

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(9)(1)

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NAME OF COMMITTEE (in Full)

Bob Shrauger for Congress

| | | | |
|--|---|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code Robert R. Bird 16634 James St. Holland, MI 49424</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer XRI Testing</p> <p>Occupation Lab Technician</p> <p>Aggregate Year-to-Date > \$ 250.00</p> | <p>Date (month, day, year) 3/15/00</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Joann W. Bird 16634 James St. Holland, MI 49424</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Zaeland Public Schools</p> <p>Occupation teacher</p> <p>Aggregate Year-to-Date > \$ 250.00</p> | <p>Date (month, day, year) 3/15/00</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Milton J. Niéwsma 2421 Central Ave Holland, MI 49424</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Lonaco Hunt</p> <p>Occupation writer</p> <p>Aggregate Year-to-Date > \$ 250.00</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Jerry L. Hamelink 4209 Blair Hudsonville, MI 49426-9343</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer none</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p> | <p>Date (month, day, year) 3/10/00</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |

SUBTOTAL of Receipts This Page (optional)

\$1,750.00

TOTAL This Period (last page this line number only)

\$3,050.00