

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
FOR LINE NUMBER

Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
The 20th District Florida Federal PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neal Palmer Brooks P.O. Box 400160 Homestead, FL 33090	Self	11.20.97	2500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation farmer	Aggregate Year-to-Date > \$ 2500	
B. Full Name, Mailing Address and ZIP Code Steven C. Wheeling 5889 S.W. 85 th St. Miami, FL 33143	Brooks Tropicals	11.21.97	2500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 2500	Amount of Each Receipt this Period 2500
C. Full Name, Mailing Address and ZIP Code Dr. Robert Ross 300 East 75 th St. New York, NY 10021	Self	11.20.97	5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation University Administrator	Aggregate Year-to-Date > \$ 5000	Amount of Each Receipt this Period 5000
D. Full Name, Mailing Address and ZIP Code Daniel D. Cantor 8411 Lagos De Campo Blvd. Tamarac, FL 33321		11.21.97	5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 5000	Amount of Each Receipt this Period 5000
E. Full Name, Mailing Address and ZIP Code Charles R. Modica 454 S. Beach Rd. Hobe Sound, FL 33455	St. George's University	11.21.97	5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chancellor	Aggregate Year-to-Date > \$ 5000	Amount of Each Receipt this Period 5000
F. Full Name, Mailing Address and ZIP Code Lisa A. Modica 454 S. Beach Rd. Hobe Sound, FL 33455		11.21.97	5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Home maker	Aggregate Year-to-Date > \$ 5000	Amount of Each Receipt this Period 5000
G. Full Name, Mailing Address and ZIP Code Thea J. Lorber 1050 Seawane Dr. New York Harbor, NY 11537		11.21.97	5000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Home maker	Aggregate Year-to-Date > \$ 5000	Amount of Each Receipt this Period 5000

SUBTOTAL of Receipts This Page (optional) 30,000

TOTAL This Period (last page this line number only)