

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full) Stabenow for U.S. Senate		U.S. SENATE 00 OCT 27 AM 10:37
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. Box 4945		
CITY, STATE and ZIP CODE East Lansing MI 48826	2. FEC IDENTIFICATION NUMBER C00344473	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input checked="" type="checkbox"/> 12-Day Pre-Election Report for the <u>General</u> (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on <u>11/7/00</u> in the State of <u>Michigan</u>
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> 30-Day Post-Election Report following the General Election
<input type="checkbox"/> January 31 Year End Report	on _____ in the State of _____
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for: Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period <u>10/1/00</u> through <u>10/18/00</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$ 552,729.74	\$ 4,157,684.52
(b) Total Contribution Refunds (from Line 20(d))	\$ 4,325.00	\$ 13,948.35
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$ 548,404.74	\$ 4,143,736.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$ 991,572.98	\$ 5,919,314.79
(b) Total Offsets to Operating Expenditures (from Line 14)	\$ 0.00	\$ 33,520.10
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$ 991,572.98	\$ 5,885,794.69
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$ 456,668.91	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 330,221.15	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ANGELA M. AUTERA	
Signature of Treasurer <i>Angela M. Autera</i>	Date 10/23/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full) Stabenow for Senate	Report Covering the Period	
	From: 10/1/00	To: 10/18/00
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$265,582.25	
(ii) Unitemized	\$183,775.60	
(iii) Total of contributions from individuals	\$449,357.85	\$3,688,987.82
(b) Political Party Committees	\$380.00	\$9,444.99
(c) Other Political Committees (such as PACs)	\$23,031.89	\$459,251.91
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (ii), (c) and (d))	\$552,729.74	\$4,157,684.62
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$127,795.20
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$300,000.00	\$300,000.00
(c) TOTAL LOANS (add 13(a) and (b))	\$300,000.00	\$300,000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Forfeitures, etc.)	\$0.00	\$33,520.10
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$3,077.01	\$70,676.84
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$855,806.75	\$4,689,076.66
F. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$995,897.98	\$5,919,314.79
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$4,325.00	\$13,948.35
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$4,325.00	\$13,948.35
21. OTHER DISBURSEMENTS	\$0.00	\$0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$995,897.98	\$5,933,263.14

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 596,760.14
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 855,806.75
25. SUBTOTAL (add Line 23 and Line 24)	\$ 1,452,566.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 995,897.98
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 456,668.91

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL) <i>Stabenow for U.S. Senate</i>		FEC IDENTIFICATION NUMBER <i>C00344473</i>	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER) <i>Michigan National Bank 124 W. Allegan Lansing MI 48901</i>		AMOUNT OF LOAN <i>\$300,000.00</i>	INTEREST RATE (APR) <i>10.5%</i>
		DATE INCURRED OR ESTABLISHED <i>10/10/00</i>	DATE DUE <i>11/7/00</i>

A. Has loan been restructured? No Yes If yes, date originally incurred: _____

B. If line of credit, amount of this draw: *N/A*; total outstanding balance: *N/A*

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: *All assets of Stabenow for U.S. Senate including Account # 1939940795. \$78,000.00*

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?
 No Yes If yes, specify: *All future receipts* What is the estimated value? *\$300,000.00*

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: *10/10/00* Location of account: *Michigan National Bank 124 W Allegan Lansing MI 48901*

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.
Loan was made primarily based on the projected level of contributions to be received; expenses to be paid with the difference available for repayment of the loan.

G. COMMITTEE TREASURER
TYPED NAME *Angela M. Autera* SIGNATURE *Angela M. Autera* DATE *10/18/00*

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:
i. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
ii. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
iii. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE TYPED NAME <i>JAMES R. SPAELMA</i> SIGNATURE <i>James R. Spaelma</i>	TITLE <i>Vice President</i>	DATE <i>10/18/00</i>
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LOANS

Name of Committee (in Full) Stabenow for U.S. Senate			
A. Full Name, Mailing Address and ZIP Code of Loan Source Michigan National Bank 124 W. Allegan Lansing MI 48901 Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Original Amount of Loan \$300,000.00	Cumulative Payment To Date \$0	Balance Outstanding at Close of This Period \$300,000.00
Terms: Date Insured <u>10/15/00</u> Date Due <u>11/7/06</u> Interest Rate <u>18.5 % (apr)</u> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code Debbie Stabenow 2709 Overfield Lansing, MI 48911	Name of Employer US Congress		
	Occupation Congresswoman		
	Amount Guaranteed Outstanding: \$300,000.00		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Insured _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			\$300,000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

BUSINESS LOAN AGREEMENT

The undersigned Stabenow For U & Senate, an unincorporated association and Deborah A. Stabenow, an individual, with its chief executive offices located at P. O. Box 4946, East Lansing, Michigan 48826 (the "Borrower"), has requested from MICHIGAN NATIONAL BANK, a national banking association, of 124 W. Allegan St., P.O. Box 40798, Lansing, Michigan 48901-7988 (the "Bank"), and Bank agrees to make, or has made, the loan(s) described below (the "Loans") under the terms and conditions set forth in this Business Loan Agreement ("Agreement").

I. LOANS.

The following Loans and any amendments, extensions, renewals or refinancings thereof are subject to this Agreement:

	TYPE OF LOAN	LOAN AMOUNT	LOAN DATE
A.	Bullet Loan	\$300,000.00	October 10, 2000

Purpose of Loans listed above:

- A. Working Capital Liquidity Loan

II. BORROWER'S REPRESENTATIONS AND WARRANTIES.

Borrower represents and warrants to Bank, all of which representations and warranties shall be continuing until all of Borrower's Obligations under this Agreement and the Related Documents are fully performed, as follows:

- A. **Borrower's Existence and Authority.** Borrower is an unincorporated association (filed as a campaign committee with the Federal Election Committee (the "FEC") with FEC Identification Number C00344473), and the Person(s) executing this Agreement has full power and complete authority to execute this Agreement and all Related Documents.
- B. **Validity of Indebtedness and Agreement.** Borrower's indebtedness to Bank, this Agreement, and all Related Documents are valid, binding upon, and fully enforceable against Borrower in accordance with their respective terms.
- C. **Nature of Borrower's Business.** The nature of Borrower's business is: A principal campaign committee for Deborah A. Stabenow for Senate.
- D. **Financial Information.** All Financial Statements provided to Bank have been prepared and shall continue to be prepared in accordance with generally accepted accounting principles ("GAAP"), consistently applied, and fully and fairly present the financial condition of Borrower. There has been no material adverse change in Borrower's business, Property, or financial condition since the date of Borrower's latest Financial Statements provided to Bank.
- E. **Title and Encumbrances.** Borrower owns all of its Property, and there are no liens or encumbrances on any of the Property except as have been disclosed to Bank in writing prior to the date of this Agreement and which are identified and listed in an attachment to this Agreement (the "Permitted Encumbrances"). Borrower agrees that Borrower shall not obtain further loans, leases, or credit extensions from any Person identified in the Permitted Encumbrances list or otherwise without Bank's prior written consent.
- F. **No Litigation.** There are no suits or proceedings pending before any court, government agency, arbitration panel, or administrative tribunal, or, to Borrower's knowledge, threatened against Borrower, which may result in any material adverse change in the business, Property or financial condition of Borrower.
- G. **No Misrepresentations.** All representations and warranties in this Agreement and the Related Documents are true and correct and no material fact has been omitted.
- H. **Employee Benefit Plans.** Borrower has not incurred any material accumulated funding deficiency within the meaning of ERISA, and has not incurred any material liability to the PBGC in connection with any employee benefit plan established or maintained by Borrower, and no reportable event or prohibited transaction, as defined in ERISA, has occurred with respect to such plan(s).
- I. **Environmental Compliance.** Borrower is in full compliance with all applicable Environmental Laws.

III. AFFIRMATIVE COVENANTS.

As of the date of this Agreement and continuing until Borrower's Obligations under this Agreement and the Related Documents are fully performed, Borrower shall:

- J. **Maintenance of Records; Change in Place of Business or Name.** Keep all of its books and records at the address set forth in this Agreement, and give the Bank prompt written notice of any change in its principal place of business, in the location of Borrower's books and records, in Borrower's name, and of any change in the location of the Collateral.
- K. **Employment Laws.** Strictly comply with all Federal and State laws pertaining to Borrower's employees, including by way of illustration but not of limitation, the Michigan Worker's Disability Compensation Act, MCL 418.101 et seq., as amended, Michigan Employment Security Act, MCL 421.1 et seq., as amended, and the Fair Labor Standards Act, 29 USC 201 et seq., as amended.
- L. **General Compliance with Law.** At all times operate Borrower's business in strict compliance with all applicable Federal, State, and local laws, ordinances and regulations, including, without limitation, the Americans with Disabilities Act of 1990, and Borrower shall refrain from and prevent Borrower's partners, owners, directors, officers, employees and agents from engaging in any civil or criminal activity proscribed by law.
- M. **Management Continuation.** Borrower agrees that Deborah A. Sibenius and Anand M. Nijra, shall continue to actively manage and operate Borrower's business, and acknowledges that the Bank has made the Loans in reliance thereon.

IV. NEGATIVE COVENANTS.

Until all of Borrower's Obligations under this Agreement and the Related Documents are fully performed, without the Bank's prior written consent Borrower shall not:

- A. **Investment in Fixed Assets.** Invest in fixed assets without Bank's prior written consent.
- B. **Leases.** Enter into any lease without Bank's prior written consent.
- C. **No Borrowings, Guarantees, or Loans.** Borrow money, become the account party on any Letter of Credit, enter into any SWAP Agreement, act as a guarantor of any loan or other obligation, or lend any money to any Person, without the Bank's prior written consent. Any sale of Borrower's Accounts shall be deemed borrowing of money under this covenant.
- D. **Liase and Encumbrances; Transfer of Assets.** Mortgage, assign, or encumber any of its Property except to Bank, nor sell, transfer or assign any Property except in the ordinary course of business.
- E. **Dividends, Distributions; Capital Structure.** Pay dividends or make capital distributions in any fiscal year without Bank's prior written consent.

V. SECURITY FOR LOANS.

- A. **Security/Mortgage Interests.** Borrower and the other Obligor(s) named in this Agreement have granted or agree to grant to Bank on the date of this Agreement, security/mortgage interests in certain Property as collateral security for the Loans and repayment of the Indebtedness, among which are the following Related Documents:

Security Agreement(s) dated: October 10, 2000
Pledge Agreement dated: October 10, 2000

VI. EVENTS OF DEFAULT.

The occurrence of any of the following events shall constitute an Event of Default under this Agreement:

- A. **Failure to Pay Associate Due.** Failure to pay any principal or interest payment on any Indebtedness to Bank when due.
- B. **Misrepresentation; False Financial Information.** Any statement, warranty, or representation of Borrower or any Obligor made in this Agreement, the Related Documents, or any Financial Statements now or hereafter furnished to the Bank by or on behalf of the Borrower or any Obligor, is false or misleading.
- C. **Noncompliance with Bank Agreements.** Breaches of any covenant, term, condition, or agreement contained in this Agreement or in any of the Related Documents by Borrower or any Obligor.
- D. **Cessation/Termination of Existence.** Borrower or Obligor ceases doing business or Borrower's or any Obligor's existence is terminated by death, sale, dissolution, merger, or otherwise.
- E. **Bankruptcy or Receivership.** Any conveyance is made of substantially all of Borrower's assets, any assignment is made for the benefit of creditors, any receiver is appointed for Borrower, or any insolvency, liquidation or reorganization proceeding is filed by or against Borrower under the Bankruptcy Code or otherwise.

State of Michigan, the validity of the remaining portion or provisions of the Agreement shall not be affected.

- E. **Writings Constitute Entire Agreement; Modifications Only in Writing.** This Agreement, the Related Documents and all other written agreements between Borrower and Bank, constitute the entire agreement of the parties and there are no other agreements, express or implied. This Agreement supercedes any and all commitment letters or term sheets heretofore issued in connection with this Loan. None of the parties shall be bound by anything not expressed in writing, and neither this Agreement, the Related Documents, nor any other agreement can be modified except by a writing executed by Borrower and by the Bank. This Agreement shall inure to the benefit of and shall be binding upon all of the parties to this Agreement and their respective successors, estate representatives, and assigns, provided however, that Borrower cannot assign or transfer its rights or obligations under this Agreement without Bank's prior written consent.
- F. **Credit Inquiries.** Borrower hereby authorizes Bank to respond to any credit inquiries received by Bank from trade creditors or other credit granting institutions.
- G. **Headings.** All section and paragraph headings in this Agreement are included for convenience only and do not constitute a part of this Agreement.
- H. **Term of Agreement.** This Agreement supercedes and replaces all previous loan agreements concerning the Loans described in Paragraph I. Unless superceded by a later Business Loan Agreement, this Agreement shall continue in full force and effect until all of Borrower's Obligations to Bank are fully satisfied and the Loans and Indebtedness are fully repaid.
- I. **Counterparts.** This Agreement may be executed in any number of counterparts, all of which taken together shall constitute one agreement, and any of the parties hereto may execute this Agreement by signing any such counterpart.

X. DEFINITIONS.

The following words shall have the following meanings in this Agreement:

- A. **"Average Investible Balance"** means the average daily ledger balance in Borrower's deposit account referred to in Paragraph III.K. of this Agreement, less (i) average daily uncollected deposits, (ii) Bank's reserve requirement, and (iii) amounts necessary to offset applicable service charges, for the period covered by the account analysis statement provided by Bank, as shown on such account analysis statement.
- B. **"Base Rate" or "Prime Rate"** means that variable rate of interest from time to time established by the bank designated in the Loan promissory note(s) as its base or prime commercial lending rate.
- C. **"Bank"** means Michigan National Bank, a National banking association, and any successor or assign.
- D. **"Collateral"** means that Property which Borrower and any other Obligor has pledged, mortgaged, or granted Bank a security interest in, wherever located and whether now owned or heretofore acquired, together with all replacements, substitutions, proceeds and products thereof.
- E. **"Environmental Laws"** means all laws, regulations, and rules of the United States of America, State of Michigan, and local authorities which pertain to the environment, including but not limited to, the Clean Air Act (42 USC 7401 *et seq.*), Clean Water Act (33 USC 1251 *et seq.*), Resource Conservation and Recovery Act of 1976 (42 USC 8801 *et seq.*), Comprehensive Environmental Response, Compensation, and Liability Act of 1980 (42 USC 9601 *et seq.*), Hazardous Materials Transportation Act (49 USC 1801 *et seq.*), Solid Waste Disposal Act (42 USC 6901 *et seq.*), Toxic Substances Control Act (15 USC 2601 *et seq.*), Michigan Natural Resources and Environmental Protection Act (MCL 324.101 *et seq.*), as each of said statutes have been or are hereafter amended, together with all rules and regulations promulgated by the Environmental Protection Agency and Michigan Department of Natural Resources and Environmental Quality, and all additional environmental laws, rules, and regulations in effect on the date of this Agreement and as may be enacted and effective.
- F. **"ERISA"** means the Employee Retirement Income Security Act of 1974, as amended, and any successor act.
- G. **"Event of Default"** means any of the events described in Section VI. of this Agreement or in the Related Documents.
- H. **"Financial Statements"** means all balance sheets, cash flows, earnings statements, and other financial information (whether of Borrower or an Obligor) which have been, are now, or are in the future furnished to Bank.
- I. **"GAAP"** means "generally accepted accounting principles" consistently applied, as set forth from time to time in the opinions of the Accounting Principles Board of the American Institute of Certified Public Accountants and the Financial Accounting Standards Board.
- J. **"Indebtedness" or "Obligations"** means all Loans, indebtedness, and obligations of Borrower to the Bank, including but not limited to, any Bank advances for payments of insurance, taxes, amounts advanced by Bank to protect its interest in the Collateral, overdrafts in deposit accounts with Bank, and

By 
Deborah A. Stabenow, its Candidate

And

By 
Deborah A. Stabenow

BANK:

MICHIGAN NATIONAL BANK,
a national banking association

By 
James R. Spinks, its Vice President

PROMISSORY NOTE

(Term Loan)

\$300,000.00

Note No. _____

Lansing, Michigan

Due Date: November 7, 2000

Dated: October 10, 2000

FOR VALUE RECEIVED, the undersigned, jointly and severally (the "Borrower"), promise to pay to the order of MICHIGAN NATIONAL BANK, a national banking association (the "Bank"), at any office of the Bank located in the State of Michigan or at such other place as Bank may designate in writing, the principal sum of **THREE HUNDRED THOUSAND AND NO/100 DOLLARS (\$300,000.00)**, with interest as hereinafter provided, all in lawful money of the United States of America. The unpaid principal balance of this promissory note ("Note") shall bear interest computed on the basis of the actual number of days elapsed in a year consisting of 360 days, at a rate of interest (the "Effective Interest Rate") which is equal to:

Ten and One-Half percent (10.5%) per annum.

