

SCHEDULE A		ITEMIZED RECEIPTS		1203 / 1806
			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) GORE 2000, Inc.				
Full Name, Mailing Address, and ZIP Code Ms. Ann D. Swanson 8021 Lake Washington Blvd., NE Clyde Hill PA 98004 [MEMO ITEM]	Name of Employer Info Requested	Date (month, day, year) 12/03/1998	Amount of Each Receipt this Period 250.00 Retribution	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Info Requested	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Jean A. Swanson 888 Riverside Dr. Los Altos CA 94024 [MEMO ITEM]	Name of Employer Self employed	Date (month, day, year) 03/31/1999	Amount of Each Receipt this Period 1000.00 Retribution Below	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Plant Biologist	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Mr. R. Brendan Leary 888 Riverside Dr. Los Altos CA 94024 [MEMO ITEM]	Name of Employer Info Requested	Date (month, day, year) 12/05/1998	Amount of Each Receipt this Period 500.00 Retribution	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Info Requested	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Richard P. Swanson 432 Red Birch Court Ridgewood NJ 07450 [MEMO ITEM]	Name of Employer Thelen Reid and Priest	Date (month, day, year) 03/15/1999	Amount of Each Receipt this Period 500.00 Retribution Below	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Ms. Caryn S. Swanson 432 Red Birch Ct. Ridgewood NJ 07450 [MEMO ITEM]	Name of Employer Info Requested	Date (month, day, year) 12/02/1998	Amount of Each Receipt this Period 250.00 Retribution	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Info Requested	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Ms. Darian W. Swig 377 Marina Blvd. San Francisco CA 94123 [MEMO ITEM]	Name of Employer Self employed	Date (month, day, year) 04/06/1999	Amount of Each Receipt this Period 500.00 Retribution Below	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Protocol Consultant	Aggregate Year-to-Date > \$ 750.00		
Full Name, Mailing Address, and ZIP Code Mr. Richard Swig, Jr. 377 Marina Blvd. San Francisco CA 94123 [MEMO ITEM]	Name of Employer Info Requested	Date (month, day, year) 11/30/1998	Amount of Each Receipt this Period 250.00 Retribution	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Info Requested	Aggregate Year-to-Date > \$ 250.00		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				