

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
New Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code RUTH HAYHURST 6081 SUELLEN COURT GOLETA, CA 93117-1780	Name of Employer Requesting Information	Date (month, day, year) 06/02/99	Amount of Each Receipt This Period 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Requesting Information Aggregate Year-to-Date: \$ 300.00	
B. Full Name, Mailing Address and ZIP Code NICHOLAS HABRE 2525 E. 1ST STREET, #404 FORT MYERS, FL 33901-2432	Name of Employer None	Date (month, day, year) 06/04/99	Amount of Each Receipt This Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired Aggregate Year-to-Date: \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code DIXIE BAYER 35 HUNT MASTER COURT ORMOND BEACH, FL 32174-2442	Name of Employer None	Date (month, day, year) 06/07/99	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired Aggregate Year-to-Date: \$ 250.00	
D. Full Name, Mailing Address and ZIP Code MARGARET BLANKMEYER 130 BOSTON NECK RD NORTH KINGSTOWN, RI 02852-5788	Name of Employer None	Date (month, day, year) 06/07/99	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired Aggregate Year-to-Date: \$ 250.00	
E. Full Name, Mailing Address and ZIP Code MARY HOUCK 112 SUMACH STREET LOOKOUT MOUNTAIN, TN 37350-1132	Name of Employer None	Date (month, day, year) 06/07/99	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Homemaker Aggregate Year-to-Date: \$ 250.00	
F. Full Name, Mailing Address and ZIP Code RUTH MERILLAT 886 RICHLYN DRIVE ADRIAN, MI 49221-9298	Name of Employer None	Date (month, day, year) 06/07/99	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired Aggregate Year-to-Date: \$ 250.00	
G. Full Name, Mailing Address and ZIP Code FRANCES STAHL 2840 N OCEAN BLVD. APT. 607 FORT LAUDERDALE, FL 33308	Name of Employer None	Date (month, day, year) 06/07/99	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Retired Aggregate Year-to-Date: \$ 250.00	

SUBTOTAL of Receipts This Page (optional)

2,350.00

TOTAL This Period (last page this line number only)