All principal and interest on this Note shall be paid to the Bank on November 7, 2000.

If this Note provides for installment payments of principal and interest and a variable interest rate, then upon any change in the Effective Interest Rate, upwards or downwards, the installment payments due under this Note shall be adjusted by the Bank, as of the next installment due date after the Effective Interest Rate change, to maintain amortization of the unpaid principal balance of this Note over the original amortization period.

Borrower expressly assumes all risks of loss or delay in the delivery of any payments made by mail, and no course of conduct or dealing shall effect Borrower's assumption of these risks. Borrower shall not be required to pay interest at a rate greater than the maximum allowed by law and any interest payment received by Bank which exceeds the maximum legal rate shall be automatically credited upon the unpaid principal balance of this Note. If the Bank determines the Effective Interest Rate is, or may be, usurious or otherwise limited by law, the unpaid balance of this Note shall, at Bank's option, become immediately due and payable.

This Note may be prepaid, in full or in part at any time without penalty. All partial prepayments shall be applied against the last accruing installment or amount due under this Note and no partial prepayments shall affect the obligation of Borrower to continue making all payments specified in this Note until the entire unpaid principal and all accrued interest shall have been paid in full. All payments received shall, at the option of the Bank, first be applied against accrued and unpaid interest and the balance against principal.

Unless this Note is due upon demand, in which case the provisions of this paragraph shall not apply, upon the occurrence of any of the following events ("Events of Default") the Bank, at its option, and without notice to Borrower, may declare the entire unpaid principal balance of this Note, all accrued interest, and all other indebtedness of Borrower to Bank, to be immediately due and payable: (a) failure to pay any principal or interest payment to Bank when due; (b) any statement, warranty, or representation of Borrower or any guarantor made in this Note, the Related Documents, or in any financial statement now or hereafter furnished to the Bank by or on behalf of the Borrower or any guarantor, is false or misleading; (c) breach of any covenant, term, condition, or agreement stated in this Note or in any of the Related Documents by Borrower or any guarantor; (d) Borrower or any guarantor ceases doing business or Borrower's or any guarantor's existence is terminated by death, sale, dissolution, merger or otherwise; (e) any conveyance is made of substantially all of Borrower's assets, any assignment is made for the benefit of creditors, any receiver is appointed for Borrower, or any insolvency, liquidation or reorganization proceeding is filed by or against Borrower under the Bankruptcy Code or otherwise; (f) any attachment, execution, levy, forfeiture, tax lien, or similar writ or process is issued against any of Borrower's property; (g) any felony criminal proceeding is brought against Borrower, Borrower's management, or any guarantor; (h) Bank determines the interest rate charged by Bank on any loan to Borrower is usurious or otherwise unlawful or limited; (i) any material adverse change occurs or is imminent, the effect of which would be to substantially diminish Borrower's or any guarantor's financial condition, business, ability to perform their agreements with Bank, or the value of any collateral securing Borrower's indebtedness and other obligations to the Bank; (j) any other Borrower indebtedness to the Bank or any other creditor remains unpaid after acceleration of its maturity or after the maturity stated.

Upon the occurrence of any Event of Default or upon non-payment of this Note after demand, the unpaid principal balance of this Note shall bear interest at a rate which is two percent (2%) greater than the Effective Interest Rate otherwise applicable. If any payment due under this Note is not paid within ten (10) days after the date due, then, at the option of the Bank, a late charge of not more than five cents (\$0.05) for each dollar of the installment past due may be charged by Bank. Borrower agrees to pay all of Bank's costs incurred in the collection of this Note, including reasonable attorney fees.

Acceptance by Bank of any payment in an amount less than the amount then due shall be deemed an acceptance on account only, and Borrower's failure to pay the entire amount due shall be an Event of Default. Borrower and all guarantors hereto do hereby (i) jointly and severally waive presentment for payment, demand, notice of nonpayment, notice of protest or protest of this Note, any defenses under 3-805 of the Michigan Uniform Commercial Code, the release of any collateral or part thereof, with or without substitution, and Bank diligence in collection or bringing suit, and (ii) consent to any and all extensions of time, renewals, waivers, or modifications as may be granted by Bank with respect to payment or any other provisions of this Note. The liability of the Borrower under this Note shall be absolute and unconditional, without regard to the liability of any

other party. This Note shall be deemed to have been executed in, and all rights and obligations hereunder shall be governed by, the laws of the State of Michigan.

This Note evidences a Loan made under the terms of a Business Loan Agreement dated October 10, 2000 and any amendments thereto and is secured by: (CHECK WHERE APPLICABLE)

Security Agreement dated October 10, 2000

Pledge Agreement dated October 10, 2000

Reference is hereby made to the document(s) and other agreement(s) described above (the "Related Documents") for additional terms and conditions relating to this Note.

BORROWER

Stabenow For U S Senate,
an unincorporated association

Borrower Address:

P.O. Box 4845, East Lansing, MI 48826-4845
Tax ID: 38-3461504

By: Angela M. Antara
Angela M. Antara, its Treasurer

By: Deborah A. Stabenow
Deborah A. Stabenow, its Candidate

2708 S. Garfield, Lansing, MI 48911
Social Security: 377-48-2852

By: Deborah A. Stabenow
Deborah A. Stabenow, Individually

SCHEDULE D
(Revised 3/90)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Stabenow for US Senate C00344473				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Goodwill Printing P.O. Box 2180 Detroit MI 48221	\$444.60	\$0.00	\$0.00	\$444.60
Nature of Debt (Purpose): Printing				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Lawson Printers 685 W Columbia Ave Battle Creek MI 49015	\$4,367.20	\$0.00	\$0.00	\$4,367.20
Nature of Debt (Purpose): Printing				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Hungerford Printers 1225 Ninth Street NW Washington DC 20001	\$912.62	\$0.00	\$0.00	\$912.62
Nature of Debt (Purpose): Printing				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Vertex Computer 300 N Clippert St #12 Lansing MI 48912	\$906.30	\$0.00	\$0.00	\$906.30
Nature of Debt (Purpose): Equipment Rental				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Vertex Computer 300 N Clippert St #12 Lansing MI 48912	\$585.10	\$0.00	\$0.00	\$585.10
Nature of Debt (Purpose): Equipment Maintenance				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
La Dane Williamson 730 Fifth Ave 15th Floor New York NY 10019 *The entire amount of this debt and obligation is disputed.	\$8,303.39	\$0.00	\$0.00	\$8,303.39*
Nature of Debt (Purpose): FR Food & Beverage				
1) SUBTOTALS This Period This Page (optional)				\$15,519.21
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 2 of 2 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Stabenow for US Senate C00344473				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Jennifer Treat 3250 Tennyson St NW Washington DC 20015	\$0.00	\$9,920.00	\$0.00	\$9,920.00
Nature of Debt (Purpose): FR Consultant				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Silver Service 8700 Mt Hope Hwy Grand Ledge MI 48837	\$0.00	\$1,163.00	\$0.00	\$1,163.00
Nature of Debt (Purpose): FR Food and Beverage				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Oldsmobile/GM Heritage Center 414 E Michigan Lansing MI 48933	\$0.00	\$530.00	\$0.00	\$530.00
Nature of Debt (Purpose): FR Room Rental				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Taj Indian Cuisine 2820 E Grand River Ave Lansing MI 48912	\$0.00	\$530.00	\$0.00	\$530.00
Nature of Debt (Purpose): FR Food and Beverage				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Lawson Printers Inc. 865 W Columbia Ave Belle Creek MI 48015	\$0.00	\$1,058.94	\$0.00	\$1,058.94
Nature of Debt (Purpose): Printing				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Lee Wayne Corporation P O Box 857 Starking IL 61081	\$0.00	\$1,500.00	\$0.00	\$1,500.00
Nature of Debt (Purpose): Bumper Stickers				
1) SUBTOTALS This Period This Page (optional)				\$14,701.94
2) TOTALS This Period (last page in this line only)				\$30,221.15
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				\$300,000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				\$330,221.15

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Laura R Paige 1842 Burcham Dr East Lansing, MI 48823-3773</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Michigan Education Association</p> <p>Occupation Uniserve Dir</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Roland Schaedlg 8205 Stoneham Dr Ypsilanti, MI 48197-2516</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer VA Medical Center</p> <p>Occupation Chaplain</p> <p>Aggregate Year-to-Date > \$ 475.00</p>	<p>Date (month, day, year) 10/15/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Andrew F Nagy 33B Rock Creek Dr Ann Arbor, MI 48104-2762</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer University of Michigan</p> <p>Occupation Professor</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Gary Hibbs 1787 Dunston Rd Canton, MI 48188</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Erickson Ret Comm</p> <p>Occupation Executive Director</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Eric Billis 7206 Creeks Bend Dr West Bloomfield, MI 48322</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired/Dentist</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Robert A Sedler 18951 Capitol Dr Southfield, MI 48075-2680</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Wayne State University Law School</p> <p>Occupation Professor</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 10/16/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Irene M Stewart 8312 Belle Bluff Grand Blanc, MI 48439</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer City of Grand Blanc</p> <p>Occupation Crossing Guard</p> <p>Aggregate Year-to-Date > \$ 275.00</p>	<p>Date (month, day, year) 10/3/00</p>	<p>Amount of Each Receipt this Period \$75.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1,225.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Richard T Cole 2793 Ore Valley Dr Hartford, MI 48363 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Blue Cross/Blue Shield	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$250.00
	Occupation Vice President Aggregate Year-to-Date > \$ 1,250.00		
B. Full Name, Mailing Address and ZIP Code Walter Scheider 1016 Woodbridge Ann Arbor, MI 48103 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Ann Arbor Public Schools Huron High School	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period \$100.00
	Occupation Teacher Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code Sarah Winans Newman 580 E Miller Rd Ithaca, NY 14850-4513 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired Aggregate Year-to-Date > \$ 800.00		
D. Full Name, Mailing Address and ZIP Code Sarah Winans Newman 580 E Miller Rd Ithaca, NY 14850-4513 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$200.00
	Occupation Retired Aggregate Year-to-Date > \$ 800.00		
E. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period MEMO \$100.00
F. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$200.00
G. Full Name, Mailing Address and ZIP Code Timothy R Johnson 200 Riverview Dr Ann Arbor, MI 48104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Michigan	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$50.00
	Occupation Physician Aggregate Year-to-Date > \$ 800.00		

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **OF**
 \$ 179
 FOR LINE NUMBER
 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Timothy R Johnson 200 Riverview Dr Ann Arbor, MI 48104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Michigan Occupation Physician Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code Marilyn S Klein 1963 Wickham Rd Royal Oak, MI 48073-1120 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code John M Horne 18420 New Hampshire Dr Southfield, MI 48075-2707 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code Bruce Tully 170 W End Ave New York, NY 10023 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bruce Tully Investments Occupation Banker Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution eemarked through this org. Occupation Conduct total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$500.00
F. Full Name, Mailing Address and ZIP Code Marian P Gates 442 Huntington Pl Ann Arbor, MI 48104-4105 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and ZIP Code David Lascu 11375 Young Ave Warren, MI 48089 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Detroit Newspapers Agency Occupation Sales Manager Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)	\$1,225.00
TOTAL This Period (total page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Susan Lightner 39608 State St Farmington Hills, MI 48335-3819 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Charter One Bank Occupation Loan Officer Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$400.00	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Yin-Po Tschang 108-33 83rd Dr Forest Hills, NY 11375-0000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Interpreter Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$825.00	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code Yin-Po Tschang 108-33 83rd Dr Forest Hills, NY 11375-0000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Interpreter Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00 \$825.00	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer None: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00 \$100.00	Amount of Each Receipt this Period MEMO \$100.00
E. Full Name, Mailing Address and ZIP Code Lionel S Margolick 32255 Northwestern Hwy # 290 Farmington Hills, MI 48334 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Margolick Financial Group Occupation Financial Advisor Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00 \$1,250.00	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code D Jean Keen 6 Kendal Drive Kennet Square, PA 19348 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$500.00	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Robin Barclay 18221 Hamilton Dr Detroit, MI 48203-1469 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Ultimed HMO of Michigan Occupation CEO Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$800.00	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional) \$1,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 129
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pamela Fulton 310 Main St Manistique, MI 49854	Information Requested	10/8/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested		
	Aggregate Year-to-Date > \$	\$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Constance K Duprey 4312 Lealand Lane Nashville, TN 37204-0000		10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$1,150.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Constance K Duprey 4312 Lealand Lane Nashville, TN 37204-0000		10/17/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$1,150.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sharene K Menson 4590 Mulberry Woods Cir Ann Arbor, MI 48105-1876		10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$700.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bijan Nahai 465 S Beverly Dr #200 Beverly Hills, CA 90212	Insurance Services	10/19/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman		
	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Miriam Mondry 1159 Greensted Way Bloomfield Hills, MI 48302-2325		10/10/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$600.00	

SUBTOTAL of Receipts This Page (optional)

\$1,650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons:

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NAME OF COMMITTEE (In Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Rice 611 W Sixth St #3250 Los Angeles, CA 90017	Self-employed	10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Management Consultant	Aggregate Year-to-Date > \$	\$1,250.00
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Diana S Brown 696 Trombley Road Grosse Pointe, MI 48230	Name of Employer Information Requested	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$250.00
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code R Edwards Brown PO Box 1565 Royal Oak, MI 48068	Name of Employer Information Requested	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$350.00
F. Full Name, Mailing Address and ZIP Code James N Morgan 1217 Bydging Road Ann Arbor, MI 48103	Name of Employer	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,300.00
G. Full Name, Mailing Address and ZIP Code Ernest L Horne 48258 Hecker Dr Utica, MI 48317-5763	Name of Employer	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,200.00

SUBTOTAL of Receipts This Page (optional) **\$1,950.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code Ernest L Home 46256 Hecker Dr Utica, MI 48317-5763 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$1,200.00	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Darin Messera 16612 NE 42nd Ct Seattle, WA 98052 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Orbit Software Inc Occupation President Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Ruth B Fox 1812 Pinecrest Dr East Lansing, MI 48823 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$350.00	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and ZIP Code Ruth B Fox 1812 Pinecrest Dr East Lansing, MI 48823 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$350.00	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and ZIP Code Edith I Needham 4911 Allingham White Lake, MI 48383 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Ruth Garretson 621 Kerna Mountain Ln New Market, VA 22844 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00 \$250.00	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,879.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period MEMO \$250.00

BUSTOTAL of Receipts This Page (optional)	\$2,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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 committees.

NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Shaula E Maasena 16612 NE 42nd Ct Redmond, WA 98052 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Microsoft Occupation Programmer Aggregate Year-to-Date > \$	Date (month, day, year) 10/2/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/2/00	Amount of Each Receipt this Period MEMO \$1,000.00
C. Full Name, Mailing Address and ZIP Code Jack F Puschner 1512 Barber Dr Eugene, OR 97405 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$350.00	Amount of Each Receipt this Period \$150.00
D. Full Name, Mailing Address and ZIP Code Anthony D DiPiazza 2061 Hamilton Rd Okemos, MI 48864 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Consumers Power Company Occupation Pilot Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$400.00	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and ZIP Code Farid Pakravan 11500 San Vicente Blvd #214 Los Angeles, CA 90049 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Western Dental Occupation Dentist Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code David J Sparrow 100 W Long Lake Rd #120 Bloomfield Hills, MI 48304 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Rowln & Sparrow Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00 \$1,000.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code H Joyce Bishop 11204 Marsha Pl Warren, MI 48089 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00 \$300.00	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)

\$3,150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 179
FOR LINE NUMBER 11(a)(ii)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate 00034473

A. Full Name, Mailing Address and ZIP Code Raymond E Knape 2734 Mulford Dr SE Grand Rapids, MI 49546 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/14/00	
Aggregate Year-to-Date > \$		\$1,350.00	
B. Full Name, Mailing Address and ZIP Code Kathryn A Gardow 5063 Harold Pl Seattle, WA 98105-2808 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self-employed	10/14/00	
Aggregate Year-to-Date > \$		\$250.00	
C. Full Name, Mailing Address and ZIP Code Joe Rhinehart P O Box 21577 Detroit, MI 48221 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self-employed	10/10/00	
Aggregate Year-to-Date > \$		\$250.00	
D. Full Name, Mailing Address and ZIP Code Harriet B Brittain 135 Warren Rd Ithaca, NY 14850-2727 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/12/00	
Aggregate Year-to-Date > \$		\$900.00	
E. Full Name, Mailing Address and ZIP Code Robert Henigson PO Box 345 Deer Harbor, WA 98243 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/12/00	
Aggregate Year-to-Date > \$		\$250.00	
F. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Note: Above Contribution earmarked through this org.	10/12/00	
Conduit total: \$16,798.00			MEMO \$250.00
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code John R Shaver 1315 Westview Ave #1 East Lansing, MI 48823 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/12/00	
Aggregate Year-to-Date > \$		\$1,200.00	

SUBTOTAL of Receipts This Page (optional)

\$1,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vera C Pratt 4314 Kinge St NW Washington, DC 20015	Self-employed	10/17/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Artist	Aggregate Year-to-Date > \$	\$1,500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don Munce 350 NW Lakewood Blvd Leas Summit, MO 64064	NRCUA	10/8/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rod A Grieshaber 4776 W Michigan Ave Ypsilanti, MI 48197		10/11/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$550.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce S Cohen 55 Tiffany Cir Millbury, MA 01527	Worcester State College	10/7/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$675.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allen J Kovinsky 6755 Orinco Circle Bloomfield Twp, MI 48075-5814	Sommers Schwartz Silver & Schwarz	10/13/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol R Chappell 503 W Jefferson St Grand Ledge, MI 48837	U S Government - Peace Corps	10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Country Director	Aggregate Year-to-Date > \$	\$850.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Judy Bloom 315 Barbara Way Burlingame, CA 94010	JVS	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Employer Services Director	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)	\$2,375.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael C Rohman 2020 Lincoln Park West Chicago, IL 60614-3511	Self-employed Occupation: Futures Trader	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$350.00	
B. Full Name, Mailing Address and ZIP Code Lawrence Wisne 21175 Telegraph Road Southfield, MI 48034	Progressive Tool Occupation: President	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
C. Full Name, Mailing Address and ZIP Code Pamela Rossbach 120 East 75th Street New York, NY 10021-0000	Metropolitan Museum of Art Occupation: Volunteer	10/13/00	\$250.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution eemarked through this org. Occupation: Conduit total: \$116,979.00	10/13/00	\$250.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Cecilia Drayfuss 3801 E Joy Rd Ann Arbor, MI 48105-9693	Self-employed Occupation: Writer	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$475.00	
F. Full Name, Mailing Address and ZIP Code Walter F Limbach 123 Beaumont Rd Pittsburgh, PA 15206	Retired Occupation: Retired	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
G. Full Name, Mailing Address and ZIP Code Robert L Muhlbach 1807 Ann St East Lansing, MI 48823-3707	Retired Occupation: Retired	10/13/00	\$40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$240.00	

SUBTOTAL of Receipts This Page (optional) **\$1,740.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 12 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert L Muhlbach 1807 Ann St East Lansing, MI 48823-3707		10/16/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$240.00
B. Full Name, Mailing Address and ZIP Code Laurie M Young 34125 C.R. 352 Decatur, MI 49045	Name of Employer Laughter Works	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	\$300.00
C. Full Name, Mailing Address and ZIP Code Paul Edwards 1827 Vinewood Blvd Ann Arbor, MI 48104	Name of Employer University of Michigan	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$235.00
D. Full Name, Mailing Address and ZIP Code MOVEDN DRG PAC P.O. Box 9063 Berkeley, CA 94709	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$14,804.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Wilmer M Rutt 1300 E Lafayette St #100B Detroit, MI 48207-2920	Name of Employer Information Requested	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code Sue Ann Reagan 7920 Woodway Dr Houston, TX 77063-1845	Name of Employer	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 905 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 13 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Jones Earley 6200 Birch Row Dr East Lansing, MI 48823-1609	Oldsmobile History Center	10/7/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired/Manager Aggregate Year-to-Date > \$		\$750.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julane Katz 7300 Radice #309 Fort Lauderdale, FL 33319		10/12/00	\$35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$		\$285.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Ann CKelly 575 E Danaville Rd Dansville, MI 48819-9712	Self-employed	10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant Aggregate Year-to-Date > \$		\$225.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald C Melvin 6684 Lakeview Dr Prudenville, MI 48857	Behavioral Medical Assoc PLLC	10/15/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist Aggregate Year-to-Date > \$		\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shelley Boschan 422B Sedgemoor Ln Bloomfield Hills, MI 48302	Adams Development	10/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Architect Aggregate Year-to-Date > \$		\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emilie Heller 4912 Radford Rd Bethesda, MD 20816	US Government Acct Office	10/6/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager Aggregate Year-to-Date > \$		\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 605 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/6/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$118,979.00 Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$1,910.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C0034473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
June Siebert 26 Breitmeyer Pl Mount Clemens, MI 48043-2164	Self-employed	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychotherapist	Aggregate Year-to-Date > \$	\$280.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morad Hariri 1899 Carla Ridge Dr Beverly Hills, CA 90210		10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard W Patch 1852 N Walmont Jackson, MI 49203	Law Office of Howard W Patch	10/12/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$275.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen R Trongo 1002 Kensington Ave Flint, MI 48503-5381	Port Huron Area Schools	10/14/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychologist	Aggregate Year-to-Date > \$	\$225.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy L Shaw 318 Helen St Midland, MI 48640-9513		10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$380.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Popenoe Jr 776 Tanglewood Dr Lafayette, CA 94549		10/12/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karen V Busch 5281 Hidden Lake Dr East Lansing, MI 48823-2985	Michigan State University	10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$350.00

SUBTOTAL of Receipts This Page (optional)

\$1,270.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dan Stamper PO Box 32868 Detroit, MI 48232	Detroit International Bridge Company	10/12/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stuart H Anderson 4719 Cornell Ave Downers Grove, IL 60515-3326		10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Note: Above Contribution earmarked through this org.	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$16,796.00 Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise Walter 321 Ridgemont Rd Grosse Pointe Farms, MI 48236		10/5/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Nourafshan 6399 Wilshire Blvd #604 Los Angeles, CA 90048	Reliable Properties	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Businessman Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anthony Statz 29660 Citation Circle #13107 Farmington Hills, MI 48331	WDIV	10/13/00	\$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: News Production Aggregate Year-to-Date > \$ 205.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David S Black 1933 Broadway E Seattle, WA 98102		10/17/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$ 275.00		

SUBTOTAL of Receipts This Page (optional) \$2,365.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$14,804.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt This Period MEMO \$200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Landon V Butler 3224 Woodland Dr NW Washington, DC 20008</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Landon Butler & Co</p> <p>Occupation Investment Advisor</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/6/00</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code David V Evans 3549 S Utah St Arlington, VA 22208-1815</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Center for Civic Education</p> <p>Occupation Senior Policy Advisor</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt This Period \$150.00</p>
<p>D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$118,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt This Period MEMO \$150.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Joseph P Kanan 507 Notre Dame St Grosse Pointe, MI 48230-1524</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Kennelle Benedict 710 Asbury Ave Evanston, IL 60202</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer MacArthur Foundation</p> <p>Occupation Philanthropy</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt This Period \$300.00</p>
<p>G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$118,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt This Period MEMO \$300.00</p>

SUBTOTAL of Receipts This Page (optional) \$2,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen A Duggan-Haas 121 James St PO Box 232 Parma, MI 49269	Jackson County Math/Science Center	10/7/00	\$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Science Educator	Aggregate Year-to-Date > \$	\$380.00
B. Full Name, Mailing Address and ZIP Code Milton Y Zussman 4050 Overlea Ct Bloomfield Hills, MI 48302	Name of Employer Self-employed	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$800.00
C. Full Name, Mailing Address and ZIP Code Lorrey Michela 14175 Richfield Livonia, MI 48154	Name of Employer Novara Tesija & Michela PLLC	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Alan Walker 19230 Forest Park Dr NE #D314 Seattle, WA 98155-2484	Name of Employer Volt Technical Services	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Airframe Structural Designer	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Anita S Darrow 1020 Grove St # 70B Evanston, IL 60201-4236	Name of Employer	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) \$2,525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence M Bielawski 901 S Linwood Beach Rd Linwood, MI 48694-9433	Bay County Circuit Court	10/8/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Circuit Judge Aggregate Year-to-Date > \$ 500.00		
Mildred M Jeffrey 630 Merrick St Chatsworth Apts Detroit, MI 48202-3933	Michigan Women's Foundation	10/10/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant Aggregate Year-to-Date > \$ 225.00		
Mildred M Jeffrey 630 Merrick St Chatsworth Apts Detroit, MI 48202-3933	Michigan Women's Foundation	10/12/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant Aggregate Year-to-Date > \$ 225.00		
Elizabeth Kiefer 132 Brecon Dr Saline, MI 48176		10/12/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$ 250.00		
Julie Catsman Simon 6465 SW 110th St Miami, FL 33156-4067	Self-employed	10/13/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Public Relations Aggregate Year-to-Date > \$ 250.00		
Joan L Wolfe PO Box 191 Frankfort, MI 49635-8730	Information Requested	10/8/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Information Requested Aggregate Year-to-Date > \$ 500.00		
LCV (Conservation) PAC PO Box 105 Highland Park, IL 60035	Note: Above Contribution earmarked through this com.	10/6/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$500.00 Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$1,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Robert Soderstrom 11414 Woodbridge Grand Blanc, MI 48439-8709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date > \$	Date (month, day, year) 10/3/00	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code Elaine Fieldman 21557 Meadow Ln Birmingham, MI 48025 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Barris Scott Denn & Drker Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Barbara Miller 90 Usonia Rd Pleasantville, NY 10570-2617 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Mary Ann B Oakley 2224 Kodlak Dr NE Atlanta, GA 30345-2101 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Holland and Knight LLP Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period MEMO \$100.00
F. Full Name, Mailing Address and ZIP Code Marilyn L Farris 207 E Gardendale Ave Terre Haute, IN 47803 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Covered Bridge Special Education Occupation Administrator Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period MEMO \$100.00

SUBTOTAL of Receipts This Page (optional)	\$1,200.00
TOTAL This Period (final page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Eleanor V Hines 4 Winslow Pl Cape Elizabeth, ME 04107-1620 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$250.00	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and ZIP Code Laura Coman 1403 Preston Ave Austin, TX 78703-1953 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Texas Occupation Grad Student Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Condull total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$500.00	Amount of Each Receipt this Period MEMO \$500.00
D. Full Name, Mailing Address and ZIP Code Gayle K Steiner 619 Eberwhite Blvd Ann Arbor, MI 48103 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Theater Foundation Occupation Fundraiser Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00 \$500.00	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Ramanathan Nageppan 2027 Timberview Dr Okemos, MI 48864-5999 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Physician Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00 \$250.00	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and ZIP Code Paul N Marcus 64 Riverside Dr #16G New York, NY 10024 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$400.00	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Margaret E McCarthy 3326 Alpine St Ann Arbor, MI 48108-1704 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$225.00	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)	\$1,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Margaret E. McCarthy 3326 Alpine St Ann Arbor, MI 48108-1704 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$25.00
	Occupation Retired	10/13/00	
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$50.00
	Occupation Conduit total: \$116,979.00	10/10/00	
C. Full Name, Mailing Address and ZIP Code Oliver S Nickels 4250 Cedar Heights Dr Colorado Springs, CO 80904 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$35.00
	Occupation Retired	10/7/00	
D. Full Name, Mailing Address and ZIP Code Jesse Kehres 25823 W Camino Vis Hayward, CA 94541 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Laidlaw Waster	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation Engineer	10/10/00	
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$100.00
	Occupation Conduit total: \$116,979.00	10/10/00	
F. Full Name, Mailing Address and ZIP Code Joan Wofford 79 Montgomery St Boston, MA 02116 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Leadership and Learning	Date (month, day, year)	Amount of Each Receipt this Period \$250.00
	Occupation Consultant	10/10/00	
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year)	Amount of Each Receipt this Period MEMO \$250.00
	Occupation Conduit total: \$116,979.00	10/10/00	

SUBTOTAL of Receipts This Page (optional)	\$410.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
David Fellman 1718 Irving St NW #401 Washington, DC 20010	Adams Hussey & Associates	10/8/00	\$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant Aggregate Year-to-Date > \$ 350.00		
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/8/00	Amount of Each Receipt This Period MEMO \$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code E Joyce Krause 20200 Briardliff Rd Detroit, MI 48221-1803	Name of Employer	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$ 700.00		
D. Full Name, Mailing Address and ZIP Code Thomas W Meyer 162 Huguenot St New Paltz, NY 12561	Name of Employer SUNY	Date (month, day, year) 10/4/00	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Carol L. Raye 111 4th Ave #12-C New York, NY 10003	Name of Employer Princeton University	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Research Staff Aggregate Year-to-Date > \$ 400.00		
F. Full Name, Mailing Address and ZIP Code Gabriel J Courcy PO Box 1484 Birmingham, MI 48012	Name of Employer Self-employed	Date (month, day, year) 10/6/00	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant Aggregate Year-to-Date > \$ 1,200.00		
G. Full Name, Mailing Address and ZIP Code Pauline A Sondag 1864 Walnut Heights Dr East Lansing, MI 48823-2946	Name of Employer	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional) \$2,250.00
TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate CD0344473

<p>A. Full Name, Mailing Address and ZIP Code Lucia S Smith 43585 Vena Ct Clinton Twp, MI 48038</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Macomb Intermediate School District</p> <p>Occupation Education Consultant</p> <p>Aggregate Year-to-Date > \$ 460.00</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Barbara Taylor 16546 Chalel Terr Pacific Palisades, CA 90272</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 225.00</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduct total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period MEMO \$50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Christian Jahrling 10491 Overhill Dr Brighton, MI 48114</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Turner Construction Co</p> <p>Occupation Contractor</p> <p>Aggregate Year-to-Date > \$ 1,500.00</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt This Period \$500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Barbara A McFall 75 Oak Dr Hebron, OH 43025-9423</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Terri Jerry 118 Hatherly Rd Syracuse, NY 13224</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Advertising</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduct total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period MEMO \$250.00</p>

SUBTOTAL of Receipts This Page (optional) \$1,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Stuart S Kurlander 2101 Connecticut Ave NW #23 Washington, DC 20008	Name of Employer Leighton & Walkins	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$200.00
	Occupation Attorney Aggregate Year-to-Date > \$ 300.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Leslie A Novara 4385 Deacon Ct Troy, MI 48098	Name of Employer Smith Barney	Date (month, day, year) 10/19/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Broker Aggregate Year-to-Date > \$ 1,000.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Robert S Bader 602 Avon St Flint, MI 48503-3587	Name of Employer Medical Society Foundation	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$25.00
	Occupation Operations Director Aggregate Year-to-Date > \$ 210.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Berl H Kaseck 2441 Dorchester Rd Birmingham, MI 48009	Name of Employer Neumann Smith & Assoc	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$500.00
	Occupation Architect Aggregate Year-to-Date > \$ 1,500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Mary Jane Powell 31 Cheever Cir Andover, MA 01810-1704	Name of Employer Powell Corp	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
	Occupation Manufacturer Aggregate Year-to-Date > \$ 500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Roland Calvert 1257 E Siena Heights Dr Adrian, MI 49221	Name of Employer Adrian Dominican Sisters	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$50.00
	Occupation Chaplain Aggregate Year-to-Date > \$ 280.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code F Thomas Lewand 323 Greenwood St Birmingham, MI 48009	Name of Employer Bodman Longley & Dahling	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$500.00
	Occupation Attorney Aggregate Year-to-Date > \$ 1,500.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$2,775.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **25** OF **179**

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeanne M Kapenga 3805 Hemmingway Dr Okemos, MI 48864-3836	Self-employed	10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$350.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bryan L Amann 1777 Stonebridge Way Ct Canton, MI 48106	Brashear Tangora Gallagher Creighton & Amann	10/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arlie J Bennett 1110 W Maple St Kalamazoo, MI 49008-1846	Retired	10/9/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$480.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/9/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$118,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Myron S Magen 1251 Farwood Dr East Lansing, MI 48829-1831	Michigan State University College of Osteopathic M	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G Michela 14175 Richfield Livonia, MI 48154	International Association of Machinists	10/12/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Representative	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R L Herman 1302 S 101st St #210 Omaha, NE 68124	Retired	10/6/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,000.00

GUSTOTAL of Receipts This Page (optional)

