsey & Whitney LLP RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$1,000.00	03-24-99	\$1,000.00
NAME, ADDRESS, CITY, STATE, ZIP CODE Bakewell, Mr. Grant M. 47425 Medina Dr. Palm Desert, CA 92260	NAME OF EMPLOYER Info Requested RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$400.00	02-19-99	\$150.00
NAME, ADDRESS, CITY, STATE, ZIP CODE Bakewell, Mr. Grant M. 47425 Medina Dr. Palm Desert, CA 92260	NAME OF EMPLOYER Retired RECEIPT FOR (specify other) <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	AGGREGATE YEAR-TO-DATE \$400.00	03-25-99	\$350.00
SUBTOTAL OF RECEIPTS THIS PAGE (optional)				\$4,900.00
TOTAL THIS PERIOD (last page this line number only)				

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