

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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NAME OF COMMITTEE (In Full) **John Kelly for Congress** **C00352732**

<p>A. Full Name, Mailing Address and ZIP Code Pueblo Of Isleta, O P O Box 1290 Isleta NM 87022</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer none</p> <p>Occupation Pueblo Of Isleta</p> <p>Aggregate Year-to-Date > \$2,000.00</p>	<p>Date (month, day, year) 7/14/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Pueblo Of Laguna, O PO Box 194 Laguna NM 87026</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer none</p> <p>Occupation Pueblo of Laguna</p> <p>Aggregate Year-to-Date > \$1,000.00</p>	<p>Date (month, day, year) 8/28/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Pueblo Of Pojoaque, O 6 W Gutierrez Sulta 1A Santa Fe NM 87501</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer none</p> <p>Occupation Pueblo of Pojoaque</p> <p>Aggregate Year-to-Date > \$1,000.00</p>	<p>Date (month, day, year) 9/26/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Pueblo of San Felipe, O PO Box 4338 Algodones NM 87001</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer none</p> <p>Occupation Pueblo of San Felipe</p> <p>Aggregate Year-to-Date > \$1,000.00</p>	<p>Date (month, day, year) 8/28/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Rangel, Charles P O Box 5577 New York NY 10027</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer U S Congress</p> <p>Occupation Congressman</p> <p>Aggregate Year-to-Date > \$2,000.00</p>	<p>Date (month, day, year) 7/6/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Rangel, Charles P O Box 5577 New York NY 10027</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer U S Congress</p> <p>Occupation Congressman</p> <p>Aggregate Year-to-Date > \$2,000.00</p>	<p>Date (month, day, year) 7/6/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Ranka, Prakash 625 Jemez St Hobbs NM 88240</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Name of Employer Columbian Med Regional Cnt</p> <p>Occupation physician</p> <p>Aggregate Year-to-Date > \$500.00</p>	<p>Date (month, day, year) 9/22/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$6,500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>