\$3,175.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD034473

A. Full Name, Mailing Address and ZIP Code Marjorie Benton 581 Ingleside Park Evanston, IL 60201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$1,250.00	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Delores Jones 1626B 38th Ave NE Seattle, WA 98166 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00 \$500.00	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution sanmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00 \$250.00	Amount of Each Receipt this Period MEMO \$250.00
D. Full Name, Mailing Address and ZIP Code Howard L Green 6670 Heron Pt West Bloomfield, MI 48323 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$230.00	Amount of Each Receipt this Period \$20.00
E. Full Name, Mailing Address and ZIP Code Frances Brotzen 2701 Bellefontaine St Studio H Houston, TX 77025-1667 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Rice University Professor Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00 \$576.00	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution sanmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/8/00 \$250.00	Amount of Each Receipt this Period MEMO \$250.00
G. Full Name, Mailing Address and ZIP Code Amy D Seetoo 3111 Cedarbrook Rd Ann Arbor, MI 48105-2569 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Self-employed Landlord Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$400.00	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$1,070.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas H Stone 1780 Green Bay Rd Highland Park, IL 60035	Faul Stone & Company	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corporate Executive	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bristol E Hunter 250 W Baker Clawson, MI 48017		10/10/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$450.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Isabella Paula 482 Forest Dr Brighton, MI 48116-1648		10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$525.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tracy J Stabileth-Brooks 32490 Nottingham Knolls Farmington Hills, MI 48334	Michigan Education Association	10/14/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Labor Representative	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margaret M Reuss 34 Cove Rd Belvedere Tiburon, CA 94920		10/17/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald D Boehmke 434 Forest Upper Wyandotte, MI 48192-8243	Department of Veterans Affairs	10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Claims Examiner	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clinton S Hirst 3636 Tuckahoe Road Bloomfield, MI 48301	University of Detroit Mercy	10/6/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$325.00

SUBTOTAL of Receipts This Page (optional) \$2,426.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 28 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Clinton S Hirat 3838 Tuckahoe Road Bloomfield, MI 48301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Detroit Mercy Occupation Professor Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$35.00
B. Full Name, Mailing Address and ZIP Code Paul Tyjowski 351 E Stenberg Rd Muskegon, MI 49441-8043 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Homecare Inc Occupation Administrator Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$75.00
C. Full Name, Mailing Address and ZIP Code Sheryl Hirsch 1439 Burgundy Ann Arbor, MI 48105-9685 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Michigan Medical School Occupation Physician Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Doris E Reed 414 Crestwood Ct Endwell, NY 13760 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/19/00	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Mary E Eigeman 600 E Cathedral Rd #K2 Philadelphia, PA 19128 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution remarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period MEMO \$100.00
G. Full Name, Mailing Address and ZIP Code Norman Rosenzweig 1234 Cedarholm Ln Bloomfield Hills, MI 48302 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)	\$1,510.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Muriel J Hinz 21912 Kramer St Clair Shores, MI 48080-2164		10/5/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$340.00
B. Full Name, Mailing Address and ZIP Code Allen Kohl 450 N Roxbury Dr #600 Beverly Hills, CA 90210	Name of Employer Self-employed	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Martha Darling 3340 E Dobson Place Ann Arbor, MI 48105	Name of Employer Self-employed	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Nancy B Hammerlich 157 Brenton Road Newport, RI 02840	Name of Employer Information Requested	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Christa L Burgoyne 2828 Forest Ave Berkeley, CA 94705-1309	Name of Employer Self-employed	Date (month, day, year) 10/3/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Property Manager	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code Christa L Burgoyne 2828 Forest Ave Berkeley, CA 94705-1309	Name of Employer Self-employed	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Property Manager	Aggregate Year-to-Date > \$	\$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$2,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(ii)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period MEMO \$500.00
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/3/00	Amount of Each Receipt this Period MEMO \$500.00
C. Full Name, Mailing Address and ZIP Code Frances E Bull 3467 Craig Rd Ann Arbor, MI 48103-1708 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Rollred Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and ZIP Code Lester O Pollak 306 First Street Jackson, MI 48201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code John Bog 1240 Whittier Dr East Lansing, MI 48823 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bernick Omar & Radner Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code J Paul Power 636 Wimbledon Birmingham, MI 48009 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/9/00	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Michael L Slack 3702 Corum Cove Austin, TX 78748 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)	\$3,300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 31 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Will Little 1107 5th Ave New York, NY 10128</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer George Little Management</p> <p>Occupation Investor</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Tina Kroot 222 Crescent Rd San Anselmo, CA 94960</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Architect</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt this Period \$100.00 *</p>
<p>C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Peg Shaw 2147 O St NW #306 Washington, DC 20037</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$100.00 *</p>
<p>E. Full Name, Mailing Address and ZIP Code Peg Shaw 2147 O St NW #306 Washington, DC 20037</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$100.00 *</p>
<p>F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1,300.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 32 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Leon Tupper 15940 Glastonbury Detroit, MI 48223 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Gillreath Manufacturing Inc	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
	Occupation President	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code Marcela Ort PO Box 141 201 E Street Trufant, MI 49347-0141 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Montcalm County	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
	Occupation County Chair	Aggregate Year-to-Date > \$	\$215.00
C. Full Name, Mailing Address and ZIP Code Janet R Benjamin 616 N Hillcrest Rd Beverly Hills, CA 90210 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$75.00
	Occupation Homemaker	Aggregate Year-to-Date > \$	\$225.00
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$75.00
	Occupation Conduct total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Glenna Armstrong 10205 Lakeshore Dr West Olive, MI 49460-9515 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$300.00
	Occupation Homemaker	Aggregate Year-to-Date > \$	\$650.00
F. Full Name, Mailing Address and ZIP Code Amy Kimura 1310 Heulu St #1002 Honolulu, HI 96822 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$49.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$280.00
G. Full Name, Mailing Address and ZIP Code Amy Kimura 1310 Heulu St #1002 Honolulu, HI 96822 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/19/00	Amount of Each Receipt this Period \$50.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$290.00

SUBTOTAL of Receipts This Page (optional) \$999.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **33** OF **179**
FOR LINE NUMBER **11(a)(1)**

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Kambiz Hakim 10811 Ambazac Way Los Angeles, CA 90077 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Real Estate Developer Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Carole F Youngblood 16814 Saint Paul St Grosse Pointe, MI 48230-1725 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer State of Michigan Occupation Judge Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$800.00	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and ZIP Code James M Herod 305 E Jarvis Ave Hazel Park, MI 48030-1263 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bayview Electric Co Occupation Inside Wireman Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$399.99	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and ZIP Code Mary Fletcher 7044B Ellingham Cir Alexandria, VA 22315 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer USDA Forest Service Occupation Personnel Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$850.00	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code John A James 27945 W 14 Mile Rd Farmington Hills, MI 48334 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer OJ Transport Occupation CEO Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Alice Irving 705 E Dixon Ave Charlevoix, MI 49720 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$300.00	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and ZIP Code Kathleen L Thayer 300 Billingsgate Bloomfield Hills, MI 48301-2268 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$250.00	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional) **\$2,350.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 34 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Carl Dean Snyder 838 Raymond St Ann Arbor, MI 48103 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/14/00	\$50.00
Aggregate Year-to-Date > \$		\$225.00	
B. Full Name, Mailing Address and ZIP Code Aldo Vagnozzi 26199 Kiltartan St Farmington Hills, MI 48334 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/10/00	\$100.00
Aggregate Year-to-Date > \$		\$455.00	
C. Full Name, Mailing Address and ZIP Code Franklin Hull 809 W Fourth St Royal Oak, MI 48067 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Physician	10/10/00	\$50.00
Aggregate Year-to-Date > \$		\$300.00	
D. Full Name, Mailing Address and ZIP Code Marjorie D Main 3440 S Jefferson St #725 Falls Church, VA 22041 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Homemaker	10/3/00	\$250.00
Aggregate Year-to-Date > \$		\$1,000.00	
E. Full Name, Mailing Address and ZIP Code M Sharon Muir 1578 Ravine Ln Rochester, MI 48306-1013 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Professor	10/13/00	\$50.00
Aggregate Year-to-Date > \$		\$500.00	
F. Full Name, Mailing Address and ZIP Code Donald Kewman 1074 Scio Hills Ct Ann Arbor, MI 48103-6305 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Psychologist	10/15/00	\$100.00
Aggregate Year-to-Date > \$		\$305.00	
G. Full Name, Mailing Address and ZIP Code Donald Kewman 1074 Scio Hills Ct Ann Arbor, MI 48103-6305 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Psychologist	10/13/00	\$15.00
Aggregate Year-to-Date > \$		\$305.00	

SUBTOTAL of Receipts This Page (optional)	\$815.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 35 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeanne M Jacobson 1521 S Lakeshore Drive Sarasota, FL 34231	Self-employed	10/12/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer/ Researcher	Aggregate Year-to-Date > \$ 450.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeanne M Jacobson 1521 S Lakeshore Drive Sarasota, FL 34231	Self-employed	10/6/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer/ Researcher	Aggregate Year-to-Date > \$ 450.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/12/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/6/00	MEMO \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Julle Stevenson 162 Huguenot St New Paltz, NY 12561		10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Terry Bloomberg 47 Frontenac Dr Saint Louis, MO 63131-2615	Developmental Child Care	10/12/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Educator	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/12/00	MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$2,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 38 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code B J Hill 643 Lakewood Ln Marquette, MI 49855-9517 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Northern Michigan University	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$50.00
	Occupation Dean Aggregate Year-to-Date > \$ 6 \$225.00		
B. Full Name, Mailing Address and ZIP Code G Robert Adams 236 Abbott Woods Dr East Lansing, MI 48823-7221 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Indian Rock Consulting Inc	Date (month, day, year) 10/3/00	Amount of Each Receipt this Period \$200.00
	Occupation Consultant Aggregate Year-to-Date > \$ 5 \$500.00		
C. Full Name, Mailing Address and ZIP Code Rosethel Howe 825 Nightingale St Dearborn, MI 48128-1563 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$25.00
	Occupation Retired Aggregate Year-to-Date > \$ 3 \$575.00		
D. Full Name, Mailing Address and ZIP Code Geraldine N Barclay 32241 Southfield Rd Birmingham, MI 48025-3162 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Fitzgerald Public Schools	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
	Occupation Bilingual Coord Aggregate Year-to-Date > \$ 8 \$250.00		
E. Full Name, Mailing Address and ZIP Code Lisa Maureen Smith 2616 Oliver Rd Royal Oak, MI 48073-4226 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Klimest McKnight Sale	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$50.00
	Occupation Attorney Aggregate Year-to-Date > \$ 6 \$600.00		
F. Full Name, Mailing Address and ZIP Code Margaret Turano Conradsen 2020 Kathleen Dr #27 Napa, CA 94558 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired Aggregate Year-to-Date > \$ 8 \$300.00		
G. Full Name, Mailing Address and ZIP Code Katharine Anderson 3831 Alta Vista Ave Santa Rosa, CA 95409 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hornberger Worstell Inc	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$500.00
	Occupation Architect Aggregate Year-to-Date > \$ 3 \$500.00		

SUBTOTAL of Receipts This Page (optional)

\$1,025.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 37 OF 179

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

J. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period MEMO \$500.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Cynthia Broder 6345 Balboa #375 Encino, CA 91316	Name of Employer Information Requested	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Information Requested Aggregate Year-to-Date > \$	\$1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$1,000.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Edwin M Curley 2645 Pin Oak Dr Ann Arbor, MI 48103	Name of Employer University of Michigan	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
	Occupation Professor Aggregate Year-to-Date > \$	\$500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Beverly Wiener 311 S Jenison Ave Lansing, MI 48915-1129	Name of Employer Haven House	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$100.00
	Occupation Social Worker Aggregate Year-to-Date > \$	\$400.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Barbara Klocko 1752 S Five Lakes Rd Attica, MI 48412-9784	Name of Employer Imlay City Schools	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
	Occupation Principal Aggregate Year-to-Date > \$	\$205.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Catherine Goldman 10401 Castline Avenue Cupertino, CA 95014	Name of Employer	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$250.00
	Occupation Homemaker Aggregate Year-to-Date > \$	\$250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$1,875.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 38 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period MEMO \$250.00
B. Full Name, Mailing Address and ZIP Code Keith E Lucas 310 Grant Ave #C14 Cape Canaveral, FL 32920 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code Marjorie Van Ochten 3113 Boston Blvd Lansing, MI 48910-8504 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and ZIP Code Marion F Levy 333 E 68th St New York, NY 10021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Writer Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$1,000.00
F. Full Name, Mailing Address and ZIP Code Diane Ashera 331 N Fairview Ave Lansing, MI 48912-3109 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer State of Michigan DOS/FIA Occupation Quality Analyst Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Dolores J Tuttle 1030 Rolling Green Ln Lansing, MI 48917 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$20.00

SUBTOTAL of Receipts This Page (optional)	\$1,245.00
TOTAL This Period (last page this line number only)	\$1,245.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Slabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Timothy J Kelley 24900 Van Buren Dearborn Heights, MI 48127-2308	Information Requested	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
John J Brown 48 Grove St Peterborough, NH 03456	Information Requested	10/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martha J Kinney 24401 Woodbridge Warren, MI 48091	Retired	10/12/00	\$45.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$365.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roberta H Harris 6 Longfellow Park Cambridge, MA 02138	Self-employed	10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Author	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Loretta Ziegelman 6425 Noble Rd W Bloomfield, MI 48322	Retired	10/14/00	\$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$230.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Dobkin 101 Central Park West #14B New York, NY 10023	Women's Advocacy Committee	10/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chair	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wolfgang Mueller 11823 Sycamore Plymouth, MI 48170	Olsman Ganos & Mueller	10/13/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$4,555.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 40 OF 179
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Judith F Stone 705 Edgemoor Ave Kalamazoo, MI 49008-2448	Western Michigan University Department of History	10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$285.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harry M Philo Jr 2875 Troy Center Dr #502B Troy, MI 48064-4729	Philo Atkinson White Stephens Wright and	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Librarian	Aggregate Year-to-Date > \$	\$450.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ellen A Strommen 2440 Burcham Dr East Lansing, MI 48823-7811		10/12/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard M Herman 312 N 96th St Omaha, NE 68114	Information Requested	10/6/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Evelyn Cohelan 5600 Broad Branch Rd NW Washington, DC 20015-2233		10/14/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Judith A Stuart 821 Adams Saginaw, MI 48602		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$350.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward D Pierce 140B Beechwood Dr Ann Arbor, MI 48103-2939		10/7/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,200.00

GUBTOTAL of Receipts This Page (optional)

\$2,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 41 OF 179
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Slabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ann L Andrews 1380 Haslett Rd Williamston, MI 48895	Hornigman Miller Schwartz & Cohn Occupation: Attorney	10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$650.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Leslie Steen 3001 Vasezy Terrace NW #1B10 Washington, DC 20008	Community Housing Inc Occupation: Developer	10/9/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org. Occupation: Conduit total: \$116,879.00	10/9/00	\$250.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Steven A Ogden 5736 Harvard Detroit, MI 48224	Com Group LLC Occupation: Director	10/2/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Norman Lana Hotchkiss 4489 Island View Dr Fenton, MI 48430	Michigan Education Association Occupation: Negotiator	10/12/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Vincent M Versage 211 Duke St Alexandria, VA 22314	Cassidy & Associates Occupation: Senior Vice President	10/8/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Margaret E Martin 10450 Lottsford Rd #4009 Mitchellville, MD 20721	Retired Occupation: Retired	10/5/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$450.00	

SUBTOTAL of Receipts This Page (optional)	\$2,250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(ii)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Richard L O'Hara III 7 Woodfield Ave Northport, NY 11788</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Colleran O'Hara & Mills</p> <p>Occupation Investor</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/9/00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Janis Burgess 1704 14th Ave Menominee, MI 49858</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Menominee County</p> <p>Occupation County Chair</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Sara Dubo Rabinovitch 32326 7 Mile Road Livonia, MI 48152-0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/14/00</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Larry M Lundino 5711 W 101 St Overland Park, KS 66207</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Naseer Abdulnour PO Box 251841 West Bloomfield, MI 48325</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ford Motor Company</p> <p>Occupation Engineer</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$75.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Patricia J Trezise 3763 E Shore Drive Grawn, MI 49637-9727</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/14/00</p>	<p>Amount of Each Receipt this Period \$20.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Kathy Fryer Helmbeck 4021 Paxton Ave Cincinnati, OH 45209</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>

SUBTOTAL of Receipts This Page (optional)

