

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	4
FOR LINE NUMBER		11a1

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NAME OF COMMITTEE (in full)
 The WISH List FEC ID No. C00258277

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Bakin 1163 Chain Bridge Road McLean, VA 22101		9/20/96	250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-To-Date \gg \$	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julie Eann Finley 3221 Woodland Drive, NW Washington, DC 20008		9/5/96	2,500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Community Volunteer		
	Aggregate Year-To-Date \gg \$	2,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Frenzel 631D Stoneham Lane McLean, VA 22101-2345		9/13/96	1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-To-Date \gg \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Isaac 7 Douglas Lane Larchmont, NY 10538	Information Requested	9/26/96	1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Aggregate Year-To-Date \gg \$	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Penelope Kilburn Shapiro 4800 Van Ness Street, NW Washington, DC 20016	The Washington Legal Foundation	9/13/96	1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-To-Date \gg \$	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jan Maros 3228 Woodley Road, NW Washington, DC 20008	Information Requested	9/26/96	250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Info Requested		
	Aggregate Year-To-Date \gg \$	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charlotte McCormick 1401 N. Oak Street Arlington, VA 2209	CM Research	9/13/96	300.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner		
	Aggregate Year-To-Date \gg \$	300.00	
SUBTOTAL of Receipts This Page (optional)			6,300.00
TOTAL This Period (last page this line number only)			