

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)  
National Association of Mortgage Brokers Political Action Committee

<b>A. Full Name, Mailing Address and Zip Code</b> Clay For Congress 6023 WATERMAN UNIT 1W Saint Louis, MO 63112- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 500.00
	Occupation Information Requested	Aggregate Year-to-Date -> 500.00	
<b>B. Full Name, Mailing Address and Zip Code</b> Pete Hoekstra For Congress 1454 Cimarron Drive Holland, MI 49423- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested	Date (month, day, year) 07/12/2000	Amount of Each Receipt this Period 500.00
	Occupation Information Requested	Aggregate Year-to-Date -> 500.00	
<b>C. Full Name, Mailing Address and Zip Code</b> Pryce For Congress 1155 21st Street, NW Suite 300 Washington, DC 20036- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 500.00
	Occupation Information Requested	Aggregate Year-to-Date -> 500.00	
<b>D. Full Name, Mailing Address and Zip Code</b> Friends of John Boehner 111 C Street, SE Washington, DC 20003- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested	Date (month, day, year) 08/24/2000	Amount of Each Receipt this Period 500.00
	Occupation Information Requested	Aggregate Year-to-Date -> 500.00	
<b>E. Full Name, Mailing Address and Zip Code</b> Rick Lazio for Congress 4451 Brookfield Corporate Drive Suite 200 Chantilly, VA 20151-1652 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested	Date (month, day, year) 09/27/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Information Requested	Aggregate Year-to-Date -> 1,000.00	
<b>F. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation Information Requested	Aggregate Year-to-Date ->	
<b>G. Full Name, Mailing Address and Zip Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested	Date (month, day, year) / /	Amount of Each Receipt this Period
	Occupation Information Requested	Aggregate Year-to-Date ->	

SUBTOTAL of Receipts This Page (optional)	3,000.00
TOTAL This Period (last page this line number only)	3,000.00