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)(c)

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NAME OF COMMITTEE (In Full): STROUSE FOR THE HOUSE 2000

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
EDGAR T. IRONS PO BOX 88 SOLEBURY PA 18968 Receipt For: [ ] Primary [✓] General [ ] Other (specify):	RETIRED Occupation: Aggregate Year-to-Date $ 200 —	9/08/00	100.00
SANDY LOCHRIE 204 GREEN ST. DOYLESTOWN PA. 18901 Receipt For: [ ] Primary [✓] General [ ] Other (specify):	PLANNED PARENT-HOOD. B. C. Occupation: NURSE Aggregate Year-to-Date $ 200 —	9/08/00	50.00
DORANE R. STROUSE 3540 76TH ST SE CALEDONIA, MI 49316 Receipt For: [ ] Primary [✓] General [ ] Other (specify):	USEFUL FARM PRODUCE Occupation: OWNER Aggregate Year-to-Date $ 200.00	9/08/00	200.00
VICKIE L. WASSERBERGER 5355 LOWER MOUNTAIN RD. NEW HOPE PA 18938 Receipt For: [ ] Primary [✓] General [ ] Other (specify):	AMERICAN Occupation: STEWARDESS Aggregate Year-to-Date $ 200 —	9/08/00	100.00
RICHARD S. HOFFMAN 161 GOLF CLUB DRIVE LANGHORN, PA 19047 Receipt For: [ ] Primary [✓] General [ ] Other (specify):	Occupation: Aggregate Year-to-Date $ 100.00	9/07/00	100.00
RUSSELL GRANET 146 W. 75TH ST #2B NY NY 10023 Receipt For: [ ] Primary [✓] General [ ] Other (specify):	Name of Employer: Annenberg Foundation Occupation: PHILANTHROPIST Aggregate Year-to-Date $ 250.00	9/15/00	250.00
BERTRAM H. SCHAFFNER 220 CENTRAL PARK SO. NY, NY 10019 Receipt For: [ ] Primary [✓] General [ ] Other (specify):	Name of Employer: SELF Occupation: PSYCHIATRIST Aggregate Year-to-Date $ 25.00	9/15/00	25.00

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....