

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	22 / 64 FOR LINE NUMBER 11A1
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**NAME OF COMMITTEE (In Full)**  
Brad Carson for Congress

Full Name, Mailing Address, and ZIP Code Mike Turpen  801 NW 38th St. Oklahoma City OK 73118 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Riggs, Alney, et al  Occupation Attorney  Aggregate Year-to-Date > \$ 750.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dawyne Vorfeldt  1510 Dorchester Dr. Oklahoma City OK 73120 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation Requested  Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Helen Vorfeldt  1510 Dorchester Dr. Oklahoma City OK 73120 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information requested  Occupation  Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dawn Webster  P.O. Box 500 Okarche OK 73762 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation Information requested  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Robert W. White  715 NW 36th St. Oklahoma City OK 73118 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation Retired  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Jim Wilcoxon  112 N. 6th Muskogee OK 74401 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wilcoxon & Wilcoxon  Occupation Attorney  Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dr. Larry Williams  526 Seminary Tahlequah OK 74464 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Northeastern State University  Occupation President  Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period 250.00

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....