

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>66 / 98</b>
			<b>FOR LINE NUMBER 11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**Linda Chapin for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Ronald Smith  107 Rimmon Road  North Haven CT 06473  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Yale University	Date (month, day, year) 08/06/2000	Amount of Each Receipt this Period 50.00 Move On
	Occupation Professor	Aggregate Year-to-Date > \$ 50.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Charles Sober  3628 Buckingham Loop Dr.  Valrico FL 33594  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Bank of America	Date (month, day, year) 07/12/2000	Amount of Each Receipt this Period 50.00
	Occupation Sr. Vice Pres/ Portfolio Mgr.	Aggregate Year-to-Date > \$ 50.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Sid Sooler  606 West 118th Street  New York NY 10027  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Retired	Date (month, day, year) 07/05/2000	Amount of Each Receipt this Period 50.00 Move On
	Occupation	Aggregate Year-to-Date > \$ 50.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. David Solomon  2103 Ridge Drive  Los Angeles CA 90049  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer The RAND Corp.	Date (month, day, year) 07/26/2000	Amount of Each Receipt this Period 25.00 Move On
	Occupation Physician-Researcher	Aggregate Year-to-Date > \$ 25.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Guy Spearman  516 Delanoy Ave.  Cocoa FL 32922  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 07/13/2000	Amount of Each Receipt this Period 1000.00
	Occupation Governmental Consultant	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Richard Spees  601 Pennsylvania Ave. NW Ste. 750 Washington DC 20004  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 06/07/2000	Amount of Each Receipt this Period 1000.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs. Sydney Spofford  1954 Michigan Avenue  Marysville MI 49040  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 07/21/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired	Aggregate Year-to-Date > \$ 200.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			