

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Barr-Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Katherine Noonan 2056 Alameda Way San Jose, CA 95126-	None	02/15/99	\$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Homemaker	Aggregate Year-to-Date ->	\$50.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Katherine Noonan 2056 Alameda Way San Jose, CA 95126-	None	03/04/99	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Homemaker	Aggregate Year-to-Date ->	\$150.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Katherine Noonan 2056 Alameda Way San Jose, CA 95126-	None	06/07/99	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Homemaker	Aggregate Year-to-Date ->	\$250.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Numan 1035 McConnell Drive Decatur, GA 30033	Self	02/13/99	\$350.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Bookstore Owner	Aggregate Year-to-Date ->	\$350.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julianne P. Munnally 110 Vining Drive, SE Rome, GA 30162-	Roche	02/17/99	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Pharmaceutical Sales	Aggregate Year-to-Date ->	\$1000.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nellie O'Connor 522 W. Cameron No. 11 Dayton, WA 99328-	None	04/19/99	\$20.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	Aggregate Year-to-Date ->	\$20.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nellie O'Connor 522 W. Cameron No. 11 Dayton, WA 99328-	None	06/28/99	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	Aggregate Year-to-Date ->	\$120.00

SUBTOTAL of Receipts This Page (optional)

\$1720.00

TOTAL This Period (last page this line number only)