\$2,370.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Donna C Molluck 10 Maybridge Road Belvedere, CA 94020 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$500.00 *
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$500.00
C. Full Name, Mailing Address and ZIP Code Mary Amos M.D. 3311 Woodlea Dr Ann Arbor, MI 48103-4508 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code Marylouise Stafford 900 E Harrison Ave #H4 Pomona, CA 91767-3812 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$100.00 *
E. Full Name, Mailing Address and ZIP Code Marylouise Stafford 900 E Harrison Ave #H4 Pomona, CA 91767-3812 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00 *
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period MEMO \$100.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$100.00
SUBTOTAL of Receipts This Page (optional)			\$600.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Seyhan Nurettin Ege 1050 Wall Street #9C Ann Arbor, MI 48105-1981	Name of Employer University of Michigan Department of Chemistry Occupation Professor	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 400.00	
B. Full Name, Mailing Address and ZIP Code Timothy F Hannegan 6601 Lybrook Ct Bethesda, MD 20817	Name of Employer The Wexler Group Occupation Senior Director	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,300.00	
C. Full Name, Mailing Address and ZIP Code Timothy F Hannegan 6601 Lybrook Ct Bethesda, MD 20817	Name of Employer The Wexler Group Occupation Senior Director	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,300.00	
D. Full Name, Mailing Address and ZIP Code Gerald Klein 32714 Beacon Ln Fraser, MI 48026	Name of Employer Henry Ford Community College Occupation Teacher	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code Lucia H Krzywonos 1276 Suncrest Dr NE Grand Rapids, MI 49525-4556	Name of Employer Michigan Education Association Occupation Labor Relations	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 360.00	
F. Full Name, Mailing Address and ZIP Code Glenn Baker PO Box 13 Asheville, PA 16613	Name of Employer Occupation Retired	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 205.00	
G. Full Name, Mailing Address and ZIP Code Susan Grollenberger 1220 S Genesee Lansing, MI 48915	Name of Employer SEMHA Occupation Social Worker	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) \$1,650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00944479

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Jane Loehne 3263 S Huron Rd Bay City, MI 48706		10/13/00	\$225.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$225.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/13/00	MEMO \$225.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald E Howard 4175 McIntyre Ct Oxford, MI 48371-5419		10/5/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$465.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marjorie B Rachlin 2919 Brandywine St NW Washington, DC 20008-2139		10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$750.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Wallerstein 2604 NE 70th St Seattle, WA 98115-4671	University of Washington	10/4/00	\$500.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Note: Above Contribution earmarked through this org.	10/4/00	MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$16,798.00	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
Carol H Ray PO Box 5714 Stateline, NV 89449-5714		10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$850.00

SUBTOTAL of Receipts This Page (optional)

\$1,525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **46** OF **179**

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Carol H Ray PO Box 5714 Stateline, NV 89449-5714 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$25.00
B. Full Name, Mailing Address and ZIP Code Marc N Weiss 234 E 19th St New York, NY 10003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NY Foundation for the Arts Occupation Web & TV Producer Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Ann R Abdoo 17423 Francavilla Livonia, MI 48152-2014 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Southfield Public Library Occupation Librarian Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$100.00
D. Full Name, Mailing Address and ZIP Code Scott D Schrage 217 Abbott Woods Dr East Lansing, MI 48823-3022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Municipal League Occupation Association Executive Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt This Period \$500.00
E. Full Name, Mailing Address and ZIP Code Ben Pivnick 31380 W Stonewood Ct PO Box 2173 Farmington Hills, MI 48334 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pivnick Plywood Occupation Executive Sales Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$200.00
F. Full Name, Mailing Address and ZIP Code Michael J Cervenak 127 Sugar Pine Rd Rochester, MI 48309 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00	Amount of Each Receipt This Period \$50.00
G. Full Name, Mailing Address and ZIP Code Susan Masland 1430 E Hermitage Road Milwaukee, WI 53217 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$2,125.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Slabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period MEMO \$250.00
	Occupation Conduit total: \$118,979.00 Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Polin Cohanis 1001 N Randolph St #105 Arlington, VA 22201-0000	Name of Employer US Department of Labor	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$100.00
	Occupation Chief of Staff Aggregate Year-to-Date > \$		\$450.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period MEMO \$100.00
	Occupation Conduit total: \$118,979.00 Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Renate Gerulaitis 4 Southwick Ct Ann Arbor, MI 48105	Name of Employer Oakland University	Date (month, day, year) 10/7/00	Amount of Each Receipt This Period \$100.00
	Occupation Professor Aggregate Year-to-Date > \$		\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Eleanor D Garvin 93 Norview Drive Charleston, SC 29407-3716	Name of Employer	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period \$80.00
	Occupation Retired Aggregate Year-to-Date > \$		\$295.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Eleanor D Garvin 93 Norview Drive Charleston, SC 29407-3716	Name of Employer	Date (month, day, year) 10/7/00	Amount of Each Receipt This Period \$25.00
	Occupation Retired Aggregate Year-to-Date > \$		\$295.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period MEMO \$80.00
	Occupation Conduit total: \$118,979.00 Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$305.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Elizabeth J Ryan 80 La Salle Street # 8F New York, NY 10027</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 5250.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Gloria R Smith 222 Wah Wah Tay See Way Battle Creek, MI 49015-4061</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer W K Kellogg Foundation</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date > \$ 8650.00</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Doug C Kelly 910 Sunset Rd Ann Arbor, MI 48103</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 5500.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$150.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Rose Anna Tesija 733 Westview Road Bloomfield Hills, MI 48304</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Novara Tesija</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Sheila N Martin 20 Eagle Gap Rd Novato, CA 94949-6618</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Triplex Direct Marketing</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Emily Allen 65 Schooner Rd #201 Damariscotta, ME 04543</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution eMarketed through this org.</p> <p>Occupation Conduct total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period MEMO \$250.00</p>

SUBTOTAL of Receipts This Page (optional)

\$2,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan W Hammer 1257 W Hedding San Jose, CA 95128	Synopsis Outreach Foundation	10/6/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code Mary L Landis 508 W Locust St Palo, IL 61064-1410	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	10/7/00	\$35.00
	Aggregate Year-to-Date > \$	\$205.00	
C. Full Name, Mailing Address and ZIP Code Peggy M Heman 1302 S 101st St #210 Omaha, NE 68124	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	10/6/00	\$1,000.00
	Aggregate Year-to-Date > \$	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code Kathryn A Light 1115 S Lincoln St PO Box 2146 Bay City, MI 48707-0731	Name of Employer Bay Medical Center	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation X-Ray Technician	10/13/00	\$25.00
	Aggregate Year-to-Date > \$	\$300.00	
E. Full Name, Mailing Address and ZIP Code Sara J Fitzgerald 2914 N 27th St Arlington, VA 22207-0000	Name of Employer Funds for Learning	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	10/11/00	\$25.00
	Aggregate Year-to-Date > \$	\$225.00	
F. Full Name, Mailing Address and ZIP Code Amy S Courter 9081 Silverstone Dr South Lyon, MI 48178-9325	Name of Employer Valassis Communications Inc	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President/MIS	10/10/00	\$975.00
	Aggregate Year-to-Date > \$	\$1,650.00	
G. Full Name, Mailing Address and ZIP Code Philip J Chamberlain 613 Glendale Ave Lansing, MI 48910-4614	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	10/16/00	\$50.00
	Aggregate Year-to-Date > \$	\$250.00	

SUBTOTAL of Receipts This Page (optional)

\$2,360.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 50 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Emmons E Smith 30230 Oakview Way Bingham Farms, MI 48025-4626 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/12/00	
Aggregate Year-to-Date > \$		\$700.00	
B. Full Name, Mailing Address and ZIP Code Elizabeth W French 3279 Bolgos Circle Ann Arbor, MI 48105-1591 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/10/00	
Aggregate Year-to-Date > \$		\$325.00	
C. Full Name, Mailing Address and ZIP Code Joan E Demaree 3090 NW Christina St Corvallis, OR 97330 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Information Requested	10/3/00	
Aggregate Year-to-Date > \$		\$1,000.00	
D. Full Name, Mailing Address and ZIP Code Patricia J Smothers 114 Genesee Rd San Antonio, TX 78209 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Smothers Investments	10/17/00	
Aggregate Year-to-Date > \$		\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Judith Bisno Shulman 1118 Woodwind Haslett, MI 48840 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Lansing Community College	10/13/00	
Aggregate Year-to-Date > \$		\$800.00	
F. Full Name, Mailing Address and ZIP Code Alan Kobernal 2121 Vale Rd #59 San Pablo, CA 94806 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/5/00	
Aggregate Year-to-Date > \$		\$400.00	
G. Full Name, Mailing Address and ZIP Code Lisa L Kleissner 16897 Placer Oaks Rd Los Gatos, CA 95032 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Kleissner Group	10/14/00	
Aggregate Year-to-Date > \$		\$1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$3,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Holland 24 Peacock Ct San Rafael, CA 94901	Conrad Imports Inc	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$ 5400.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Betty Graber 4074 S Pine Center West Bloomfield, MI 48323	Self-employed	10/18/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychotherapist Aggregate Year-to-Date > \$ 2250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John L Tofaute 17001 Bernback Brownstown, MI 48192	FEC Management	10/7/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$ 5550.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack R Hamilton 3236 Westheimer Rd Houston, TX 77098	Davis Hamilton Jackson & Associates	10/13/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Investment Advisor Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cheryl Nordstrom 5704 E Starlight Way Telluride, CO 81453	Nordstrom Oil Company	10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Vice President Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan E Alexander 5270 Budapest Pl Washington, DC 20521-5270	Department of State	10/5/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Foreign Services Officer Aggregate Year-to-Date > \$ 250.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 605 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/5/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$1,075.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(7)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Samir A Danou 1251 Ford St Trenton, MI 48183	Self-employed	10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Danou Enterprises	Aggregate Year-to-Date > \$	\$1,500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margaret Kazarinoff PO Box 437 Pentwater, MI 49449-0437		10/12/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$550.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick M Anderson 318 Virginia Ann Arbor, MI 48103	Information Requested	10/5/00	\$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$225.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary L Tavarozzi 3143 N Racine Chicago, IL 60657	Towers Perrin	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Employee Benefits Consultant	Aggregate Year-to-Date > \$	\$550.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/10/00	MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	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
Anthony Partridge 5901 32nd St NW Washington, DC 20015		10/5/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Homer 4149 Woodcreek Lansing, MI 48911	City of Lansing	10/12/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Curator	Aggregate Year-to-Date > \$	\$875.00

SUBTOTAL of Receipts This Page (optional)

\$1,150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 53 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code John J Blasé 25230 E Roycourt Huntington Woods, MI 48070</p>	<p>Name of Employer Tri-County Neuro Assoc</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$20.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Physician</p>	<p>Aggregate Year-to-Date > \$</p>	<p>\$1,890.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Gail Willens 3567 Country Club Dr Potoskey, MI 49770</p>	<p>Name of Employer Petosky Carmology PC</p>	<p>Date (month, day, year) 10/14/00</p>	<p>Amount of Each Receipt this Period \$112.50</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Physician</p>	<p>Aggregate Year-to-Date > \$</p>	<p>\$287.50</p>
<p>C. Full Name, Mailing Address and ZIP Code Robert Bird 16634 James St Holland, MI 49424-6045</p>	<p>Name of Employer XRI Testing</p>	<p>Date (month, day, year) 10/16/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation X-Ray Technician</p>	<p>Aggregate Year-to-Date > \$</p>	<p>\$300.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Beth Shapiro Frank 8729 Michaels Dr Bethesda, MD 20817</p>	<p>Name of Employer Information Requested</p>	<p>Date (month, day, year) 10/6/00</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Information Requested</p>	<p>Aggregate Year-to-Date > \$</p>	<p>\$500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Terrill Hyde 8714 Millford Ave Silver Spring, MD 20910</p>	<p>Name of Employer Wilmer Cutler</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$600.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Attorney</p>	<p>Aggregate Year-to-Date > \$</p>	<p>\$750.00</p>
<p>F. Full Name, Mailing Address and ZIP Code James D. Massie 501 High St Alexandria, VA 22302-1604</p>	<p>Name of Employer Alpine Group Inc</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Consultant</p>	<p>Aggregate Year-to-Date > \$</p>	<p>\$500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Helen Welch 1305 Devonshire Way Palm Beach Gdns, FL 33416-0000</p>	<p>Name of Employer</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Retired</p>	<p>Aggregate Year-to-Date > \$</p>	<p>\$800.00</p>

SUBTOTAL of Receipts This Page (optional) \$1,762.50

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)
Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$118,979.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt This Period MEMO \$250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Joan W Blum 883 Park Ave #7A New York, NY 10028-0808</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Volunteer Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/6/00</p>	<p>Amount of Each Receipt This Period \$500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Glenn M Bivins 7416 Golf Gate Dr Lansing, MI 48917-1854</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer United States Department of Labor Occupation Training Rep Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Frederick H Jackson 4 Wald St Westborough, MA 01581</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Claudia Silts 120 Hawthorne Birmingham, MI 48009</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Film Producer Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt This Period \$200.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Jean F Relsen 2 Wentworth Rd Summit, NJ 07901-3724</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Robert R ReRerty 3230 Lakeshore Blvd Marquette, MI 49855-2028</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$35.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$985.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **55** OF **179**
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00844473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher Gabriell 8 Lonsburg Sq Boston, MA 02108-3608	Beebeer Venture Partners	10/17/00	\$1,000.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The New Democrat Network 501 Capitol Court NE Washington, DC 20002	Note: Above Contribution earmarked through this org.	10/17/00	MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$1,000.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merry A Rosenberg 519 N Jenison Ave Lansing, MI 48915-1254	State of Michigan	10/13/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$225.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merry A Rosenberg 519 N Jenison Ave Lansing, MI 48915-1254	State of Michigan	10/13/00	\$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$225.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold H Demarest Jr 6015 NW Rosewood Dr Corvallis, OR 97330	Astro Research Inc	10/3/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Computer Programmer	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ilene W Tomber 2370 Huron Hill Dr Okemos, MI 48864-2082	Michigan State University WKAR	10/16/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Development Director	Aggregate Year-to-Date > \$	\$1,025.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ilene W Tomber 2370 Huron Hill Dr Okemos, MI 48864-2082	Michigan State University WKAR	10/16/00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Development Director	Aggregate Year-to-Date > \$	\$1,025.00

SUBTOTAL of Receipts This Page (optional)

\$2,490.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate G00944473

A. Full Name, Mailing Address and ZIP Code Marilyn Bergman 714 N Maple Dr Beverly Hills, CA 90210 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Writer Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$350.00	Amount of Each Receipt This Period \$250.00
B. Full Name, Mailing Address and ZIP Code Stephen G Mullins 9915 Winged Foot Dr Louisville, KY 40223 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Asset Management Occupation Investment Counselor Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$1,000.00	Amount of Each Receipt This Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Carol J. Strachan 6035 Grand River Dr. Grand Ledge, MI 48837 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer State of Michigan Occupation Registered Nurse Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00 \$400.00	Amount of Each Receipt This Period \$50.00
D. Full Name, Mailing Address and ZIP Code Richard P Jennings 1015 Parnell St Sault Sainte Marie, MI 49783 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$385.00	Amount of Each Receipt This Period \$90.00
E. Full Name, Mailing Address and ZIP Code John W Backus 91 Saint Germain Ave San Francisco, CA 94114-2129 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$420.00	Amount of Each Receipt This Period \$15.00
F. Full Name, Mailing Address and ZIP Code Katharine B Mountcastle 37 Genoke Ln New Canaan, CT 06840 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$1,500.00	Amount of Each Receipt This Period \$500.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt This Period MEMO \$500.00

SUBTOTAL of Receipts This Page (optional) \$1,905.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(ii)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald J Katz 6583 Noble Rd West Bloomfield, MI 48322	John R Lumber Company	10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retail Merchant	Aggregate Year-to-Date > \$ 350.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph M Lenk 1040 Whitepine SW Grand Rapids, MI 49544		10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 295.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Renee Swanson Jr. 1744 Chester Rd Lansing, MI 48912	Waverly Community Schools	10/14/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$ 225.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Renee Swanson Jr. 1744 Chester Rd Lansing, MI 48912	Waverly Community Schools	10/3/00	\$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$ 225.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail Spang 1101 G St SE Washington, DC 20003-2971	Self-employed	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Tax Consultant	Aggregate Year-to-Date > \$ 350.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helene D Sherwood 18888 Landing Dr Spring Lake, MI 49458		10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 450.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sherry E Marcy 920 S 7th St Ann Arbor, MI 48103	Self-employed	10/16/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Social Worker	Aggregate Year-to-Date > \$ 550.00	

