

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
FUND FOR A FREE MARKET AMERICA

A. Full Name, Mailing Address and ZIP Code David Rehr 3727 - 25th Street, North Arlington, VA 22207	Name of Employer National Beer Wholesalers Assoc.	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	
B. Full Name, Mailing Address and ZIP Code Michael Deaver 5318 Blackistone Road Bethesda, MD 20816	Name of Employer Edelman Public Relations Worldwide	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice Chairman	
C. Full Name, Mailing Address and ZIP Code Nicholas J. St. George 971 Georgia Avenue Winter Park, FL 32789	Name of Employer Retired	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1000
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	
D. Full Name, Mailing Address and ZIP Code Richard A. Viguerie 9625 Surveyor Court Manassas, VA 20110	Name of Employer American Target Advertising	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$1000
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	
E. Full Name, Mailing Address and ZIP Code Benjamin J. Hart 9103 Dara Lane Great Falls, VA 22066	Name of Employer American Target Advertising	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	
F. Full Name, Mailing Address and ZIP Code Mark Fitzgibbons P. O. Box 3165 Manassas, VA 20108	Name of Employer American Target Advertising	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$500
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	
G. Full Name, Mailing Address and ZIP Code Susan Alvarado 5814 Wyomissing Court Alexandria, VA 22303	Name of Employer Alvarado & Gerken	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	

SUBTOTAL of Receipts This Page (optional)	\$4000
TOTAL This Period (last page this line number only)	