

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the detailed summary page

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NAME OF COMMITTEE (In Full)
Republican Party of Florida-Federal Campaign Committee

<p>A. Full Name, Mailing Address and Zip Code Gloria Villasmil 1611 SW 32nd Avenue Miami, FL 33145-1829</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Lawyer</p> <p>Aggregate Year-to-Date -> 220.00</p>	<p>Date (month, day, year) 10/26/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Gloria Vining 902 W Cimmeron Dr Tampa, FL 33603-1728</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Hillsborough Co Schools Occupation Teacher</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 10/24/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and Zip Code Jacques Vinmont 21 Aspen Court Boynton Beach, FL 33436-6615</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer n/a Occupation Retired</p> <p>Aggregate Year-to-Date -> 1,800.00</p>	<p>Date (month, day, year) 10/30/2000</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>D. Full Name, Mailing Address and Zip Code Werner Vonrosenstiel 942 Monterey Point N.E. Saint Petersburg, FL 33704-</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Attorney</p> <p>Aggregate Year-to-Date -> 550.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Porrest Waddle 1761 Hickory Gate Drive, North Dunedin, FL 34698-2011</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer n/a Occupation Retired</p> <p>Aggregate Year-to-Date -> 350.00</p>	<p>Date (month, day, year) 11/13/2000</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>F. Full Name, Mailing Address and Zip Code Robert Waechter 6539 Peacock Road Sarasota, FL 34242-2548</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self Employed Occupation Business Owner</p> <p>Aggregate Year-to-Date -> 165.00</p>	<p>Date (month, day, year) 10/27/2000</p>	<p>Amount of Each Receipt this Period 110.00</p>
<p>G. Full Name, Mailing Address and Zip Code Robert Waechter 6539 Peacock Road Sarasota, FL 34242-2548</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self Employed Occupation Business Owner</p> <p>Aggregate Year-to-Date -> 275.00</p>	<p>Date (month, day, year) 11/03/2000</p>	<p>Amount of Each Receipt this Period 110.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1,420.00

TOTAL This Period (Last page this line number only)