

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FORM LINE NUMBER 11a

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**NAME OF COMMITTEE (In Full)**

The Committee to Re-Elect Congresswoman Marge Roukema

A. Full Name, Mailing Address and ZIP Code Ansar Kasmir 1108 Harvard Place Fort Lee, NJ 07024 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer information requested Occupation Aggregate Year-to-Date > \$ (1000.00)	Date (month, day, year) 10/13/98	Amount of Each Receipt this Period (1000.00) * *insufficient funds
B. Full Name, Mailing Address and ZIP Code Michael Lewis 2730 East Magnolia Avenue Knoxville, TN 37914 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lakeside & Shenandoah Apts. Occupation Owner Aggregate Year-to-Date > \$ (500.00)	Date (month, day, year) 10/12/98	Amount of Each Receipt this Period (500.00) * *insufficient funds
C. 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
D. 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
E. 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
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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	(1500.00)
<b>TOTAL</b> This Period (last page this line number only) .....	16950.00