

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER **11a(1)**

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NAME OF COMMITTEE (In Full)

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code MR. Arthur Goldfield PO Box 672 Burlington, VA 05402	Name of Employer Queen City Steel Co. Occupation Manager	Date (month, day, year) 2/21/97	Amount of Each Receipt this Period \$ 900
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 900	
B. Full Name, Mailing Address and ZIP Code Mr. Robert H. Ederick 2441 So. E. Bahia Way Stuart, FL 34996-17	Name of Employer Providence & Worcester Occupation Attorney	Date (month, day, year) 2/7/97	Amount of Each Receipt this Period \$3000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 3000	
C. Full Name, Mailing Address and ZIP Code MR. Larry A. Mizel 3600 S. Yosemite ST. Denver, CO 80237	Name of Employer Self Occupation Real Estate Developer	Date (month, day, year) 2/7/97	Amount of Each Receipt this Period \$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 1000	
D. Full Name, Mailing Address and ZIP Code Mr. Bram Goldsmith 400 N. Roxbury Dr. Beverly Hills, CA 90210	Name of Employer City National Bank Occupation Banker	Date (month, day, year) 2/7/97	Amount of Each Receipt this Period \$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 1000	
E. Full Name, Mailing Address and ZIP Code Dr. J.S. Kaufman 1728 St. Johns Ct. Bloomfield Hills, MI 48302	Name of Employer Self Occupation Physician	Date (month, day, year) 2/7/97	Amount of Each Receipt this Period \$ 500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 500	
F. Full Name, Mailing Address and ZIP Code Mr. Lawrence M. Cohen PO Box 101 Greensboro, NC 27402	Name of Employer Carlyle & Co. Jewelers Co. Occupation Executive	Date (month, day, year) 2/11/97	Amount of Each Receipt this Period \$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 1000	
G. Full Name, Mailing Address and ZIP Code Dr. Halley Faust 5 Timrod Lane West Hartford, CT 06107	Name of Employer Aetna Life and Casualty Occupation Executive	Date (month, day, year) 2/21/97	Amount of Each Receipt this Period \$1500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date \$ 1500	

SUBTOTAL of Receipts This Page (optional)	\$8900
TOTAL This Period (last page this line number only)	