

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	10
FOR LINE NUMBER		
11 a 1		

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NAME OF COMMITTEE (In full)
Republican Majority Fund

A. Full Name, Mailing Address and Zip Code Paul Anderson 2 East Bend Lane Houston, TX 77007	Name of Employer Pan Energy Corp.	Date (Month day, Year) 08/27/97	Amount of Each Receipt this Period 1,000.00
	Occupation President	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
B. Full Name, Mailing Address and Zip Code Michael Boland 700 13th St., NW, #350 Washington, DC 20005	Name of Employer Boland & Madigan	Date (Month day, Year) 08/27/97	Amount of Each Receipt this Period 1,000.00
	Occupation Consultant	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
C. Full Name, Mailing Address and Zip Code Bill Brewster 15 D Street, SE Washington, DC 20003	Name of Employer Self-employed	Date (Month day, Year) 08/27/97	Amount of Each Receipt this Period 1,000.00
	Occupation Consultant	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
D. Full Name, Mailing Address and Zip Code Anne Canfield 823 Oronco Street Alexandria, VA 20003	Name of Employer McClure, Gerard & Neunschwand	Date (Month day, Year) 08/27/97	Amount of Each Receipt this Period 1,000.00
	Occupation Consultant	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
E. Full Name, Mailing Address and Zip Code Ronald Crawford 1106 Dunaway Drive McLean, VA 22101	Name of Employer F/P Research Associates	Date (Month day, Year) 08/27/97	Amount of Each Receipt this Period 1,000.00
	Occupation President	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
F. Full Name, Mailing Address and Zip Code Roderick DeArment 1201 Pennsylvania Ave., NW Washington, DC 20044	Name of Employer Covington & Burling	Date (Month day, Year) 08/27/97	Amount of Each Receipt this Period 1,000.00
	Occupation Partner	Aggregate Year-to-date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			
G. Full Name, Mailing Address and Zip Code Michael Diarco 325 7th St., NW, #1250 Washington, DC 20004	Name of Employer Kemper	Date (Month day, Year) 08/27/97	Amount of Each Receipt this Period 500.00
	Occupation V.P., Legislative Affairs	Aggregate Year-to-date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)			

SUB TOTAL of Receipts This Page (Optional).....> **6,500.00**

TOTAL this Period (Last page this line number only).....>