

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Wynn for Congress C00253377

| | | | |
|---|--|--|---|
| A. Full Name, Mailing Address and ZIP Code Richard B. Maltox PO Box 22982 Alexandria, VA 22304 | Name of Employer Information Requested | Date (month, day, year) 10/3/2000 | Amount of Each Receipt this Period \$250.00 |
| | Occupation Information Requested Aggregate Year-to-Date > \$ 250.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| B. Full Name, Mailing Address and ZIP Code Allan R. Morgan 10808 Cherry Blossom Court Hyattsville, MD 20783 | Name of Employer Information Requested | Date (month, day, year) 10/16/2000 | Amount of Each Receipt this Period \$300.00 |
| | Occupation Information Requested Aggregate Year-to-Date > \$ 300.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| C. Full Name, Mailing Address and ZIP Code Cynthia M. Wilkinson, ESQ. 252B-E South Arlington Mill Drive Arlington, VA 22208 | Name of Employer Information Requested | Date (month, day, year) 10/10/2000 | Amount of Each Receipt this Period \$1,000.00 |
| | Occupation Information Requested Aggregate Year-to-Date > \$ 1,000.00 | | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation Aggregate Year-to-Date > \$ | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation Aggregate Year-to-Date > \$ | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation Aggregate Year-to-Date > \$ | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation Aggregate Year-to-Date > \$ | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |

SUBTOTAL of Receipts This Page (optional) \$1,550.00

TOTAL This Period (last page file line number only) \$1,550.00