

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 11 OF 11  
FOR LINE NUMBER 11(a)(i)

**Contributions from Individuals**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full) **John Kelly for Congress** C00352732

A. Full Name, Mailing Address and ZIP Code Vigil, Orlando 2714 Fantozzi Rd SW Albuquerque NM 87105 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer none Occupation retired Aggregate Year-to-Date > \$500.00	Date (month, day, year) 2/4/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Washburn, Kevin 2500 Clarendon Blvd No 336 Arlington VA 22201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Natl Indian Gaming Council Occupation attorney Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 3/1/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Wellborn, Charles 3819 La Hacienda Dr NE Albuquerque NM 87110 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer self-employed Occupation attorney Aggregate Year-to-Date > \$500.00	Date (month, day, year) 2/20/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Word, Terry M. 6401 Caballero Pkwy Albuquerque NM 87107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer self-employed Occupation attorney Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 1/26/2000	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Yoder, Mary 1215 Los Arboles Ave NW Albuquerque NM 87107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer self-employed Occupation physician Aggregate Year-to-Date > \$500.00	Date (month, day, year) 2/6/2000	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$3,500.00
TOTAL This Period (last page this line number only)	\$47,660.00