

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER	
11 (a) (i)	

Contributions From Individuals/Persons

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NAME OF COMMITTEE (in Full)

(10/15/98 - 11/23/98)

Condit for Congress - 1998

C00247544

A. Full Name, Mailing Address and ZIP Code Patty Amador 30685 E. Lee Street Escalon, CA 95320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Ambeck Mortgage Associates	Date (month, day, year) 10/20/98	Amount of Each Receipt this Period 500.00
	Occupation Mortgage Banker		
	Aggregate Year-to-Date \$	500.00	
B. Full Name, Mailing Address and ZIP Code El Solyo Ranch 3819 Dairy Road Vernalis, CA 95385 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/20/98	Amount of Each Receipt this Period 250.00
	Occupation		
	Aggregate Year-to-Date \$	250.00	
C. Full Name, Mailing Address and ZIP Code Donn A. Fassero M.D. 600 Coffee Road Modesto, CA 95355 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gould Medical Foundation	Date (month, day, year) 10/20/98	Amount of Each Receipt this Period 60.00
	Occupation Orthopaedic Surgeon		
	Aggregate Year-to-Date \$	360.00	
D. Full Name, Mailing Address and ZIP Code James B. Ford 4417 Walsh Street Chevy Chase, MD 20815 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Atlantic Richfield Company	Date (month, day, year) 10/29/98	Amount of Each Receipt this Period 250.00
	Occupation Senior Director		
	Aggregate Year-to-Date \$	250.00	
E. Full Name, Mailing Address and ZIP Code Earmarked through: ARCO PAC/Atlantic Richfield Company 515 South Flower Street, #4087 Los Angeles, CA 90071 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/29/98	Amount of Each Receipt this Period 250.00 (memo)
	Occupation		
	Aggregate Year-to-Date \$	TOTAL FROM CONDUIT	
F. Full Name, Mailing Address and ZIP Code Edwin B. Hagemann, Jr. P.O. Box 238 - 2218 W. Stanislaus Westley, CA 95387 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self	Date (month, day, year) 10/20/98	Amount of Each Receipt this Period 60.00
	Occupation Farmer		
	Aggregate Year-to-Date \$	560.00	
G. Full Name, Mailing Address and ZIP Code Sharon A. Hoder 2529 Sahalee Dr., East Redmond, WA 98053 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested - No Response	Date (month, day, year) 10/20/98	Amount of Each Receipt this Period 20.00
	Occupation Information Requested - No Response		
	Aggregate Year-to-Date \$	320.00	

SUBTOTAL of Receipts This Page (optional)	1,140.00
TOTAL This Period (last page this line number only)	