

SCHEDULE A		ITEMIZED RECEIPTS		1551 / 2816
Use separate schedule(s) for each category of the Detailed Summary Page				FOR LINE NUMBER 17A
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NAME OF COMMITTEE (In Full) McCain 2000, Inc				
Full Name, Mailing Address, and ZIP Code Mrs. Sheila C. Morgan 2730 Woolsey Lane Wayzata MN 55391	Name of Employer 	Date (month, day, year) 12/22/1998	Amount of Each Receipt this Period 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Mr. Thomas I. Morgan 1580 Insurance Lane Charlottesville VA 22911	Name of Employer Value America	Date (month, day, year) 11/12/1999	Amount of Each Receipt this Period 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation CEO	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code CDR William A. Morgan 1085 Ridge Heights Drive Fallbrook CA 92028	Name of Employer 	Date (month, day, year) 11/12/1998	Amount of Each Receipt this Period 200.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 595.00		
Full Name, Mailing Address, and ZIP Code Mr. James R. Morgenson 1017 Lexington Dr. Modesto CA 95350	Name of Employer 	Date (month, day, year) 10/29/1999	Amount of Each Receipt this Period 50.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 275.00		
Full Name, Mailing Address, and ZIP Code Mr. James R. Morgenson 1017 Lexington Dr. Modesto CA 95350	Name of Employer 	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period 75.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 275.00		
Full Name, Mailing Address, and ZIP Code Mr. James R. Morgenson 1017 Lexington Dr. Modesto CA 95350	Name of Employer 	Date (month, day, year) 12/26/1999	Amount of Each Receipt this Period 25.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 275.00		
Full Name, Mailing Address, and ZIP Code Mr. Robert B. Morin PO Box 977 Somis CA 93066	Name of Employer 	Date (month, day, year) 11/30/1998	Amount of Each Receipt this Period 1000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 1000.00		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				