

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 1121

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NAME OF COMMITTEE (In Full)

AMWAY POLITICAL ACTION COMMITTEE

JANUARY 31, 1998 YEAR END REPORT (CALENDAR 1997)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BESSY DeVos 7575 E. FULTON ADA, MI 49355	AMWAY CORPORATION 7575 E. FULTON ADA, MI 49355	12/28/97	* \$2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: POLICY BOARD ADVISOR	Aggregate Year-to-Date > \$2500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
CRADY VAN ANDEL 7575 E. FULTON ADA, MI 49355	AMWAY CORPORATION 7575 E. FULTON ADA, MI 49355	12/28/97	* \$2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: POLICY BOARD ADVISOR	Aggregate Year-to-Date > \$2500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HELEN DeVos 7575 E. FULTON ADA, MI 49355	AMWAY CORPORATION 7575 E. FULTON ADA, MI 49355	12/28/97	* \$2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: POLICY BOARD ADVISOR	Aggregate Year-to-Date > \$2500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
BETTY VAN ANDEL 7575 E. FULTON ADA, MI 49355	AMWAY CORPORATION 7575 E. FULTON ADA, MI 49355	12/28/97	* \$2500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: POLICY BOARD ADVISOR	Aggregate Year-to-Date > \$2500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

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

\* 10,000.00

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

\* 20,312.00