

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in full)
Empire Majority Leadership Fund

A. Full Name, Mailing Address and Zip Code W. Bruce Law 2816 Ocean Mist Court Virginia Beach, VA 23454	Name of Employer self-employed	Date (Month day, Year) 05/14/97	Amount of Each Receipt this Period 2,500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 2,500.00		
B. Full Name, Mailing Address and Zip Code Richard S. Kessler 4008 Ancient Oak Court Annandale, VA 22003	Name of Employer self-employed	Date (Month day, Year) 05/14/97	Amount of Each Receipt this Period 750.00
	Occupation Lobbyist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 750.00		
C. Full Name, Mailing Address and Zip Code Larry Edmund Smith 6924 Seven Locks Road Cabin John, MD 20818	Name of Employer Johnson, Smith, Dover, Kitzmiller & Stewart	Date (Month day, Year) 05/29/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
D. Full Name, Mailing Address and Zip Code G. Jack Dover 309 Rucker Place Alexandria, VA 22301	Name of Employer Johnson, Smith, Dover, Kitzmiller & Stewart	Date (Month day, Year) 05/29/97	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 500.00		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	4,250.00
TOTAL this Period (Last page this line number only).....>	4,250.00