

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)
Democratic State Central Comm. of CA-Federal COO105668

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Robert M. Jaffe 4170 La Jolla Village Drive, Suite 1040 San Diego, CA 92122	Sorento Associates, Inc. Occupation Venture Capitalist	11/04/96	1000.00

Receipt for: Primary General
 Other (specify):
Aggregate Year-to-Date \$ 1000.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Lorrie Johnson 655 Levealing Boulevard, No. 222 San Leandro, CA 94579	Self Occupation writer	11/08/96	300.00

Receipt for: Primary General
 Other (specify):
Aggregate Year-to-Date \$ 750.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Lorrie Johnson 655 Levealing Boulevard, No. 222 San Leandro, CA 94579	Self Occupation writer	11/19/96	450.00

Receipt for: Primary General
 Other (specify):
Aggregate Year-to-Date \$ 750.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Parvinder K. Kang 905 23rd Street, #1 Sacramento, CA 95816	California Democratic Party Occupation Deputy Director	11/05/96	500.00

Receipt for: Primary General
 Other (specify):
Aggregate Year-to-Date \$ 500.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
Ira S. KANTER 257 Paseo Bernal Moraga, CA 94556	Pacific Imaging Consultants Occupation Physician	10/29/96	500.00

Receipt for: Primary General
 Other (specify):
Aggregate Year-to-Date \$ 500.00

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this period
George David Kieffer 11355 W. Olympic Boulevard Los Angeles, CA 90064	Manatt, Phelps, & Phillips Occupation Partner	10/28/96	250.00

Receipt for: Primary General
 Other (specify):
Aggregate Year-to-Date \$ 250.00

SUBTOTAL of Receipts This Page (optional)..... 3000.00

TOTAL This period (last page this line number only).....