SUBTOTAL of Receipts This Page (optional) \$925.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code Anne Bartley 3580 Clay St San Francisco, CA 94118-2015 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
	Occupation Investor		
	Aggregate Year-to-Date > \$		\$500.00
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$500.00
	Occupation Conduit total: \$118,979.00		
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Anne Dorsey 32 Vista Clara Rd Sausalito, CA 94965 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
	Occupation Gerontologist		
	Aggregate Year-to-Date > \$		\$1,000.00
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$500.00
	Occupation Conduit total: \$118,979.00		
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code James Bille Seminole Indian Tribe of Florida 6300 Stirling Road Hollywood, FL 33024 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Seminole Indian Tribe of Florida	Date (month, day, year) 10/9/00	Amount of Each Receipt this Period \$2,000.00
	Occupation Chairman		
	Aggregate Year-to-Date > \$		\$2,000.00
F. Full Name, Mailing Address and ZIP Code Elayne Landis 40 E 88th St New York, NY 10128 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$250.00
	Occupation Educational Counselor		
	Aggregate Year-to-Date > \$		\$250.00
G. Full Name, Mailing Address and ZIP Code Joint Action Committee for Public Affairs (JACPAC) P.O. Box 105 Highland Park, IL 60035 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period MEMO \$250.00
	Occupation Conduit total: \$400.00		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$3,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Joyce Campbell 2255 Darimouth St Palo Alto, CA 94306-3135 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00 \$400.00	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Ellen F Moss 933 Aberdeen Dr Ann Arbor, MI 48104-2807 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Klimist McKnight Sale Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 \$1,000.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Helen Stevenson Simmons PO Box 965 Pauma Valley, CA 92061 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Avocado Grower Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00 \$300.00	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code Roy T Matthews 4702 Woodcraft Rd Okemos, MI 48864-2069 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 \$300.00	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and ZIP Code Judy Davis 120 Central Park S AP5ABC New York, NY 10019 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer New York University Occupation Associate for Development Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00 \$500.00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$118,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00 \$500.00	Amount of Each Receipt this Period MEMO \$500.00
G. Full Name, Mailing Address and ZIP Code Joan Y Weisman 1803 Cayuga Pl Ann Arbor, MI 48104-4720 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$265.00	Amount of Each Receipt this Period \$35.00

SUBTOTAL of Receipts This Page (optional)

\$1,285.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Ray G Thornton 2490 S State Rd Davison, MI 48423-8601	Name of Employer Mott Community College	Date (month, day, year) 10/8/00	Amount of Each Receipt this Period \$100.00
	Occupation Administrator Aggregate Year-to-Date > \$ 300.00	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
B. Full Name, Mailing Address and ZIP Code G Marie Swanson 5161 Gallagher Rd Whitmore Lake, MI 48189-9379	Name of Employer Michigan State University Cancer Center	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$50.00
	Occupation Professor Aggregate Year-to-Date > \$ 400.00	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
C. Full Name, Mailing Address and ZIP Code David Chivas PO Box 3745 28560 Van Dyke Ave Centerline, MI 48015-0746	Name of Employer Ford Funeral Home	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$500.00
	Occupation Funeral Director Aggregate Year-to-Date > \$ 2,000.00	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
D. Full Name, Mailing Address and ZIP Code Eugene Dawber 23272 Longacre Ct Farmington, MI 48335	Name of Employer (blank)	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired Aggregate Year-to-Date > \$ 275.00	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
E. Full Name, Mailing Address and ZIP Code Patrick Joe Dolan 32262 Ruehle Dr Warren, MI 48093-3962	Name of Employer AFGE Local 1058	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$100.00
	Occupation President Aggregate Year-to-Date > \$ 775.00	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
F. Full Name, Mailing Address and ZIP Code Patrick Joe Dolan 32262 Ruehle Dr Warren, MI 48093-3962	Name of Employer AFGE Local 1058	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
	Occupation President Aggregate Year-to-Date > \$ 775.00	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	
G. Full Name, Mailing Address and ZIP Code George H Weller 423 Clifton Blvd East Lansing, MI 48823-3263	Name of Employer State of Michigan Attorney General	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$50.00
	Occupation Assistant Attorney General Aggregate Year-to-Date > \$ 450.00	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	

SUBTOTAL of Receipts This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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 committees.

NAME OF COMMITTEE (in Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Ellen Parrott 4806 Terry Ln Hale, MI 48739-9195		10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$380.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frances A. Hancock 34855 John Hawk St Westland, MI 48165-3517		10/6/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$300.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary L. Stoolmiller 6143 Walker Dr Troy, MI 48098-1360		10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$400.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pamela Rhodes 1810 E Republican St #A Seattle, WA 98112-0000	Rhodes Ragen & Smith	10/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Artistic Director	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jo Jacobs 732 Garland Ave Kalamazoo, MI 49008-2469		10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Hall Green 3655 Tuxedo Rd Atlanta, GA 30305	Self-employed	10/10/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	Aggregate Year-to-Date > \$	\$450.00

SUBTOTAL of Receipts This Page (optional) \$1,625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Anderson 71 Foreside Rd Falmouth, ME 04105	Self-employed	10/4/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Environmentalist	Aggregate Year-to-Date > \$	\$1,500.00
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Howard C Poulter 4375 Bridgeview Dr Oakland, CA 94602-1910	Name of Employer	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code John A Scherlin 510 Andover Drive Burbank, CA 91504-3905	Name of Employer Self-employed	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$650.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period MEMO \$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Diane B Drayson 3750 Tremont Ln Ann Arbor, MI 48105-3023	Name of Employer Self-employed	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychotherapist	Aggregate Year-to-Date > \$	\$550.00

SUBTOTAL of Receipts This Page (optional)

\$1,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **63** OF **179**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00944479

A. Full Name, Mailing Address and ZIP Code Diana B Drayson 3750 Tremont Ln Ann Arbor, MI 48105-3023 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Psychotherapist Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$550.00	Amount of Each Receipt This Period \$50.00
B. Full Name, Mailing Address and ZIP Code Thomas J Wernetle 759 Ionia Rd Portland, MI 48875 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Army National Guard Electronics Occupation Callibrator Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$390.00	Amount of Each Receipt This Period \$75.00
C. Full Name, Mailing Address and ZIP Code Saul Saulson 26662 Scenic Hwy Franklin, MI 48025 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Frank W Kerr Chemical Company Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00 \$1,250.00	Amount of Each Receipt This Period \$250.00
D. Full Name, Mailing Address and ZIP Code Marilyn McKinney 35564 Knight Dr Farmington Hills, MI 48331-3523 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Michigan Occupation Associate Director Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$850.00	Amount of Each Receipt This Period \$100.00
E. Full Name, Mailing Address and ZIP Code Marilyn McKinney 35564 Knight Dr Farmington Hills, MI 48331-3523 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Michigan Occupation Associate Director Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 \$850.00	Amount of Each Receipt This Period \$75.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduitt total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period MEMO \$100.00
G. Full Name, Mailing Address and ZIP Code Edith B McCargar 3591 Glenn Dr SE Grand Rapids, MI 49546-2113 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$300.00	Amount of Each Receipt This Period \$50.00

SUBTOTAL of Receipts This Page (optional) **\$600.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **64** OF **179**
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Karen Piper 25215 Rutledge Crossing Farmington, MI 48335	Bodman Longley & Dahling	10/7/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lois Pincus Cohn 4685 Kiftsgate Bend Bloomfield Hills, MI 48302-2334	Self-employed	10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Art Dealer	Aggregate Year-to-Date > \$	\$400.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Diane Post 35 Corte Alegre Greenbrae, CA 94904		10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$450.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution bookmarked through this org.	10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Nile Harper 2628 Seminole St Ann Arbor, MI 48108		10/4/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Linda J Benedict 1820 Snyder Rd East Lansing, MI 48823-3782	Kreder & Associates	10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Legislative Consultant	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jack A Blosser 628 Perry Creek Dr Grand Blanc, MI 48439-8709	Omni Enterprises Inc	10/7/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$425.00

SUBTOTAL of Receipts This Page (optional) **\$1,500.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Patricia M Cahill 2931 Birch Hollow Dr Ann Arbor, MI 48106-2301		Name of Employer Willow Run Community Schools	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Psychologist	Aggregate Year-to-Date > \$ \$225.00	
B. Full Name, Mailing Address and ZIP Code Katherine E Kurtz 11600 Algonquin Pinckney, MI 48169		Name of Employer University of Michigan	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Fundraiser	Aggregate Year-to-Date > \$ \$450.00	
C. Full Name, Mailing Address and ZIP Code Lila Silverman 4054 Cranbrook Ct Bloomfield Hills, MI 48301-1714		Name of Employer	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Homemaker	Aggregate Year-to-Date > \$ \$1,650.00	
D. Full Name, Mailing Address and ZIP Code James E. Brandenburg 4955 N Gregory Rd Fowlerville, MI 48836		Name of Employer Pinckney Community Schools	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Teacher	Aggregate Year-to-Date > \$ \$295.00	
E. Full Name, Mailing Address and ZIP Code MDVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709		Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Conduit total: \$14,804.00	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Serena Connelly 2981 Phyllis Ln Dallas, TX 75234		Name of Employer AIDS Interfaith Network	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Social Worker	Aggregate Year-to-Date > \$ \$350.00	
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005		Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Conduit total: \$118,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Naderah Hariri 1898 Carla Ridge Dr Beverly Hills, CA 90210 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Comnet Inc Occupation Businessman Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Alfred E Knobler 301 W 57th St New York, NY 10019 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Pilgrim Glass Corp Occupation CEO Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code John H Kuitert 1331 S Columbia PO Box 896 Seaside, OR 97138 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$35.00
D. Full Name, Mailing Address and ZIP Code John H Kuitert 1331 S Columbia PO Box 896 Seaside, OR 97138 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and ZIP Code Penelope N Baller 1324 Joliet Pl Detroit, MI 48207-2834 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and ZIP Code Marjorie Randolph 2175 Vista Del Mar St Los Angeles, CA 90068 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Walt Disney Studio Occupation Senior Vice President Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$500.00

SUBTOTAL of Receipts This Page (optional)	\$1,710.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **87** OF **179**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate CDD344473

A. Full Name, Mailing Address and ZIP Code Emma Jane Conklin M.D. 2271 Golfview Dr #103 Troy, MI 48064-3913 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Henry Ford Hospital Occupation Physician Aggregate Year-to-Date > \$ \$400.00	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Glen M Skar 28 Cutler Street Morristown, NJ 07960 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bellcore Occupation Software Engineer Aggregate Year-to-Date > \$ \$900.00	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$300.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$ \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$300.00
D. Full Name, Mailing Address and ZIP Code Steven Podell 17 Commonwealth Ave San Francisco, CA 94118-2015 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Engineer Aggregate Year-to-Date > \$ \$	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$ \$	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period MEMO \$1,000.00
F. Full Name, Mailing Address and ZIP Code Frances P Blatnik 1575 Mansfield Birmingham, MI 48009 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Troy Public Schools Occupation Teacher Aggregate Year-to-Date > \$ \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and ZIP Code Charles M Clay 7136 Fox Hunt Rd Charlotte, NC 28212 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$ \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$150.00

SUBTOTAL of Receipts This Page (optional)

\$1,575.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 66 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David R Kitchen 4161 Lakewood Dr Waterford, MI 48329		10/13/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,800.00
B. Full Name, Mailing Address and ZIP Code Linda M Atkinson 805 Railroad Ave Channing, MI 49615	Name of Employer Philo Atkinson White Stephens & Wright	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$83.75
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$753.75
C. Full Name, Mailing Address and ZIP Code Elizabeth Peelle 130 Oklahoma Ave Oak Ridge, TN 37890-0000	Name of Employer University of Tennessee	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Researcher	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Ruth W Rosen 5 Mt Hood Ct San Rafael, CA 94903	Name of Employer County of Marin	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Kris Schwenkmeier 300 N Sepulveda #205D El Segundo, CA 90245	Name of Employer Gordon & Schwenkmeier Inc	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Telemarketer	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

\$1,233.75

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 69 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt this Period MEMO \$250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Tom Small 2502 Waite Kalamazoo, MI 49008-2210</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/14/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Greg Muris 1816 Pageant Way Holt, MI 48842</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Morris Gunn Associates Occupation Management Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/16/00</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Marilyn Brown 157 Goya Road Portola Valley, CA 94028-0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Gail Mondry 31098 Oakleaf Ln Franklin, MI 48025-1262</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Franklin Raquet Club Occupation Fitness Director Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/16/00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Stanley D Solvick 30816 Hunters Drive #1 Farmington Hills, MI 48334</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired/Professor Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>

SUBTOTAL of Receipts This Page (optional) **\$1,700.00**

TOTAL This Period (last page this line number only) **\$1,700.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 70 OF 179

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Stabenow for Senate C00944473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James A Nicholls 630 Lans Way Ann Arbor, MI 48103-0000		10/7/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$550.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jean James 1101 Kirkwood Ave Iowa City, IA 52240		10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$375.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul J Blizman 28700 Hemdonwood Dr Farmington Hills, MI 48334-5235	Self-employed	10/10/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$400.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Norman B Cobb 4101 Lakeridge Dr Holland, MI 49424	Allen Extruders	10/7/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Deborah Farahnik 105 Monovale Dr Beverly Hills, CA 90210		10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Janet Jeffries 500 Huntington Ann Arbor, MI 48104-4620		10/12/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Amy Pearl 878 Ames Ct Palo Alto, CA 94303	Sun Microsystems	10/18/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineering Manager	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional) \$2,175.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE **71** OF **179**
FOR LINE NUMBER **11(a)(ii)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leonor E McAlpine 130 Parkhurst W Detroit, MI 48203		10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles P Gresham 1249 Kearney St San Francisco, CA 94133-1803		10/7/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,350.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clarence Lewis 29236 Fieldstone Dr Farmington Hills, MI 48334	Bank One	10/13/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Manager	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth E Munzel 12075 W Nine Mile Rd S Lyon, MI 48178		10/6/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$1,250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy J Diehl 1300 E Lafayette #1206 Detroit, MI 48207	Wayne County	10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Giselle Jurkanin 483 El Alamo Danville, CA 94528	Little & Sepulo	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$900.00

SUBTOTAL of Receipts This Page (optional)

\$1,800.00

TOTAL This Period (last page (1st line number only))

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 72 OF 179

FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$118,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Carolyn L Shine 4339 Westover Place NW Washington, DC 20016	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Rhoda A M Welsz 500 East Maryhyn Ave #A1 State College, PA 16801-6269	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Gayle Lycos 2356 Thistlestone Dr Grand Rapids, MI 49505-6318	Name of Employer Michigan Education Association Occupation Unserv Director Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Mary T Anderson 6605 Westland Dr Knoxville, TN 37918-8226	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Thaddeus Regulinski 4624 North Paseo Pllquito Tucson, AZ 85750	Name of Employer Self-employed Occupation Scientist Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$1,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 73 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert West 305 Nautilus Dr Madison, WI 53705	University of Wisconsin	10/6/00	\$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert West 305 Nautilus Dr Madison, WI 53705	University of Wisconsin	10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/12/00	MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/6/00	MEMO \$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George L Griffiths 1790 Schoolcraft St Holt, MI 48842-1724		10/11/00	\$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$205.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George L Griffiths 1790 Schoolcraft St Holt, MI 48842-1724		10/12/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$205.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol Bernstein Ferry 5042 Theall Rd Rye, NY 10580		10/5/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$1,015.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 74 OF 179

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code AWF Huggins 64 March Rd Shelburne Falls, MA	Name of Employer Parlance Corp Occupation Scientist	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709	Name of Employer Note: Above Contribution Occupation Conduit total: \$14,804.00	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Jean L Foss 5927 W Hillcrest Drive La Crosse, WI 54601-0000	Name of Employer Occupation Retired	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Jean L Foss 5927 W Hillcrest Drive La Crosse, WI 54601-0000	Name of Employer Occupation Retired	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Suzanne E Schwartz 1117 S Emerson St Arlington, VA 22204-3223	Name of Employer Environmental Protection Agency Occupation Manager	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 350.00	
F. Full Name, Mailing Address and ZIP Code Mildred S Hedrick 2135 Frederick Kalamazoo, MI 49008	Name of Employer Occupation Retired	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 275.00	
G. Full Name, Mailing Address and ZIP Code Melvin M Schuman 7815 Love Rd Benzonia, MI 49616	Name of Employer Occupation Retired	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)	\$475.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 75 OF 179

FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code Matthew Koll 6812 Nevis Rd Bethesda, MD 20817	Name of Employer America Online	Date (month, day, year) 10/11/00	Amount of Each Receipt This Period \$1,000.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Fellow	Aggregate Year-to-Date > \$ 1,000.00
B. Full Name, Mailing Address and ZIP Code MOVEON ORG PAD P.O. Box 9063 Berkeley, CA 94709		Name of Employer Note: Above Contribution earmarked through this org. 10/11/00 Amount of Each Receipt This Period MEMO \$1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Marion Morgan 76 Loma Vista Dr Los Alamos, NM 87644-3090		Name of Employer 10/18/00 Amount of Each Receipt This Period \$25.00 *	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired Aggregate Year-to-Date > \$ 225.00	
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005		Name of Employer Note: Above Contribution earmarked through this org. 10/18/00 Amount of Each Receipt This Period MEMO \$25.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Lynne Martinez PO Box 1017B Lansing, MI 48901		Name of Employer MI House of Representatives 10/10/00 Amount of Each Receipt This Period \$100.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation State Representative Aggregate Year-to-Date > \$ 275.00	
F. Full Name, Mailing Address and ZIP Code Richard L Frank 8729 Michaels Dr Bethesda, MD 20817		Name of Employer Olsson Frank & Weeden 10/6/00 Amount of Each Receipt This Period \$200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code E.J Willits 2525 Ocean Blvd #6B Corona Del Mar, CA 92625		Name of Employer 10/18/00 Amount of Each Receipt This Period \$1,000.00 *	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired Aggregate Year-to-Date > \$ 1,050.00	

SUBTOTAL of Receipts This Page (optional) **\$2,325.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 76 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

StateNow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709	Note: Above Contribution earmarked through this org.	10/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code Marie C Wilson 5 East 22nd St #29-D New York, NY 10010	Ms Foundation for Women	10/10/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President Aggregate Year-to-Date > \$	\$400.00	
C. Full Name, Mailing Address and ZIP Code Beverly Barringer 18884 80th Ave Pt 2 Coopersville, MI 49404-9405		10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	\$500.00	
D. Full Name, Mailing Address and ZIP Code Beverly Barringer 18884 80th Ave Pt 2 Coopersville, MI 49404-9405		10/10/00	\$26.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	\$500.00	
E. Full Name, Mailing Address and ZIP Code Pamela Stegink 1221 Allerton Ave SE Grand Rapids, MI 49506	Planned Parenthood Centers W MI	10/14/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Public Relations Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code Hooshang Namvar 11940 San Vicente Blvd Los Angeles, CA 90049	Namco Capital Group	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code Deborah Felder-Smith 6890 Corrigan Dr Brighton, MI 48116-8852	Women's Resource Center	10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director Aggregate Year-to-Date > \$	\$250.00	

SUBTOTAL of Receipts This Page (optional)

\$1,560.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary W Reilly 4920 Birch Ln Dexter, MI 48130-9544	Natl Senior Citizens Education & Research Ctr	10/13/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Field Representative	Aggregate Year-to-Date > \$	\$500.00
Alice R Sigelman The Chrysler Center 666 3rd Ave 29th Flr New York, NY 10017	W R Family Associates	10/12/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive	Aggregate Year-to-Date > \$	\$1,000.00
Michael F Fink 3439 Brae Burn Dr Huntingdon Valley, PA 19006	Lockheed Martin Corporation	10/3/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$	\$1,100.00
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/3/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$118,979.00	Aggregate Year-to-Date > \$	
Kathryn Hall 2696 Dallas Pwky #300 Frisco, TX 75034	US Government	10/8/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Ambassador	Aggregate Year-to-Date > \$	\$1,000.00
Jack Carl 345 Lincolnwood Rd Highland Park, IL 60035		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$400.00
Gayle Mayo 4305 Wyandotte Dr Indianapolis, IN 46220	Indiana Municipal Power Agency	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Engineer	Aggregate Year-to-Date > \$	\$350.00

SUBTOTAL of Receipts This Page (optional) \$2,320.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(ii)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00944473

A. Full Name, Mailing Address and ZIP Code EMILY's List 605 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Jamie Shaffer 17814 28th Ave SE Bothell, WA 98012	Name of Employer Chronology Corporation Occupation Engineer Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Lenore Satterfield 44 Doranne Ct Smyrna, GA 30080	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Sharran A Moore 698 Jaywood Dr East Lansing, MI 48823	Name of Employer Michigan Department of State Occupation Analyst Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Ray McClain 1600 Homelam Rd Mt Pleasant, SC 29464	Name of Employer Self-employed Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code E Jean Werts 285 McCoy Ave Worthington, OH 43085	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$760.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E Jean Werts 285 McCoy Ave Worthington, OH 43085		10/16/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$750.00
B. Full Name, Mailing Address and ZIP Code Sara Rutherford Nichols 1824 Old Ranch Rd Los Angeles, CA 90049		10/4/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$450.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code John D Hanaknecht 21325 St Francis Farmington, MI 48338	Name of Employer University of Detroit Jesuit High School & Academy	Date (month, day, year) 10/8/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director of Technology	Aggregate Year-to-Date > \$	\$300.00
E. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9068 Berkeley, CA 94709	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/8/00	Amount of Each Receipt this Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$14,804.00	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Elizabeth Dunn 27 Walker St Cambridge, MA 02138-2412	Name of Employer Souhegan Wood Products Inc	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$	\$475.00
G. Full Name, Mailing Address and ZIP Code Elizabeth Dunn 27 Walker St Cambridge, MA 02138-2412	Name of Employer Souhegan Wood Products Inc	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$60.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$	\$475.00

SUBTOTAL of Receipts This Page (optional) \$775.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00944479

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nina Auerbach 1810 S Rittenhouse Sq #1706-1707 Philadelphia, PA 19103-0000	University of Pennsylvania	10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Professor Aggregate Year-to-Date > \$		\$1,400.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher Simmons 709 E Forrest Ave Ypsilanti, MI 48198	City of Ypsilanti	10/15/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Solid Waste Department Aggregate Year-to-Date > \$		\$225.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margaret Bubolz 922 Michigan East Lansing, MI 48823-3003		10/10/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$		\$575.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Diane Wohl 141 Heather Ln Mill Neck, NY 11785	Information Requested	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Information Requested Aggregate Year-to-Date > \$		\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy A Kurrie 12713 Payton St Detroit, MI 48224-1003		10/4/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$		\$225.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elsie Bleimiller 1235 Luptons Point Rd Matituck, NY 11952-2251		10/16/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$		\$550.00

SUBTOTAL of Receipts This Page (optional)

\$1,725.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elsie Bleimiller 1235 Luptona Point Rd Mattituck, NY 11952-2251		10/5/00	\$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$550.00
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduct total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Nancy McDonald 1317 Richards Alley Wilmington, DE 19806-3167	Name of Employer Anderson Consulting	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Management Consulting	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Maxine L Berman 7150 Riverstone Rd West Bloomfield, MI 48322	Name of Employer Self-employed	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$325.00
E. Full Name, Mailing Address and ZIP Code Phyllis Segal 2901 Sunset Houston, TX 77005	Name of Employer Self-employed	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Photographer	Aggregate Year-to-Date > \$	\$683.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduct total: \$116,979.00	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Anoxie Apigian 5959 Rosella Dearborn Heights, MI 48127	Name of Employer Noraratesija Nichola	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$2,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Matthew Grover 3000 Connecticut Ave NW #305 Washington, DC 20008 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Kirkland & Ellis	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$21.00
	Occupation Paralegal Aggregate Year-to-Date > \$ 210.00		
B. Full Name, Mailing Address and ZIP Code Kathleen A Foster 857 Wildemere St Mason, MI 48854-1780 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Supreme Court	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$25.00
	Occupation Commissioner Aggregate Year-to-Date > \$ 245.00		
C. Full Name, Mailing Address and ZIP Code Bonnie Aaron Levin 204 N Glenroy Pl Los Angeles, CA 90049 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
	Occupation Community Activist Aggregate Year-to-Date > \$ 700.00		
D. Full Name, Mailing Address and ZIP Code Karel L Rogers 10895 96th Ave West Olive, MI 49460 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Grand Valley State University	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$50.00
	Occupation Professor Aggregate Year-to-Date > \$ 225.00		
E. Full Name, Mailing Address and ZIP Code James Giltos 27947 Groesbeck Roseville, MI 48066 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer National Money Island	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Owner Aggregate Year-to-Date > \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Robert J Fetzer 2900 Ross Park Blvd Detroit, MI 48216-1217 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wellness House of Michigan	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
	Occupation Executive Director Aggregate Year-to-Date > \$ 386.60		
G. Full Name, Mailing Address and ZIP Code Claude Leach PO Box 997 Lake Charles, LA 70602 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Farmer Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) \$2,298.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marcia Meisner 25040 Roycourt Huntington Woods, MI 48070-1713	Detroit Receiving Hospital	10/13/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Registered Nurse	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert E. Wollack 22312 Lancaster Ct Novi, MI 48374-3973	Wolverine Human Services	10/16/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$	\$750.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ann Marie E. Ernst 4850 Lakeshore Rd Fort Gratiot, MI 48059	Self-employed	10/16/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Anesthesiologist	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Dilley 330 East Fulton Rd Grand Rapids, MI 49503	Dilley and Rominger	10/12/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$2,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Susan Winshall 19543 Riverside Dr Beverly Hills, MI 48025	Susan Winshall and Associates	10/14/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert C Davis 11503 Wendover Ln Houston, TX 77024	Davis Hamilton Jackson & Associates	10/13/00	\$260.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William M Clapherty 447 Nantasket Ave Hull, MA 02045	Boston University	10/6/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Special Assistant to the Presi	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

\$3,550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roberta Dixon 30111 Rainbow Hills Golden, CO 80401 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date > \$ 500.00	10/6/00	\$500.00
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Note: Above Contribution earmarked through this org. Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	10/6/00	\$500.00 MEMO
C. Full Name, Mailing Address and ZIP Code Mary Lou Butcher 3864 Vista Lane Orchard Lake, MI 48323 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Casey Butcher Ventures Consultant Aggregate Year-to-Date > \$ 500.00	10/14/00	\$500.00
D. Full Name, Mailing Address and ZIP Code Helen W Milliken 6103 Peninsula Dr Traverse City, MI 49686-1913 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date > \$ 250.00	10/13/00	\$50.00
E. Full Name, Mailing Address and ZIP Code Mary McDowell 16402 Graven Hill Dr Spring, TX 77379 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Compaq Computer VP Marketing Aggregate Year-to-Date > \$ 250.00	10/4/00	\$250.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Note: Above Contribution earmarked through this org. Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	10/4/00	\$250.00 MEMO
G. Full Name, Mailing Address and ZIP Code Kathryn L. Beard 33321 Mill Race Cir Westland, MI 48185-1488 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Wayne County Board of Commissioners 12th District Commissioner Aggregate Year-to-Date > \$ 450.00	10/10/00	\$50.00

SUBTOTAL of Receipts This Page (optional)

\$1,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **85** OF **179**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kathryn L. Beard 33321 Mill Race Cir Westland, MI 48185-1486	Wayne County Board of Commissioners 12th District	10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Commissioner	Aggregate Year-to-Date > \$	\$450.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Daniel T O'Brien 11420 Delmar Dr Fenton, MI 48430	General Motors	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Machine Repairman	Aggregate Year-to-Date > \$	\$450.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jolyn E Vita 15346 Catalina Way Holly, MI 48442-1104		10/5/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$220.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Norman H Rosen 75 Harlan Bloomfield Hills, MI 48304	Erich Rosen & Bartnick	10/7/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Laura R McNeill 268 The South Chace NE Sandy Springs, GA 30328-4260	Coldwell Realtors	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Realtor	Aggregate Year-to-Date > \$	\$400.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Quintin E Primo III 94 W County Line Rd Barrington, IL 60010	Capri Capitol	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Advisor	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Kelly G Keenan PO Box 20262 Lansing, MI 48901-0862	State of Michigan	10/18/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$2,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code Oliver W Hayes 3717 Fairhills Dr Okemos, MI 48864		Name of Employer MSU Internal Medicine Department	Date (month, day, year) 10/14/00	Amount of Each Receipt This Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Chairperson/Physician	Aggregate Year-to-Date > \$	\$450.00
B. Full Name, Mailing Address and ZIP Code Fern B Bruner 9621 W Rimrock Dr Peoria, AZ 85382		Name of Employer	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period \$100.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005		Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Ann Kheder 37573 McKenzie Ct Farmington Hills, MI 48331-3523		Name of Employer Butzel Long	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Legal Secretary	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Isabel Sam-Vargas 275 Beacon St San Francisco, CA 94131-2629		Name of Employer SAM Technology Inc	Date (month, day, year) 10/11/00	Amount of Each Receipt This Period \$250.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Vice President	Aggregate Year-to-Date > \$	\$250.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005		Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/11/00	Amount of Each Receipt This Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Camille Kurtz 2401 Calvert St NW #902 Washington, DC 20008-3343		Name of Employer Self-employed	Date (month, day, year) 10/9/00	Amount of Each Receipt This Period \$90.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant	Aggregate Year-to-Date > \$	\$230.00

SUBTOTAL of Receipts This Page (optional)

\$1,580.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Garnille Kurtz 2401 Calvert St NW #902 Washington, DC 20008-3343	Self-employed Occupation Consultant	10/11/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$230.00	
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/9/00	Amount of Each Receipt this Period MEMO \$30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period MEMO \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code Charlotte Ferencz 719 Maiden Choice Lane BR #301 Catonsville, MD 21228	Name of Employer Occupation Retired	Date (month, day, year) 10/6/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$300.00	
E. Full Name, Mailing Address and ZIP Code Thomas E. Decker 2549 Howerton Ct Charlotte, NC 28270	Name of Employer Self-employed Occupation Engineer	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code Mary Jane Meyer 4430 Exeter Drive #3D6M PO Box 8754 Longboat Key, FL 34228	Name of Employer Occupation Retired	Date (month, day, year) 10/7/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> PRIMARY <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$300.00	
G. Full Name, Mailing Address and ZIP Code Folke A Boman 5457 Glna Dr Swartz Creek, MI 48473-8829	Name of Employer Swartz Creek Schools Occupation Teacher	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$300.00	

SUBTOTAL of Receipts This Page (optional) \$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Slabenow for Senate C0034473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred A Meyer Jr 4317 Castleton Ct Muncie, IN 47304	Bell State University	10/6/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$600.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709	Note: Above Contribution earmarked through this org.	10/6/00	MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$14,804.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jane Condon 98 Dlose Road Greenwich, CT 06831	Self-employed	10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Comedian	Aggregate Year-to-Date > \$	\$350.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 905 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$118,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda Hartig 180 Otter Rock Greenwich, CT 06830-0000		10/17/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$450.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 905 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$118,979.00	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
Christine E Crippen 7422 Leelanau Box A4 Gaylord, MI 49735		10/3/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Deborah A Sorondo 21 Mountain View Ave Mill Valley, CA 94941</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sierra Club</p> <p>Occupation Chief Operating Officer</p> <p>Aggregate Year-to-Date > \$ \$350.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Elizabeth Swindler 706 S Silver Ln Dearborn, MI 48124</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Aggregate Year-to-Date > \$ \$250.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Marilyn Clemente 104 Wallacks Point Stamford, CT 06902</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Artist</p> <p>Aggregate Year-to-Date > \$ \$250.00</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution eemarked through this org.</p> <p>Occupation Conduct total: \$116,978.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period MEMO \$250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Charles M Hall 2833 Eagle Dr Rochester, MI 48309</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer General Dynamics</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ \$500.00</p>	<p>Date (month, day, year) 10/8/00</p>	<p>Amount of Each Receipt This Period \$500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Joyce S Dusenberry 278 Ruby Street Laguna Beach, CA 92651</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ \$300.00</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution eemarked through this org.</p> <p>Occupation Conduct total: \$116,978.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt This Period MEMO \$100.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Matthew D Davis MD 3100 Lake Mendota Dr #706 Madison, WI 53705-1462</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer University of Wisconsin</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ \$400.00</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period \$200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$16,796.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period MEMO \$200.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Rita Glasman 5701 SW 107th St Miami, FL 33156</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Public Relations</p> <p>Aggregate Year-to-Date > \$ \$250.00</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Neil A Holtzman MD 2009 South Rd Baltimore, MD 21209</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer John Hopkins University</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ \$700.00</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$16,796.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt This Period MEMO \$250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Corrinne Harper 24296 Roxana Ave Eastpointe, MI 48021-1336</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Fairway Jewelers</p> <p>Occupation Salesperson</p> <p>Aggregate Year-to-Date > \$ \$250.00</p>	<p>Date (month, day, year) 10/7/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Madelyn Owen 200 W Potter Ave Lansing, MI 48910-7439</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ \$400.00</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>

SUBTOTAL of Receipts This Page (optional)

