

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (In Full)
WALTER JONES COMMITTEE**

Full Name, Mailing Address, and ZIP Code Mr. K. H. Moehring PO Box 1177 Beaufort NC 28516	Name of Employer Atlantic Veneer Occupation President	Date (month, day, year) 03/30/2000	Amount of Each Receipt this Period 1000.00 General on Check
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Ms. Kurtis Dean Wagaman 100 Grady Court Morehead City NC 28557	Name of Employer Kurtis Chevrolet Occupation Auto Dealer	Date (month, day, year) 03/30/2000 Designated with a note sent with contribution	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Mr. Dennis Aber PO Box 844 Spring House PA 19477	Name of Employer Requested 3/31/2000 Occupation Government Relations	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Mr. Wright H. Andrews, Jr. 8008 Algrave Street McClean VA 22102	Name of Employer Butera & Andrews Occupation Attorney	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Mr. Doyle C. Bartlett 609 Oakday Place Alexandria VA 22302	Name of Employer Requested 3/31/2000 Occupation Government Relations	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Dr. Thomas Bell, Jr. 115 Tweed Drive Jacksonville NC 28540	Name of Employer Self Employed Occupation Dentist	Date (month, day, year) 03/31/2000	Amount of Each Receipt this Period 750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		
Full Name, Mailing Address, and ZIP Code Mr. James J. Butera 4901 Quebec Street, NW Washington DC 20018	Name of Employer Butera & Andrews Occupation Consultant	Date (month, day, year) 03/31/2000 Seeking Re-designation 3/31/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)

4500.00