

**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 (i)

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**NAME OF COMMITTEE (in Full)**

PALLONE FOR CONGRESS (C00226928)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jordan Burt Boros Cicchetti Berenson Johnson 1025 Thos Jefferson St. NW Washington, DC 20007	Partnership - see "B" & "C" below	7-13-99	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lobbyists		
	Aggregate Year-to-Date > \$ 2,000.00		
B. Full Name, Mailing Address and ZIP Code (1) Wayne Johnson 1025 Thos. Jefferson St. NW Washington, DC 20007	Name of Employer Jordan Burt Boros Cicchetti Berenson Johnson	Date (month, day, year) 7-13-99	Amount of Each Receipt this Period 250.00 MEMO ENTRY
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner/Lobbyist		
	Aggregate Year-to-Date > \$ 1,250.00		
C. Full Name, Mailing Address and ZIP Code (2) Marilyn B. Thompson 1025 Thos. Jefferson St. NW Washington, DC 20007	Name of Employer Jordan Burt Boros Cicchetti Berenson Johnson	Date (month, day, year) 7-13-99	Amount of Each Receipt this Period 250.00 MEMO ENTRY
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner/Lobbyist		
	Aggregate Year-to-Date > \$ 750.00		
D. Full Name, Mailing Address and ZIP Code Edith Weiss 1 Center Circle Woodbridge, NJ 07095	Name of Employer N/A	Date (month, day, year) 7-13-99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Nandini Doshi 485 Mason Pl. PARAMUS, NJ 07652	Name of Employer Imex. Corp.	Date (month, day, year) 8-10-99	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chief Financial Off.		
	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code William Kravec 122 Ave. of Two Rivers Rumson, NJ 07760	Name of Employer Communications Cable Services	Date (month, day, year) 8-11-99	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Gen. Mgr.		
	Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$		

**SUBTOTAL** of Receipts This Page (optional) .....

2,500.00

**TOTAL** This Period (last page this line number only) .....