

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE OF
1 of 1
FOR LINE NUMBER
11 a

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NAME OF COMMITTEE (In Full)
Business-Industry Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. Heywood Fralin P.O. Box 20069 Roanoke, VA 24018 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Medical Facilities of America, Inc. Occupation: Chairman & CEO Aggregate Year-to-Date \$ 500.00	08/08/97	500.00
B. Full Name, Mailing Address and ZIP Code Charles D. Rumberger 8201 Greensboro Drive McLean, VA 22102 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Association Management Group Occupation: President Aggregate Year-to-Date \$ 250.00	08/08/97	250.00
C. Full Name, Mailing Address and ZIP Code Chris A. Robbins P.O. Box 903 St. Johnsonbury, VT 05819-0903 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	EHV - Weidmann Industries, Inc. Occupation: President & CEO Aggregate Year-to-Date \$ 500.00	08/13/97	500.00
D. Full Name, Mailing Address and ZIP Code Dean A. Yannucci 80 South Main Street Hanover, NH 03755 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	WICOR Americas, Inc. Occupation: President & CEO Aggregate Year-to-Date \$ 500.00	08/13/97	500.00
E. Full Name, Mailing Address and ZIP Code Frederick B. Dent 221 Montgomery Drive Spartanburg, SC 29302 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Mayfair Mills Occupation: Chairman Aggregate Year-to-Date \$ 250.00	08/30/97	250.00
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts this Page (optional) _____
 TOTAL This Period (last page this line number only) _____ 2,000.00

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