

SCHEDULE A

ITEMIZED RECEIPTS

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

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

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Hillary Rodham Clinton for US Senate, Inc. C00346544

A. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total \$26,218.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/31/00	Amount of Each Receipt this Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Nicole Seligman 2500 Massachusetts Avenue, NW Number 8 Washington, DC 20008	Name of Employer Williams & Connolly Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Russ Selinger 370 Upper Terrace Number 9 San Francisco, CA 94117	Name of Employer Excelerate Group Occupation CEO Aggregate Year-to-Date > \$	Date (month, day, year) 10/20/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Dennis Belkow 166 Moss Hill Road Jamaica Plain, MA 02130-3008	Name of Employer Brigham & Womens Hosp Occupation Physician/Urban Planner Aggregate Year-to-Date > \$	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Mae Sellers 4405 Downs Lane Houston, TX 77093-5903	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 11/6/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Roger Sellers 605 74th Street Kenosha, WI 53143-5547	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 11/7/00	Amount of Each Receipt this Period \$90.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Roger Sellers 605 74th Street Kenosha, WI 53143-5547	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/30/00	Amount of Each Receipt this Period \$30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$1,820.00

TOTAL This Period (last page this line number only)