

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s)
for each category of the
Detailed Summary Page
(1001.99 - 1074.99)

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FOR LINE NUMBER
11 (a) (i)

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NAME OF COMMITTEE (in Full)

Doug Use for Congress C00333294

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Suanne A. Strong 3600 19th Street Sacramento, CA 95818	N/A	10/02/98	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven James Tingus 909 Santa Paula Way Davis, CA 95616-5023	CA Foundation for Ind Living Center	10/06/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Public Policy Director	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bradley Towne 641 Fulton Avenue, #130 Sacramento, CA 95825	Law Offices of Bradley Towne	10/10/98	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney/Self Employed	Aggregate Year-to-Date > \$ 725.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward S. Towne 6360 Bolleau Wood Lane, No.1 Sacramento, CA 95822	Edward S. Towne Enterprises	10/10/98	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anthony Van Ruiten P.O. Box 332 Robbins, CA 95676	Self Employed	10/02/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Farmer	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G. Wallace 455 Capital Mall, Suite 701 Sacramento, CA 95814	Self Employed	10/07/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Financial Planner	Aggregate Year-to-Date > \$ 1,725.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M. Louise Walters 2163 Promontory Point Gold River, CA 95670	Mac Walters Co.	10/14/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Business Consultant	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)

3,350.00

TOTAL This Period (last page this line number only)