

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Georgia Republican Party

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| Full Name, Mailing Address and Zip Code G. Norman Bennett 7421 Hall Webb Rd Mableton, GA 31632-2907 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Consultant Aggregate Year-to-Date -> | Date (month, day, year) 04/17/98 \$220.00 | Amount of Each Receipt this Period \$220.00 |
| Full Name, Mailing Address and Zip Code G. Norman Bennett 7421 Hall Webb Rd Mableton, GA 31632-2907 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Consultant Aggregate Year-to-Date -> | Date (month, day, year) 04/20/98 \$150.00 | Amount of Each Receipt this Period \$150.00 |
| Full Name, Mailing Address and Zip Code Billie Boyd 455 W Belmont Dr Calhoun, GA 30701-3043 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer All Animal Care Occupation Veterinarian Aggregate Year-to-Date -> | Date (month, day, year) 04/20/98 \$260.00 | Amount of Each Receipt this Period \$260.00 |
| Full Name, Mailing Address and Zip Code Robert Hurt 4811 Butterworth Pl NW Washington, DC 20016-4356 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Hurt, Norton & Associates Occupation Consultant Aggregate Year-to-Date -> | Date (month, day, year) 04/30/98 \$250.00 | Amount of Each Receipt this Period \$250.00 |
| Full Name, Mailing Address and Zip Code Frank Norton 8108 W. Blvd. Dr. Alexandria, VA 22308- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Hurt, Norton & Associates Occupation Consultant Aggregate Year-to-Date -> | Date (month, day, year) 04/30/98 \$250.00 | Amount of Each Receipt this Period \$250.00 |
| Full Name, Mailing Address and Zip Code Robert Redding 405 Rucker Pl Alexandria, VA 22301-2523 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer The Redding Firm Occupation Best Effort Aggregate Year-to-Date -> | Date (month, day, year) 04/30/98 \$250.00 | Amount of Each Receipt this Period \$250.00 |
| Full Name, Mailing Address and Zip Code William Edington 7106 Marine Dr Alexandria, VA 22307-1905 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Edington, Pool & Associates Occupation Consultant Aggregate Year-to-Date -> | Date (month, day, year) 04/30/98 \$250.00 | Amount of Each Receipt this Period \$250.00 |

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| SUBTOTAL of Receipts This Page (optional) | \$1630.00 |
| TOTAL This Period (last page this line number only) | |