

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Zell Miller for Senate, Inc.

A. Full Name, Mailing Address and Zip Code Hilton Kort, MD 5505 Peachtree Dunwoody Road, Suite 400 Atlanta, GA 30342-1705 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Physician Aggregate Year-to-Date -> 250.00	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 250.00
B. Full Name, Mailing Address and Zip Code Jimmy Allgood P.O. Box 891 Dublin, GA 31040- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Allgood Services Occupation President Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and Zip Code Craig Harley 2900 Promenade II Atlanta, GA 30309- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Chitwood & Harley Occupation Attorney Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 10/18/2000 Partnership -> Chitwood & Harley	Amount of Each Receipt this Period 1,000.00 MEMO
D. Full Name, Mailing Address and Zip Code Chitwood & Harley 2900 Promenade II 1230 Peachtree Street Atlanta, GA 30309- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Partnership Attribution Listed Individually Occupation See separate listing for partnership Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$1,250.00
TOTAL This Period (last page this line number only)	\$190,950.00