

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

CITIZENS FOR THE REPUBLIC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
K. KAE RAIRDIN 1016 S. WAYNE ST. ARLINGTON, VA. 22204		3-15-99	200-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
C. W. HAYES, M.D. 1084 CONSTITUTION DR. CHATTANOOGA, TN. 37405		3-15-99	250-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
FRANKLYN C. NOFFIGER 1401 EYE ST. STE 900 WASHINGTON, D.C. 20005		3-15-99	500-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
SAMUEL A. HARDAGE 12730 HIGH BLUFF DR. STE 250 SAN DIEGO, CA. 92130	WOODFIN SUITE HOTELS	3-15-99	1,000-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CHAIRMAN	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOHN HERRINGTON 160 ALDERWOOD RD. WALNUT CREEK, CA. 94598	SELF-EMPLOYED	3-15-99	1,000-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation BUSINESSMAN	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MICHELE LAXALT 4312 VICTORIA LANE ALEXANDRIA, VA. 22304		3-15-99	1,000-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EDWIN L. HARPER 1305 BALLANTRAE CT. MCLEAN, VA. 22101	AMERICAN SECURITY GROUP	3-30-99	200-00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MANAGER	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

4,150-00

TOTAL This Period (last page this line number only)