

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Democratic Leader's Victory Fund 2000

Full Name, Mailing Address and Zip Code Robert M. Diamond 4700 Brandywine St., N.W. Washington, DC 20016- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Whitten & Diamond Occupation Attorney Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 08/10/99	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Gordon Jack Dover 309 Rucker Pl. Alexandria, VA 22301- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Griffin, Johnson and Dover Occupation Lobbyist Aggregate Year-to-Date -> \$5000.00	Date (month, day, year) 08/10/99	Amount of Each Receipt this Period \$5000.00
Full Name, Mailing Address and Zip Code D. Chris Downey 2727 34th Place, NW Washington, DC 20007- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 08/11/99	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Beth E. Doretz 3005 45th Street, N.W. Washington, DC 20016- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Democratic National Committee Occupation Finance Chair Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 08/10/99	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Lawrence DuBuske 358 Elm St. Gardner, MA 01440- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Immunology Research Inst. Occupation Director Aggregate Year-to-Date -> \$5000.00	Date (month, day, year) 08/10/99	Amount of Each Receipt this Period \$5000.00
Full Name, Mailing Address and Zip Code Sandra Eckart 6315 Evermay Dr. Mc Lean, VA 22101 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 08/11/99	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code John D. Esselink 1500 Shore Club Dr., Apt. 1548 Saint Clair Shores, MI 48080- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Community Health Assoc. Inc. Occupation Principal Aggregate Year-to-Date -> \$2000.00	Date (month, day, year) 08/10/99	Amount of Each Receipt this Period \$2000.00

SUBTOTAL of Receipts This Page (optional) \$15500.00

TOTAL This Period (last page this line number only)