

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER  
16

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**NAME OF COMMITTEE (In Full)**  
**California State Pipe Trades Council Voluntary Federal Political Action Fund**

**Full Name, Mailing Address, and ZIP Code**

Adam Schiff  
Schiff for Congress  
1700 L Street  
Sacramento CA 95814

**Name of Employer**  
Refund of Contribution

**Date (month,  
day, year)**  
06/12/2000

**Amount of Each  
Receipt this Period**  
2500.00

**Occupation**

**Receipt For:**  Primary  General

Other (specify):

**Aggregate Year-to-Date** \$ 2500.00

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

2500.00