

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Hillary Rodham Clinton for US Senate, Inc. C00346544

A. Full Name, Mailing Address and ZIP Code Professor Lankford 10718 Scott Dr Fairfax, VA 22030-3023	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		9/29/00	\$250.00
Occupation Information Requested			
Aggregate Year-to-Date >		\$	\$250.00
B. Full Name, Mailing Address and ZIP Code Ruth Lapidus 23 Delevan Lane Harrison, NY 10528-1301	Name of Employer N/A	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		9/11/00	\$1,000.00
Occupation Homemaker			
Aggregate Year-to-Date >		\$	\$2,000.00
C. Full Name, Mailing Address and ZIP Code William Larkin 2967 Lake Ave. Rochester, NY 14612-5536	Name of Employer N/A	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		9/27/00	\$100.00
Occupation Retired			
Aggregate Year-to-Date >		\$	\$300.00
D. Full Name, Mailing Address and ZIP Code Jack Larsen 133 Hands Creek Road East Hampton, NY 11937-3808	Name of Employer Self	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		8/28/00	\$500.00
Occupation Designer/Consultant			
Aggregate Year-to-Date >		\$	\$800.00
E. Full Name, Mailing Address and ZIP Code Patricia Laskawy 551 Riversville Road Greenwich, CT 06831	Name of Employer N/A	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		9/12/00	\$1,000.00
Occupation None			
Aggregate Year-to-Date >		\$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code Patricia Laskawy 551 Riversville Road Greenwich, CT 06831	Name of Employer N/A	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		9/12/00	\$1,000.00
Occupation None			
Aggregate Year-to-Date >		\$	\$2,000.00
G. Full Name, Mailing Address and ZIP Code Philip Laskawy 551 Riversville Road Greenwich, CT 06831	Name of Employer Ernst and Young	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		9/12/00	\$1,000.00
Occupation CPA			
Aggregate Year-to-Date >		\$	\$2,000.00

SUBTOTAL of Receipts This Page (optional) _____

\$4,850.00

TOTAL This Period (last page this line number only) _____