

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 19

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NAME OF COMMITTEE (In Full)
Participation 2000

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dustin Hoffman 111 West 40th Street New York, New York 10018	Self	9-11-95	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Actor	Aggregate Year-to-Date > \$ 5000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lisa Hoffman 111 West 40th Street New York, New York 10018		9-11-95	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerry Hultin 4118 faith Court Alexandria, VA. 22311	JLR Associates	10-28-95 8-24-95	100.00 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Govt. Relations	Aggregate Year-to-Date > \$ 550.00	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Hurt 2001 Bryan Tower, Suite 700 Dallas, TX. 75201	Leonard, Hurt, Terry & Blinn	10-27-95	2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 2000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene LaVergne 39 Memorial Parkway Long Branch, NJ. 07740	Self	9-22-95	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 902.98	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Leqq P. O. Box 519 Kennebunk, ME. 04043	Retired	11-17-95	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
Tom Leonard 816 Congress, Suite 1280 Austin, TX. 78701	Leonard, Hurt, Terry & Blinn	8-30-95 10-28-95	1000.00 2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 4,000.00	

SUBTOTAL of Receipts This Page (optional)

16,550.00

TOTAL This Period (last page this line number only)