

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

MATHEWS FOR CONGRESS C00259374

A. Full Name, Mailing Address and ZIP Code Jasbir S. Walia 30 Willard Ln. Hillsborough, CA 94010	Name of Employer	Date(month, day, year) 09/09/98	Amount of Each Receipt this Period 700.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 700.00	
B. Full Name, Mailing Address and ZIP Code Airway Hotel 433 Ellis St. San Francisco, CA 94102	Name of Employer (Partnership)	Date(month, day, year) 09/22/98 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 250.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 250.00	
C. Full Name, Mailing Address and ZIP Code Ken Amir 220 N. Boyshore Blvd. San Mateo, CA 94401	Name of Employer	Date(month, day, year) 09/22/98	Amount of Each Receipt this Period 250.00 MEMO
	Occupation Self employed		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 250.00	
D. Full Name, Mailing Address and ZIP Code Comfort Inn 1370 Monument Blvd. Concord, CA 94520	Name of Employer (Partnership)	Date(month, day, year) 09/09/98 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 250.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mahesh Amir 1802 Nottingham Ln. Clearwater, FL 34624	Name of Employer	Date(month, day, year) 09/08/98	Amount of Each Receipt this Period 250.00 MEMO
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 250.00	
F. Full Name, Mailing Address and ZIP Code Comfort Inn Airport 1365 Marchison Dr. Millbrae, CA 94030	Name of Employer (Partnership)	Date(month, day, year) 09/09/98 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 250.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 250.00	
G. Full Name, Mailing Address and ZIP Code Arvind C. Desai 1365 Marchison Dr. Millbrae, CA 94030	Name of Employer Comfort Inn Airport	Date(month, day, year) 09/08/98	Amount of Each Receipt this Period 250.00 MEMO
	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 250.00	

SUBTOTAL of Receipts This Page (optional)	1,450.00
TOTAL This Period (last page this line number only)	