

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of Detailed Summary Page **3** OF **30**  
**FOR LINE NUMBER 11a1**

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**NAME OF COMMITTEE (in Full)**  
 California Victory 2000

**FEC ID No.** C00345876

A. Full Name, Mailing Address and ZIP Code RMS 1600 Terminal Tower 50 Public Square Cleveland, Ohio 44113 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PARTNERSHIP BREAKDOWN Occupation Aggregate Year-To-Date > \$	Date (month, day, year) 7/10/00 5,000.00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Brian Ratner 1600 Terminal Tower 50 Public Square Cleveland, Ohio 44113 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer RMS Occupation Partner Aggregate Year-To-Date > \$	Date (month, day, year) 7/10/00 1,000.00	Amount of Each Receipt this Period 1,000.00 MEMO
C. Full Name, Mailing Address and ZIP Code Effie Robinson 1999 Green Street, #102 San Francisco, CA 94123 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-To-Date > \$	Date (month, day, year) 7/10/00 750.00	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Arthur Rock 1 Maritime Plaza, Ste. 1220 San Francisco, CA 94112 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed Occupation Venture Capital Aggregate Year-To-Date > \$	Date (month, day, year) 7/10/00 2,500.00	Amount of Each Receipt this Period 2,500.00
E. Full Name, Mailing Address and ZIP Code Toby Rosenblatt 3409 Pacific Avenue San Francisco, CA 94118 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed Occupation Finance Consultant Aggregate Year-To-Date > \$	Date (month, day, year) 7/10/00 500.00	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Donald S. Tayer 10 East Terrace Tiburon, CA 94920 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed Occupation Attorney Aggregate Year-To-Date > \$	Date (month, day, year) 7/10/00 250.00	Amount of Each Receipt this Period 250.00
G. Full Name, Mailing Address and ZIP Code Mark Waxman 7188 Wooded Lake Drive San Jose, CA 95120 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer SK Consulting Occupation Marketing Aggregate Year-To-Date > \$	Date (month, day, year) 7/10/00 250.00	Amount of Each Receipt this Period 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional)	4,750.00
<b>TOTAL</b> This Period (last page this line number only)	