

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 27  
FOR LINE NUMBER 11e

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Tony Samuel for Congress Committee

| A. Full Name, Mailing Address and ZIP Code                                                                                          | Name of Employer | Date (month, day, year)         | Amount of Each Receipt this Period |
|-------------------------------------------------------------------------------------------------------------------------------------|------------------|---------------------------------|------------------------------------|
| Van Smith                                                                                                                           |                  | 3/22/00                         | \$ 500                             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 500 |                                    |
| B. Full Name, Mailing Address and ZIP Code                                                                                          | Name of Employer | Date (month, day, year)         | Amount of Each Receipt this Period |
| William Strange                                                                                                                     |                  | 3/23/00                         | \$ 20                              |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 20  |                                    |
| C. Full Name, Mailing Address and ZIP Code                                                                                          | Name of Employer | Date (month, day, year)         | Amount of Each Receipt this Period |
| Eileen Mook                                                                                                                         |                  | 3/24/00                         | \$ 100                             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 100 |                                    |
| D. Full Name, Mailing Address and ZIP Code                                                                                          | Name of Employer | Date (month, day, year)         | Amount of Each Receipt this Period |
| William Swords, II<br>9214 Stones Ferry Way<br>Indpls, IN 46278                                                                     | Asphidoch        | 3/24/00                         | \$ 500                             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 500 |                                    |
| E. Full Name, Mailing Address and ZIP Code                                                                                          | Name of Employer | Date (month, day, year)         | Amount of Each Receipt this Period |
| Henry Rosemar, M.D.<br>1505 - 35th St.<br>Munster, IN 46321                                                                         |                  | 3/24/00                         | \$ 100                             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 100 |                                    |
| F. Full Name, Mailing Address and ZIP Code                                                                                          | Name of Employer | Date (month, day, year)         | Amount of Each Receipt this Period |
| Richard E. Ford                                                                                                                     |                  | 3/25/00                         | \$ 250                             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 250 |                                    |
| G. Full Name, Mailing Address and ZIP Code                                                                                          | Name of Employer | Date (month, day, year)         | Amount of Each Receipt this Period |
| Victor Childers<br>1710 Glenmary Crest<br>Indpls, IN 46228-3363                                                                     |                  | 3/25/00                         | \$ 50                              |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation       | Aggregate Year-to-Date > \$ 50  |                                    |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

25,915.00