

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (NY1098-11/23/98)

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FOR LINE NUMBER

11(a) (1)

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NAME OF COMMITTEE (In Full)

MATHEWS FOR CONGRESS C00259374

A. Full Name, Mailing Address and ZIP Code same as above	Name of Employer	Date(month, day, year) 10/27/98 10/27/98	Amount of Each Receipt this Period 1,000. 500.
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
B. Full Name, Mailing Address and ZIP Code Verghese George 1151 Dutch Broadway Valley Stream, NY 11580	Name of Employer	Date(month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ see below		
C. Full Name, Mailing Address and ZIP Code same as above	Name of Employer	Date(month, day, year) 10/27/98	Amount of Each Receipt this Period 1,000.
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ see below		
D. Full Name, Mailing Address and ZIP Code same as above	Name of Employer	Date(month, day, year) 10/27/98	Amount of Each Receipt this Period 500.
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
E. Full Name, Mailing Address and ZIP Code Abraham Joseph 11609 Blalock Forest St. Houston, TX 77024	Name of Employer UT/Baylor	Date(month, day, year) 10/30/98	Amount of Each Receipt this Period 101.
	Occupation Engineer/Physician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 202.00		
F. Full Name, Mailing Address and ZIP Code Augustine V. Joseph 5206 Davison Avenue, Suite A Orlando, FL 32810	Name of Employer Self-Employed	Date(month, day, year) 10/22/98	Amount of Each Receipt this Period 100.
	Occupation Medical Doctor		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 150.00		
G. Full Name, Mailing Address and ZIP Code Bridget Joseph 1615 Kirklee Road Charleston, WY 25314	Name of Employer	Date(month, day, year) 11/11/98	Amount of Each Receipt this Period 300.
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		

SUBTOTAL of Receipts This Page (optional)

4,501

TOTAL This Period (last page this line number only)