

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	3 / 19
				FOR LINE NUMBER 11A1	
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
NAME OF COMMITTEE (In Full) Paul Magliocchetti Associates, Inc. Political Action Committee					
Full Name, Mailing Address, and ZIP Code Kaylene Green PO Box 419 Oakton VA 22124	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 01/13/1998	Amount of Each Receipt this Period 5000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate				
		Aggregate Year-to-Date > \$ 5000.00			
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Grovewood Way Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 01/13/1999	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate				
		Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Tom Veitri 6729 Huntsman Blvd. Springfield VA 22152	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 01/28/1998	Amount of Each Receipt this Period 4000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate				
		Aggregate Year-to-Date > \$ 4000.00			
Full Name, Mailing Address, and ZIP Code Mrs. Sandy Welch 5834 Robbins Nest Lane Burke VA 22015	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 02/01/1999	Amount of Each Receipt this Period 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate				
		Aggregate Year-to-Date > \$ 300.00			
Full Name, Mailing Address, and ZIP Code Greg Hansen 8815 Arlington Blvd. Fairfax VA 22031-2705	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 02/08/1999	Amount of Each Receipt this Period 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate				
		Aggregate Year-to-Date > \$ 400.00			
Full Name, Mailing Address, and ZIP Code Joseph S. Littleton, III 10220 Grovewood Way Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 02/12/1999	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate				
		Aggregate Year-to-Date > \$ 1000.00			
Full Name, Mailing Address, and ZIP Code Tom Veitri 6729 Huntsman Blvd. Springfield VA 22152	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 02/12/1998	Amount of Each Receipt this Period 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate				
		Aggregate Year-to-Date > \$ 5000.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					