

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(200)

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NAME OF COMMITTEE (in Full)

CITIZENS FOR JUST

A. Full Name, Mailing Address and ZIP Code VIVIAN JONES-FERRING 20740 HENWOOD OLYMPIA FIELDS 60461 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer REQUESTED Occupation Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 2/3/98	Amount of Each Receipt This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code MYRA NASH JOHNSON 20924 CORINTH ROAD 60461-1837 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer REQUESTED Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 2/3/98	Amount of Each Receipt This Period 500.00
C. Full Name, Mailing Address and ZIP Code ROBERT J. MARTINEZ 4307 N. 15th St. 22207 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer REQUESTED Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 2/3/98	Amount of Each Receipt This Period 250.00
D. Full Name, Mailing Address and ZIP Code DORIS M. LOMAX 5555 S. EVERETT 60637 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer H.R.D.I. Occupation EXECUTIVE V. Pres. Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 2/10/98	Amount of Each Receipt This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code ELDON J. MASON 8940 S. EUCLID 60617-2925 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer REQUESTED Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 2/10/98	Amount of Each Receipt This Period 500.00
F. Full Name, Mailing Address and ZIP Code OLLIE M. KNIGHT 801 PLYMOUTH Ct. 60605 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer H.R.D.I. Occupation Assoc. Sr. V. Pres. Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 2/3/98	Amount of Each Receipt This Period 500.00
G. Full Name, Mailing Address and ZIP Code VALARIE J. WRIGHT 4453 S. ELMS 60653-3613 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer REQUESTED Occupation CPA Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 2/3/98	Amount of Each Receipt This Period 500.00

SUBTOTAL of Receipts This Page (optional)

4,250.00

TOTAL This Period (last page this line number only)