

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions from Individuals

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NAME OF COMMITTEE (In Full) Texas Democratic Party C00099287

A. Full name, Mailing Address and ZIP code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Veselka, Larry 3305 Robinhood St Houston, TX 77005	Self		\$1,000.00
<input type="checkbox"/> Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	02/07/2000	
		Aggregate Year-to-Date	\$1,000.00
B. Full name, Mailing Address and ZIP code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
McCormick, Donna B. 5703 Shoalwood Ave Austin, TX 78756			\$250.00
<input type="checkbox"/> Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	02/11/2000	
		Aggregate Year-to-Date	\$265.00
C. Full name, Mailing Address and ZIP code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
McCormick, Donna B. 5703 Shoalwood Ave Austin, TX 78756			\$15.00
<input type="checkbox"/> Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	03/21/2000	
		Aggregate Year-to-Date	\$265.00
D. Full name, Mailing Address and ZIP code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Self		\$10.00
<input type="checkbox"/> Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	01/15/2000	
		Aggregate Year-to-Date	\$1,030.00
E. Full name, Mailing Address and ZIP code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Self		\$10.00
<input type="checkbox"/> Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	02/15/2000	
		Aggregate Year-to-Date	\$1,030.00
F. Full name, Mailing Address and ZIP code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Self		\$10.00
<input type="checkbox"/> Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	03/15/2000	
		Aggregate Year-to-Date	\$1,030.00
G. Full name, Mailing Address and ZIP code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cogburn, Edmund L. 5002 Doliver Dr Houston, TX 77056	Self		\$1,000.00
<input type="checkbox"/> Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	03/29/2000	
		Aggregate Year-to-Date	\$1,030.00
SUBTOTAL of Receipts This page (Optional)			\$2,295.00
TOTAL This Period (last page this line number only)			