

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>6 / 42</b>
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**DEMOCRATIC PARTY OF NEW MEXICO**

<b>Full Name, Mailing Address, and ZIP Code</b> Law Office of Daymon B. Ely  1228 Central  Albuquerque NM 87102  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sole propri.	Date (month, day, year) 06/08/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Suzanne M. Barker Kalangis  1714 San Cristobal SW  Albuquerque NM 87104  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 06/12/2000	Amount of Each Receipt this Period 1000.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> John Arthur Smith  Box 898  Deming NM 88031  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer State of New Mexico	Date (month, day, year) 06/12/2000	Amount of Each Receipt this Period 250.00
	Occupation NM State Senator		
	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> William E. Sneed  4148 Dietz Farm Cir. NW  Albuquerque NM 87107  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 06/14/2000	Amount of Each Receipt this Period 1000.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Gloria C. Bosson  1470 Miracemos Loop  Santa Fe, NM 87505  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer G.R. Enterprises	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period 50.00
	Occupation Owner		
	Aggregate Year-to-Date > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Glynnie Franchini  4901 Laurens Ct. NW  Albuquerque NM 87120  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Retired	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period 250.00
	Occupation		
	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Eric Scott Jeffries  3312 Calle de Daniel, NW  Albuquerque NM 87104  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 06/16/2000	Amount of Each Receipt this Period 75.00
	Occupation Attorney		
	Aggregate Year-to-Date > \$ 1130.00		
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			