

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 Lee Wasserman 260 S Main Ave Albany, NY 12208-2432 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Rockefeller Family Fund	Date (month, day, year) 9/27/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Foundation Exec. Aggregate Year-to-Date > \$		\$1,000.00
B. Full Name, Mailing Address and ZIP Code Len Wasserman 915 Broadway New York, NY 10010 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 9/11/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Information Requested Aggregate Year-to-Date > \$		\$1,000.00
C. Full Name, Mailing Address and ZIP Code Jean Anne Waterstradt 1335 Washington Boulevard Ogden, UT 84404-5744 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A	Date (month, day, year) 8/30/00	Amount of Each Receipt this Period \$50.00
	Occupation Retired Aggregate Year-to-Date > \$		\$225.00
D. Full Name, Mailing Address and ZIP Code Chertyn Watkins 8856 Woodland Drive Silver Spring, MD 20910 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Law Offices of Chertyn Freeman-Watkins	Date (month, day, year) 9/5/00	Amount of Each Receipt this Period \$275.00
	Occupation Attorney Aggregate Year-to-Date > \$		\$275.00
E. Full Name, Mailing Address and ZIP Code Helen Watkins 413 Evans Avenue Missoula, MT 59801-5827 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A	Date (month, day, year) 9/8/00	Amount of Each Receipt this Period \$20.00
	Occupation Retired Aggregate Year-to-Date > \$		\$205.00
F. Full Name, Mailing Address and ZIP Code Wesley P. Watson 5005 Randolph Road North Little Rock, AR 72116 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A	Date (month, day, year) 9/7/00	Amount of Each Receipt this Period \$200.00
	Occupation Retired Aggregate Year-to-Date > \$		\$500.00
G. Full Name, Mailing Address and ZIP Code Wesley P. Watson 5005 Randolph Road North Little Rock, AR 72116 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A	Date (month, day, year) 9/1/00	Amount of Each Receipt this Period \$200.00
	Occupation Retired Aggregate Year-to-Date > \$		\$500.00

SUBTOTAL of Receipts This Page (optional) \$2,745.00

TOTAL This Period (last page this line number only)