

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions From Individuals/Persons

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NAME OF COMMITTEE (in Full) Condit for Congress - 1998 (05/14/98 - 06/30/98) CDD247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Lopez 3508 Beachler Drive Modesto, CA 95356	Firehouse Travel/Gary's Field Insp. Occupation Owner	06/09/98	450.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 555.00		
B. Full Name, Mailing Address and ZIP Code Aldo Lovotti 496 Hopkins Road Sacramento, CA 95864	Name of Employer Information Requested - No Response Occupation Information Requested - No Response	06/15/98	1,000.00 contribution refunded 6/25/98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 2,000.00		
C. Full Name, Mailing Address and ZIP Code Aldo Lovotti 496 Hopkins Road Sacramento, CA 95864	Name of Employer Information Requested - No Response Occupation Information Requested - No Response	06/15/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code James C. MacMillan, M.D. 1524 McHenry Ave. Ste. 570 Modesto, CA 95350	Name of Employer Self Occupation Physician	06/09/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 500.00		
E. Full Name, Mailing Address and ZIP Code M.A. Maxwell 2595 En Bear Creek Merced, CA 95340	Name of Employer Self (Maxwell Enterprises) Occupation Owner	06/09/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Marshall Reisman 1555 East Lake Road Cazenovia, NY 13035	Name of Employer Andan, Inc. Occupation Businessman	05/18/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 2,000.00		
G. Full Name, Mailing Address and ZIP Code Marshall Reisman 1555 East Lake Road Cazenovia, NY 13035	Name of Employer Andan, Inc. Occupation Businessman	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 2,000.00		

SUBTOTAL of Receipts This Page (optional) 5,550.00

TOTAL This Period (last page this line number only)