

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions From Individuals (itemized)

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NAME OF COMMITTEE (in Full) Anthem Good Government PAC			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael E. McCarron 9117 Admirals Pointe Drive Indianapolis, IN 46236 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Administar Federal	1/1/99	\$21.15
	Occupation Medicare Oper. Officer	1/15/99	\$21.15
		1/29/99	\$21.15
	Aggregate Year-to-Date \$ 274.95	2/12/99	\$21.15
		2/26/99	\$21.15
		3/12/99	\$21.15
		3/26/99	\$21.15
		4/9/99	\$21.15
		4/23/99	\$21.15
		5/7/99	\$21.15
5/21/99		\$21.15	
6/4/99	\$21.15		
6/18/99	\$21.15		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard McDevitt 124 Georgetown Drive Columbus, OH 43214 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	The Anthem Companies, Inc.	1/1/99	\$20.00
	Occupation Medical Underwriter	1/15/99	\$20.00
		1/29/99	\$20.00
	Aggregate Year-to-Date \$ 260.00	2/12/99	\$20.00
		2/26/99	\$20.00
		3/12/99	\$20.00
		3/26/99	\$20.00
		4/9/99	\$20.00
		4/23/99	\$20.00
		5/7/99	\$20.00
5/21/99		\$20.00	
6/4/99	\$20.00		
6/18/99	\$20.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert McDonald 428 W 83rd Place Indianapolis, IN 46260 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Anthem Alliance Health Insuran	6/8/99	\$400.00
	Occupation Senior Medical Officer		
	Aggregate Year-to-Date \$ 400.00		

SUBTOTAL of Receipts This Page (optional)	\$ 934.95
TOTAL This Period (last page this line number only)	