

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

SBC Communications Inc. Employee Federal Political Action Committee (SBC EmpPAC)

<p>A. Full Name, Mailing Address and ZIP Code TALENT FOR U.S. CONGRESS 1031 EXECUTIVE PARKWAY, STE. 100 ST. LOUIS, MISSOURI 63141</p>	<p>Name of Employer JAMES M. TALENT U.S. HOUSE MO-2nd DIST.</p>	<p>Date (month, day, year) 1/13/98</p>	<p>Amount of Each Receipt this Period \$ 185.00 Returned Contribution</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1996</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date > \$</p>
<p>B. Full Name, Mailing Address and ZIP Code FRIENDS OF PHIL GRAMM P. O. BOX 565087 DALLAS, TEXAS 75356</p>	<p>Name of Employer PHIL GRAMM U.S. SENATE -TX</p>	<p>Date (month, day, year) 1/9/98</p>	<p>Amount of Each Receipt this Period \$ 173.00 Returned Contribution</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): 1996</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date > \$</p>
<p>C. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date > \$</p>
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date > \$</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date > \$</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date > \$</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p>		<p>Aggregate Year-to-Date > \$</p>

SUBTOTAL of Receipts This Page (optional)

\$ 358.00

TOTAL This Period (last page this line number only)

\$ 358.00