

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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9	79
FOR LINE NUMBER	
11a1	

Contributions from Individuals

Any 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)		Texas Democratic Party C00099267	
<b>A. Full name, Mailing Address and ZIP code</b> Cable, Lowell HC 01 Box 126 Sulphur Springs, TX 75482	Name of Employer	N/A	Date (month, day, year) 11/15/1999
	Occupation	Retired	
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	\$370.00
<b>B. Full name, Mailing Address and ZIP code</b> Cable, Lowell HC 01 Box 126 Sulphur Springs, TX 75482	Name of Employer	N/A	Date (month, day, year) 12/15/1999
	Occupation	Retired	
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	\$370.00
<b>C. Full name, Mailing Address and ZIP code</b> Chapman, Jim PO Box 233 Sulphur Springs, TX 75483	Name of Employer	Self	Date (month, day, year) 11/02/1999
	Occupation	Attorney/Government Relations	
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	\$500.00
<b>D. Full name, Mailing Address and ZIP code</b> Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Name of Employer	Self	Date (month, day, year) 07/28/1999
	Occupation	Attorney	
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	\$1,120.00
<b>E. Full name, Mailing Address and ZIP code</b> Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Name of Employer	Self	Date (month, day, year) 08/16/1999
	Occupation	Attorney	
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	\$1,120.00
<b>F. Full name, Mailing Address and ZIP code</b> Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Name of Employer	Self	Date (month, day, year) 08/23/1999
	Occupation	Attorney	
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	\$1,120.00
<b>G. Full name, Mailing Address and ZIP code</b> Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Name of Employer	Self	Date (month, day, year) 09/15/1999
	Occupation	Attorney	
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	\$1,120.00
<b>SUBTOTAL</b> of Receipts This page (Optional)			\$1,550.00
<b>TOTAL</b> This Period (last page this line number only)			