

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
1121

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NAME OF COMMITTEE (in Full)

90030343703

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allan H. Coons 3480 Bardell Eugene, OR 97401	Coons & Cole	10/22/90	250
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M. Christie Helmer 111 SW 5th Portland, OR 97204	Miller Nash et al.	10/22/90	250
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurance Rockefeller c/o 350 Park Avenue New York, NY 10022	Self	10/22/90	500
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Philanthropist		
	Aggregate Year-to-Date > \$ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Salomon 45 Rockefeller Plaza New York, NY 10111	Info. req.	10/22/90	2000
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 2000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John P. Mascotte 180 Maiden Lane New York, NY 10038	The Continental Corp.	10/22/90	250
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman & CEO		
	Aggregate Year-to-Date > \$ 250		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Frawley Bagley 1539 - 29th St. NW Washington, DC 20007	Info. req.	10/22/90	1000
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James P. McAndrew RR #3 Box 60 Lenore Rd. Califon, NJ 07803	Matthew Outdoor Advertising Inc.	10/22/90	250
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President & CEO		
	Aggregate Year-to-Date > \$ 250		

SUBTOTAL of Receipts This Page (optional)

4500

TOTAL This Period (last page this line number only)