

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	19 / 62
			FOR LINE NUMBER 17A

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NAME OF COMMITTEE (In Full)
GORE 2000 General Election Legal and Accounting Compliance Fund

Full Name, Mailing Address, and ZIP Code Mr. Bruce Fuller 6 Bridge Rd. Kentfield CA 94904 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Info Requested Date (month, day, year) 06/06/2000 Amount of Each Receipt this Period 500.00	Aggregate Year-to-Date > \$ 500.00
	Occupation Info Requested	
	Name of Employer Not employed Date (month, day, year) 06/09/2000 Amount of Each Receipt this Period 1000.00	
Full Name, Mailing Address, and ZIP Code Ms. Eleanor R. Gerson 2425 N. Park Blvd., #2 Cleveland Heights OH 44106 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Not employed Date (month, day, year) 06/07/2000 Amount of Each Receipt this Period 500.00	Aggregate Year-to-Date > \$ 1000.00
	Occupation Retired	
	Name of Employer Not employed Date (month, day, year) 06/19/2000 Amount of Each Receipt this Period 2000.00 Reassignment/Redesignation Requested	
Full Name, Mailing Address, and ZIP Code Mr. Tim Gill 461 Race St. Denver CO 80206 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Info Requested Date (month, day, year) 06/21/2000 Amount of Each Receipt this Period 500.00	Aggregate Year-to-Date > \$ 500.00
	Occupation Info Requested	
	Name of Employer US DOT Date (month, day, year) 06/01/2000 Amount of Each Receipt this Period 300.00	
Full Name, Mailing Address, and ZIP Code Ms. Jud Gold 1911 NW Belmont Rd., #73 Washington DC 20009 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self employed Date (month, day, year) 06/21/2000 Amount of Each Receipt this Period 500.00	Aggregate Year-to-Date > \$ 300.00
	Occupation Special Assistant	
	Name of Employer Self employed Date (month, day, year) 06/21/2000 Amount of Each Receipt this Period 500.00	
Full Name, Mailing Address, and ZIP Code Dr. Ruth Goldston 148 Bouvant Dr. Princeton NJ 08540 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Info Requested Date (month, day, year) 06/21/2000 Amount of Each Receipt this Period 500.00	Aggregate Year-to-Date > \$ 500.00
	Occupation Info Requested	
	Occupation Psychologist	
SUBTOTALS of Receipts This Page (Optional)		
TOTALS This Period (last page this line number only)		