

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	333 / 1485
					FOR LINE NUMBER 17A
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.					
<b>NAME OF COMMITTEE (In Full)</b> <b>GORE 2000, Inc.</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Michael M. Doyle 166 Theyan Dr.  Portsmouth RI 02871		<b>Name of Employer</b> RDW Group, Inc.		<b>Date (month, day, year)</b> 03/15/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> President		<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Stephen Doyle 25 Perry St.  New York NY 10014		<b>Name of Employer</b> Doyle Partners		<b>Date (month, day, year)</b> 03/29/1999	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Designer		<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Beth E. Dozoretz 3005 45th St., NW  Washington DC 20016		<b>Name of Employer</b> Democratic National Committee		<b>Date (month, day, year)</b> 01/27/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Finance Chair		<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Dr. Ronald Dozoretz 3005 45th St., NW  Washington DC 20016		<b>Name of Employer</b> First Hospital Corp.		<b>Date (month, day, year)</b> 02/08/1999	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Owner/CEO		<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Renee Dozoretz Stralitz 1320 Chewink Ct.  Virginia Beach VA 23461		<b>Name of Employer</b> Jewish Family Service		<b>Date (month, day, year)</b> 01/27/1999	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Social Worker		<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Nachshon Draiman 7520 N. Skokie Blvd.  Skokie IL 60077		<b>Name of Employer</b> Future Association		<b>Date (month, day, year)</b> 02/02/1999	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Info Requested		<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. David A. Drake 325 Rock Ridge Pl.  Escondido CA 92027		<b>Name of Employer</b> Self employed		<b>Date (month, day, year)</b> 03/05/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Occupation</b> Consultant		<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					