

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER
ALL

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NAME OF COMMITTEE (In Full)

Democratic Party of Oregon

C00188367

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC PARTY OF OREGON - NONFED 711 SW ALDER ST, #306 PORTLAND 97205			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	09/17/96	
	Aggregate Year-to-Date >	\$ 863,473.84	8,935.41
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC PARTY OF OREGON - NONFED 711 SW ALDER ST, #306 PORTLAND 97205			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	09/17/96	
	Aggregate Year-to-Date >	\$ 870,929.69	7,455.85
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S. Capitol St. SE WASHINGTON 20003	IN-KIND CONTRIBUTION		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SEE EXPENSE FOR SARAH EISINGER	09/17/96	
	Aggregate Year-to-Date >	\$ 372,388.45	121.45
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HUMAN RIGHTS CAMPAIGN 1101 14TH ST NW SUITE 200 WASHINGTON, DC 20005	IN-KIND		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SEE EXPENSE FOR JULIE CARR	09/17/96	
	Aggregate Year-to-Date >	\$ 689.96	689.96
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
REAVIS, KATHRYN 267 MAPACHE DR PORTOLA VALLEY CA 94028	NONE		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	09/18/96	
	Aggregate Year-to-Date >	\$ 5,000.00	5,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STROHM, DAVID 267 MAPACHE DR PORTOLA VALLEY CA 94028	SELF-EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VENTURE CAPITALIST	09/18/96	
	Aggregate Year-to-Date >	\$ 5,000.00	5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DEMOCRATIC NATIONAL COMMITTEE 430 S. Capitol St. SE WASHINGTON 20003			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	09/18/96	
	Aggregate Year-to-Date >	\$ 374,863.45	2,475.00

SUBTOTAL of Receipts This Page (optional)	29,677.67
TOTAL This Period (last page this line number only)	