

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
 Rehberg For Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Tutvedt 2335 West Valley Dr. Kalispell, MT 59901	Self Employed Occupation Farmer	08/18/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		600.00
B. Full Name, Mailing Address and Zip Code Richard Uihlein 1396 North Waukegan Rd. Lake Forest, IL 60045-	Name of Employer Uline Occupation Owner	Date (month, day, year) 09/12/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		500.00
C. Full Name, Mailing Address and Zip Code Mary Underriner 2605 Westfield Dr. Billings, MT 59106	Name of Employer Self Employed Occupation Homemaker	Date (month, day, year) 08/19/2000	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		300.00
D. Full Name, Mailing Address and Zip Code Ben Uselman 4615 Palisades Park Dr. Billings, MT 59106	Name of Employer Braco, Inc. Occupation Owner	Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,000.00
E. Full Name, Mailing Address and Zip Code Ben Uselman 4615 Palisades Park Dr. Billings, MT 59106	Name of Employer Braco, Inc. Occupation Owner	Date (month, day, year) 08/25/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		1,500.00
F. Full Name, Mailing Address and Zip Code Don VanKoten P.O. Box 6099 Great Falls, MT 59406-	Name of Employer Credit Associates Occupation President	Date (month, day, year) 07/11/2000	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		50.00
G. Full Name, Mailing Address and Zip Code Don VanKoten P.O. Box 6099 Great Falls, MT 59406-	Name of Employer Credit Associates Occupation President	Date (month, day, year) 09/22/2000	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		250.00

SUBTOTAL of Receipts This Page (optional)	2,850.00
TOTAL This Period (last page this line number only)	