

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11a1

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**NAME OF COMMITTEE (in Full)**

E. Shirley Baca for Congress

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carpenter, Patricia A. 4401 Altura, NE Albuquerque, NM 87110	Self	10/14/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 750.00	
Chavez, Genevieve D. 700 Watson Lane Las Cruces, NM 88005	Self	7/15/97 10/5/97	50.00 150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date > \$ 250.00	
Cope, Johnny D. 412 E. Arriba Hobbs, NM 88240	Self	12/12/97	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Oil Business	Aggregate Year-to-Date > \$ 1,000.00	
Doroshov, Helen L. 826 Camino De Monte Rey, No. A2 Santa Fe, NM 87501	na	11/20/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 250.00	
Dubbin, Stella B. 4115 Senna Dr. Las Cruces, NM 88011	n/a	8/4/97 11/8/97	100.00 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 200.00	
Duhigg, David 1750 Shadywise Dr., SW Albuquerque, NM 87105	Self	12/18/97	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
Durkovich, Karen 1737 Lafayette Dr., NE Albuquerque, NM 87106	Self	10/3/97	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

2,800.00

**TOTAL** This Period (last page this line number only) .....