

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	143 / 577
				FOR LINE NUMBER 17A	
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NAME OF COMMITTEE (In Full) Elizabeth Dole for President Exploratory Committee Inc					
Full Name, Mailing Address, and ZIP Code Mr. David B. Ford 1112 Beech Rd. Rosemont PA 19010		Name of Employer Goldman, Sachs & Co.		Date (month, day, year) 04/12/1999	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Investment Banker		Amount of Each Receipt this Period 1000.00	
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Mr. Fred Foreman 311 South Wacker Chicago IL 60606		Name of Employer Freeborn & Peters		Date (month, day, year) 05/20/1999	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Partner		Amount of Each Receipt this Period 1000.00	
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Mr. Nicholas C. Forsmann 767 5th Avenue New York NY 10153		Name of Employer Info Requested		Date (month, day, year) 05/14/1999	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Info Requested		Amount of Each Receipt this Period 2000.00 <small>REATTRIBUTION OR REDESIGNATION REQUESTED (AUTOMATIC)</small>	
		Aggregate Year-to-Date > \$ 2000.00			
Full Name, Mailing Address, and ZIP Code Mr. C.T. P. Foster 305 Kelso Court Cary NC 27511		Name of Employer		Date (month, day, year) 05/10/1999	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Retired		Amount of Each Receipt this Period 200.00	
		Aggregate Year-to-Date > \$ 400.00			
Full Name, Mailing Address, and ZIP Code Mr. C.T. P. Foster 305 Kelso Court Cary NC 27511		Name of Employer		Date (month, day, year) 06/30/1999	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Retired		Amount of Each Receipt this Period 200.00	
		Aggregate Year-to-Date > \$ 400.00			
Full Name, Mailing Address, and ZIP Code Mrs. Carey Fowler PO Box 580 Ponte Verde Beach FL 32004		Name of Employer Info Requested		Date (month, day, year) 06/22/1999	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Info Requested		Amount of Each Receipt this Period 1000.00 <small>REATTRIBUTION (AUTOMATIC FOR RA-RC)</small>	
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Mr. Dan Fowler PO Box 237 Old Orchard Beach ME 04064		Name of Employer Ocean Communities FCU		Date (month, day, year) 06/30/1999	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Finance		Amount of Each Receipt this Period 250.00	
		Aggregate Year-to-Date > \$ 250.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					