

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	13 / 31
					FOR LINE NUMBER 11A9
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NAME OF COMMITTEE (In Full) Brad Carson for Congress					
Full Name, Mailing Address, and ZIP Code Paul Orblson 3885 S. Florence Tulsa OK 74105		Name of Employer Information requested Occupation		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1500.00			
Full Name, Mailing Address, and ZIP Code Peter M. Waller 1319 E. 35th St. Tulsa OK 74105		Name of Employer Waller & Associates Occupation Executive		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1250.00			
Full Name, Mailing Address, and ZIP Code Peter M. Waller 1319 E. 35th St. Tulsa OK 74105		Name of Employer Waller & Associates Occupation Executive		Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 2250.00			
Full Name, Mailing Address, and ZIP Code Laura W. Boyd 2601 Castewood Dr. Norman OK		Name of Employer Self-employed Occupation Consultant		Date (month, day, year) 08/26/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code John Henry Rule 1122 E. 20th St. Tulsa OK 74120		Name of Employer Information requested Occupation Attorney		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Elizabeth Baez 16 S. Peters, Ste. 210 Norman OK		Name of Employer Self-employed Occupation Attorney		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code June Edmondson 219 N. 14th Muskogee OK 74401		Name of Employer Occupation Retired		Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Runoff		Aggregate Year-to-Date > \$ 1000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					