

**SCHEDULE A**

**ITEMIZED RECEIPTS**

**Contributions from Individuals/Persons Other Than Political Committees**

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

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FOR LINE NUMBER **11(a)(i)**

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NAME OF COMMITTEE (In Full)

**BERG SERVICE FOR CONGRESS**

**C00326934**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>MARY JANE STABA</b> 1823 N. SEDGWICK CHICAGO, IL 60614	<b>UNIVERSITY OF CHICAGO HOSPITAL</b>	<b>11/3/97</b>	<b>\$1000</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>PEDIATRICIAN</b>	Aggregate Year-to-Date: <b>&gt; \$2000</b> (From Primary) (\$1000 General)	
<b>VAN HARISSIS</b> 32 COLD SPRING RD. AVON, CT 06001-4051	<b>PHOENIX DUFF &amp; PHELPS</b>	<b>11/15/97</b>	<b>\$250</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>INVESTMENT MANAGER</b>	Aggregate Year-to-Date: <b>&gt; \$250</b>	
<b>JOHN R. NEWSOME</b> R.R. #1, BOX 58 A SHUMWAY, IL 62461	<b>SIM PRODUCTS</b>	<b>11/28/97</b>	<b>\$1000</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>OWNER / PRESIDENT</b>	Aggregate Year-to-Date: <b>&gt; \$1000</b>	
<b>DAVID F. YATES</b> 371 GRAY AVE. WEBSTER GROVES, MO 6319	<b>THOMPSON COBURN</b>	<b>12/6/97</b>	<b>\$250</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>LAWYER</b>	Aggregate Year-to-Date: <b>&gt; \$250</b>	
<b>ROBERT C. ANDOLINA</b> 625 25TH ST. SANTA MONICA, CA 90402	<b>DONALDSON, LUKIN &amp; JENRETTE</b>	<b>12/6/97</b>	<b>\$250</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>STOCK BROKER</b>	Aggregate Year-to-Date: <b>&gt; \$250</b>	
<b>JAMES F. MASON</b> RR. #6, BOX 36 DECATUR, IL 62521-8809	<b>WAGNER CASTINGS Co.</b>	<b>12/18/97</b>	<b>\$500</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>EXECUTIVE</b>	Aggregate Year-to-Date: <b>&gt; \$500</b>	
<b>JOSEPH SCHRODT, M.D.</b> 102 KENWOOD AVE., STE. 140 DECATUR, IL 62526-4360	<b>SELF EMPLOYED</b>	<b>12/18/97</b>	<b>\$250</b>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>PHYSICIAN / SURGEON</b>	Aggregate Year-to-Date: <b>&gt; \$250</b>	

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

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