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|-------------------|--------------------------|---|--------------------------------|
| SCHEDULE A | ITEMIZED RECEIPTS | Use separate schedule(s) for each category of the Detailed Summary Page | 5 / 19 |
| | | | FOR LINE NUMBER 11A1 |

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NAME OF COMMITTEE (In Full)
Paul Magliocchetti Associates, Inc. Political Action Committee

| | | | |
|--|---|---------------------------------------|--|
| Full Name, Mailing Address, and ZIP Code John Lynch 16718 Osterbury Ct. Dumfries VA 22026 | Name of Employer Paul Magliocchetti Associates | Date (month, day, year) 08/09/1998 | Amount of Each Receipt this Period 416.65 |
| | Occupation Associate | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Aggregate Year-to-Date > \$ 2518.62 | | |
| Full Name, Mailing Address, and ZIP Code Mr. Steve Macey 10522 Providence Way Fairfax VA 22030 | Name of Employer Paul Magliocchetti Associates, Inc. | Date (month, day, year) 08/09/1999 | Amount of Each Receipt this Period 500.00 |
| | Occupation Associate | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Aggregate Year-to-Date > \$ 1000.00 | | |
| Full Name, Mailing Address, and ZIP Code Mrs Kell Short 2400 Glebe Road Apt # 506 Arlington VA 22206 | Name of Employer Paul Magliocchetti Associates | Date (month, day, year) 08/09/1998 | Amount of Each Receipt this Period 100.00 |
| | Occupation Legislative Assistant | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Aggregate Year-to-Date > \$ 200.00 | | |
| Full Name, Mailing Address, and ZIP Code Brian Thiel 12505 Lolly Post Lane Woodbridge VA 22192 | Name of Employer Paul Magliocchetti Associates, Inc. | Date (month, day, year) 08/09/1999 | Amount of Each Receipt this Period 500.00 |
| | Occupation Associate | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Aggregate Year-to-Date > \$ 2000.00 | | |
| Full Name, Mailing Address, and ZIP Code Mark Wladawski 409 Colin Lane NW Vienna VA 22180 | Name of Employer Paul Magliocchetti Associates, Inc. | Date (month, day, year) 08/09/1999 | Amount of Each Receipt this Period 500.00 |
| | Occupation Associate | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Aggregate Year-to-Date > \$ 4000.00 | | |
| Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5634 Robbins Nest Lane Burke VA 22015 | Name of Employer Paul Magliocchetti Associates | Date (month, day, year) 08/09/1999 | Amount of Each Receipt this Period 470.00 |
| | Occupation Associate | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Aggregate Year-to-Date > \$ 2870.00 | | |
| Full Name, Mailing Address, and ZIP Code Pat Hiu 3652 Knox Court Woodbridge VA 22193 | Name of Employer Paul Magliocchetti Associates, Inc. | Date (month, day, year) 08/12/1998 | Amount of Each Receipt this Period 300.00 |
| | Occupation Associate | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Aggregate Year-to-Date > \$ 2100.00 | | |

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)