\$900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(A)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sheila E Morgan 5478 Sugar Bush Ln Flint, MI 48532-2237		10/16/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ethel Bishop 3424 Byrd Ave Allentown, PA 18103		10/17/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ethel Bishop 3424 Byrd Ave Allentown, PA 18103		10/7/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$600.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 905 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Christine A Provost 952 Brookwood Birmingham, MI 48009	Capital Cities ABC	10/2/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Sales	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Max E Chiddix 2324 Plamigan Dr #3 Walnut Creek, CA 94595-3509		10/7/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$400.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Berandina T Smith 600 E Cathedral Road #K003 Philadelphia, PA 19128		10/5/00	\$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$275.00

SUBTOTAL of Receipts This Page (optional) **\$1,575.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joy Mankoff 22 Lakeside Park Dallas, TX 75225		10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Volunteer	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary O Boyle 13605 Shaker Blvd Cleveland, OH 44120	Self-employed	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant	Aggregate Year-to-Date > \$	\$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Note: Above Contribution earmarked through this org.	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$16,786.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Loud 6511 Marcol Rd Cleveland, OH 44124		10/11/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/11/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00	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
A Stuart Hansch 5018 Milward Dr Madison, WI 53711	Self-employed	10/18/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Film Producer	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$1,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **99** OF **179**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduil total: \$18,796.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$500.00
B. Full Name, Mailing Address and ZIP Code Norman Abeles 953 Rosewood Ave East Lansing, MI 48823-2943 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan State University Occupation Professor Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$15.00
C. Full Name, Mailing Address and ZIP Code Earline Grice 115B Ridgeview Ave Dayton, OH 45409 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and ZIP Code Jane Rauch Kitchan 1735 Lenhill Ct Petoskey, MI 49770-8726 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Elmer B Glicksman 1625 Vassar Dr Lansing, MI 48912 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cooley Law School Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Allison C Horton 308 Ferguson St Lansing, MI 48912-6047 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sierra Club Occupation Director Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and ZIP Code Alexis S Blizman 1984 Traver Rd #204 Ann Arbor, MI 48105 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Snyder Management Occupation Apartment Manager Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional) **\$940.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(ii)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Alexis S Bilzman 1964 Traver Rd #204 Ann Arbor, MI 48105 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Snyder Management	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$20.00
	Occupation Apartment Manager Aggregate Year-to-Date > \$	\$600.00	
B. Full Name, Mailing Address and ZIP Code Alex Brodrick 23401 Duchess Ct Novi, MI 48375 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Volunteers of America/Michigan	Date (month, day, year) 10/3/00	Amount of Each Receipt This Period \$50.00
	Occupation President/CEO Aggregate Year-to-Date > \$	\$275.00	
C. Full Name, Mailing Address and ZIP Code Diana L Reische 20 Silvermine Woods Willton, CT 06897-0000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Free Lance	Date (month, day, year) 10/7/00	Amount of Each Receipt This Period \$100.00
	Occupation Writer Aggregate Year-to-Date > \$	\$300.00	
D. Full Name, Mailing Address and ZIP Code David G. Ong 524 Overbrook Rd Bloomfield Hills, MI 48304-2377 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Acquest Realty Advisors Inc	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period \$1,000.00
	Occupation Real Estate Advisor Aggregate Year-to-Date > \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Olivia M Leale 1233 Sherrandolph Drive E Seattle, WA 98112 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Inmark Int'l Marketing	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$250.00
	Occupation Food Imports Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt This Period MEMO \$250.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	\$	
G. Full Name, Mailing Address and ZIP Code Elizabeth Kidd 1619 N Blvd Houston, TX 77006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer HISD	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$250.00
	Occupation Substitute Teacher Aggregate Year-to-Date > \$	\$500.00	

SUBTOTAL of Receipts This Page (optional)

\$1,670.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$250.00
B. Full Name, Mailing Address and ZIP Code Elizabeth M Lorenzl 4386 Scott Carpenter Dr Jackson, MI 49201-9005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer MESSA Occupation Benefits Director Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code Walter R Mabry 878 Ellair Pl Grosse Pointe Park, MI 48230 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer MI Regional Council of Carpenters Occupation Exec Sec/Treasurer Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Ann Baker 219 Pacific Solana Beach, CA 92075 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/2/00	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/2/00	Amount of Each Receipt this Period MEMO \$250.00
F. Full Name, Mailing Address and ZIP Code Jane P Sandefur PO Box 211 Cherokee Village, AR 72525 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Edna M Roush 104 E 29th St Holland, MI 49423-9118 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)	\$1,650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduct total: \$116,979.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Harry L Carr Jr 30 Joseph St Kingston, MA 02364</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Harbor Managing Occupation Consultant Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/9/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Judith Z Keller 454 Craemer Frankenmuth, MI 48734</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Bavarian Inn Lodge Occupation President/Owner Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/7/00</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Edward E Souders 4591 Comanche Dr Okemos, MI 48864-2088</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Panurgy Occupation Owner Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/14/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>E. Full Name, Mailing Address and ZIP Code David Kahan 560 Kirts Blvd #100 Troy, MI 48064-4866</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Realtor Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/7/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Marli Barletta 1015 Spruce Street Winnetka, IL 60093</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The TrendSight Group Occupation Marketing Consultant Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduct total: \$116,979.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt this Period MEMO \$50.00</p>

SUBTOTAL of Receipts This Page (optional) \$475.00

TOTAL This Period (total page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hellen A Harley 1167 N Dye Rd Flint, MI 48532-2051	Self-employed	10/12/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Nurse/Midwife		
	Aggregate Year-to-Date > \$	\$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harriet Capron 5738 E Green Lake Way Seattle, WA 98103-8434	Self-employed	10/8/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer		
	Aggregate Year-to-Date > \$	\$650.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOVEON ORG PAC P.O. Box 9083 Berkeley, CA 94709	Note: Above Contribution earmarked through this org.	10/8/00	MEMO \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$14,804.00		
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda Cury 16145 Fairlane St Livonia, MI 48154	Polk	10/7/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director of IT		
	Aggregate Year-to-Date > \$	\$250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J Chris Uihlein PO Box 23434 Milwaukee, WI 53223	Self-employed	10/6/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Astrologer		
	Aggregate Year-to-Date > \$	\$1,500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kalina Vanden Huevel 340 Riverside Dr #88 New York, NY 10025	The Nation Magazine	10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Editor		
	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/4/00	MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,879.00		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$2,275.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Divyakant B Gandhi 3917 Hemmingway Dr Okemos, MI 48864-2128	Self-employed	10/11/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$350.00
B. Full Name, Mailing Address and ZIP Code Catherine H Ruml PO Box 297 South Strafford, VT 05070	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	10/13/00	\$250.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year)	Amount of Each Receipt this Period MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Conduit total: \$116,979.00	10/13/00	\$250.00
D. Full Name, Mailing Address and ZIP Code Peter F Judge 80 Lyme Rd #34 Hanover, NH 03765-1234	Name of Employer SWEC	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Engineer	10/10/00	\$100.00
E. Full Name, Mailing Address and ZIP Code Deborah Mankoff 3131 Southshire Ave SE East Grand Rapids, MI 49506	Name of Employer Self-employed	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Artist	10/16/00	\$500.00
F. Full Name, Mailing Address and ZIP Code Elaine Bryant 4 Aspen Pl Long Valley, NJ	Name of Employer PSEG	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Manager	10/12/00	\$200.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year)	Amount of Each Receipt this Period MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Conduit total: \$116,979.00	10/12/00	\$200.00

GUSTOTAL of Receipts This Page (optional)

\$1,075.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Slabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Marc Ross 1056 Martin Pl Ann Arbor, MI 48104-3511</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer University of Michigan</p> <p>Occupation Professor</p> <p>Aggregate Year-to-Date > \$ <u>\$1,650.00</u></p>	<p>Date (month, day, year) 10/16/00</p>	<p>Amount of Each Receipt This Period \$200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Marc Ross 1056 Martin Pl Ann Arbor, MI 48104-3511</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer University of Michigan</p> <p>Occupation Professor</p> <p>Aggregate Year-to-Date > \$ <u>\$1,650.00</u></p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Diane Moore B15 Rice St Highland Park, IL 60036-4472</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ <u>\$250.00</u></p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Phyllis Mann 1575 Stone Canyon Rd Los Angeles, CA 90077</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Product Designer</p> <p>Aggregate Year-to-Date > \$ <u>\$250.00</u></p>	<p>Date (month, day, year) 10/9/00</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution garmented through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/9/00</p>	<p>Amount of Each Receipt This Period MEMO \$250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code George D Baker 24209 Country Squire #251 Clinton Township, MI 48035</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ <u>\$225.00</u></p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Jeffrey Leslie Dennis 1370 Shagbark Dr Des Plaines, IL 60018-0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ <u>\$900.00</u></p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$700.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 100 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Catherine Whitney 4 Upland Drive South Nyack, NY 10960	Self-employed	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer		
	Aggregate Year-to-Date > \$	\$300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Roger Hill 5000 Willow Spring Dr Racine, WI 53402	Self-employed	10/11/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$	\$600.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/11/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$118,979.00		
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bennett N Epstein 509 Hanover Rd Wilmington, DE 19809-2826		10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$750.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Delora M Spagnuolo 3621 W Jolly Rd Lansing, MI 48911	Information Requested	10/6/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested		
	Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Youssef Akhtarzad 1426 Wilshire Blvd Santa Monica, CA 90403	Video Audio Center	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner		
	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Emilie Amdt 3130 N 10th St Fresno, CA 93703		10/7/00	\$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$245.00	

SUBTOTAL of Receipts This Page (optional)

\$2,075.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **101** OF **179**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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 names and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Rohde 6125 Oakpark Trl Haslett, MI 48840-8985	Michigan State University	10/6/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda M Anderson 233B Hulett Rd Okemos, MI 48864-2512	Michigan State University	10/10/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$400.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Heyward Robinson 460 Rutherford Ave Redwood City, CA 94061	SRI International	10/18/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date > \$	\$300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOVEON ORG PAC P.O. Box 8063 Berkeley, CA 94708	Note: Above Contribution earmarked through this org.	10/18/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$14,804.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phyllis W Stevens PO Box 85 Sweet Briar, VA 24585		10/7/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$450.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phyllis W Stevens PO Box 85 Sweet Briar, VA 24585		10/17/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$450.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,978.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 102 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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)			
Stabenow for Senate C00344473			
A. Full Name, Mailing Address and ZIP Code Sandra L Kuhn 15300 20 Mile Rd Marshall, MI 49068-9348 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and ZIP Code Gary L Field 2081 N Williamston Rd Williamston, MI 48895 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Loomis Law Firm Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and ZIP Code Robert E Lee Jr 5124 Kester Ave Sherman Oaks, CA 91403 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$60.00
D. Full Name, Mailing Address and ZIP Code Carol B Maurer 161 Austin Dr #19 Burlington, VT 05401 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Writer Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$16,796.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$250.00
F. Full Name, Mailing Address and ZIP Code Jay T Kinn 5888 Locksley Pl Los Angeles, CA 90068 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Warner Bros Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Barbara Mair 24 Spring St Pleasantville, NY 10570 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$1,000.00
SUBTOTAL of Receipts This Page (optional)			\$1,625.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 103 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code June H Pallotini 2860 W Bellevue Rd Leslie, MI 49251-9744	Name of Employer Self-employed Occupation Realtor Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Fran Schulman 900 Palisades #8E Fort Lee, NJ 07024	Name of Employer Fischer Francis Trees & Watt Occupation Investment Analyst Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt This Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Jean C Chabul 4369 Tacoma Blvd Okemos, MI 48864	Name of Employer State of Michigan Occupation Health Administrator Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Wendy Peter Abt 19 Follen Street Cambridge, MA 02138	Name of Employer Kellett Group Occupation Investment Banker Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$260.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period MEMO \$260.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) \$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **104** OF **179**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C0034473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Keith D Zick 627 Fort St Port Huron, MI 48060	Beauchamp Kelly Whipple Zick & Keyes PLLC	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney Aggregate Year-to-Date > \$		\$600.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Alice Paul 29131 Barkley Livonia, MI 48154	The Albrecht Companies	10/13/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Finance Aggregate Year-to-Date > \$		\$225.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jeannette E Holton 2939 Kimmel St Stevensville, MI 49127-1352	Health Systems	10/12/00	\$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager Aggregate Year-to-Date > \$		\$205.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Walter Harsch 1481 Kimberly Ct Grand Blanc, MI 48439-5157		10/12/00	\$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$		\$655.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Betty W Greenberg 164 Hunt Drive Princeton, NJ 08540	Self-employed	10/5/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant Aggregate Year-to-Date > \$		\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marjorie Traub 2760 Vallejo St San Francisco, CA 94123-4815		10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker Aggregate Year-to-Date > \$		\$750.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution as marked through this org.	10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduct total: \$116,979.00 Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$930.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 105 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)			
Stabenow for Senate C00344473			
A. Full Name, Mailing Address and ZIP Code Marie T Racine 6 Robindale Ct Dearborn, MI 48124	Name of Employer Racine & Associates	Date (month, day, year) 10/7/00	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,100.00
B. Full Name, Mailing Address and ZIP Code Leon Farahnik 11111 Santa Monica Blvd #270 Los Angeles, CA 90025	Name of Employer RXI Plastics	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Suzanne T. Zorn 1816 Irving Ave S Minneapolis, MN 55403-0000	Name of Employer Self-employed	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	\$
E. Full Name, Mailing Address and ZIP Code Marie A. Vitale 2395 Grant Dr Ann Arbor, MI 48108	Name of Employer State of Michigan	Date (month, day, year) 10/14/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$425.00
F. Full Name, Mailing Address and ZIP Code Eugene L. Meade 16000 Fern Way Guerneville, CA 95448-9322	Name of Employer	Date (month, day, year) 10/15/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$260.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/15/00	Amount of Each Receipt This Period MEMO \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	\$
SUBTOTAL of Receipts This Page (optional)			\$2,650.00
TOTAL This Period (last page this line number only)			\$

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 108 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anita Mann-Kohl 405 N Foothill Rd Beverly Hills, CA 90210	Anita Mann Productions	10/6/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sarah Flum Heath 1803 Fernald Point Ln Santa Barbara, CA 93108		10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anne Linda Furslenberg 201 Huntington Dr Chapel Hill, NC 27514-2419	University of North Carolina Chapel Hill	10/15/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Professor	Aggregate Year-to-Date > \$	\$300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/15/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$118,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rita S Levy 5385 Bywood Rd Bloomfield Hills, MI 48302		10/13/00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James P Carroll 4601 Leisure Lane Tranton, MI 48183		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John J Kalo 4500 E Court St Burton, MI 48509	Honigman Miller Schwartz	10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$	\$2,000.00

SUBTOTAL of Receipts This Page (optional)

\$3,150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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)

Stabenow for Senate C00844473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David E Schteingart 2971 Hickory Ln Ann Arbor, MI 48104-2840	University of Michigan	10/13/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$		\$300.00
David E Schteingart 2971 Hickory Ln Ann Arbor, MI 48104-2840	University of Michigan	10/15/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$		\$300.00
David E Schteingart 2971 Hickory Ln Ann Arbor, MI 48104-2840	University of Michigan	10/3/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$		\$300.00
Patricia Kingsley 371 Alma Real Dr Pacific Palisades, CA 90272	PMK Enterprises	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$		\$400.00
Patricia Kingsley 371 Alma Real Dr Pacific Palisades, CA 90272	PMK Enterprises	10/7/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$		\$400.00
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution announced through this org.	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$118,979.00 Aggregate Year-to-Date > \$		
Darafyn Brody 2726 Fontaine Trl Holt, MI 48842-9724	Homemaker	10/4/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		\$500.00

SUBTOTAL of Receipts This Page (optional)

\$650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 108 OF 179

FOR LINE NUMBER

Contributions from Individuals/Persons

11(a)(i)

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)

Stabenow for Senate C00944473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Russell McKee 16554 Center Rd East Lansing, MI 48823-9740		10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$558.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Russell McKee 16554 Center Rd East Lansing, MI 48823-9740		10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$558.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kitty O Locker 6772 Thome St Worthington, OH 43085	Ohio State University	10/16/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 16th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/16/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward F Chelian 5719 Bloomfield Glens Dr West Bloomfield, MI 48322-2502	GCS Investment	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner/CEO	Aggregate Year-to-Date > \$	\$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Oliver G Cameron MD 1215 Southwood Ct Ann Arbor, MI 48103-9735	University of Michigan	10/7/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sheldon D Erlich 29201 Telegraph Rd #330 Southfield, MI 48034	Erlich Rosen & Bartnick	10/7/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)	\$850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Evelyn M Fry English 401 Mulberry Ln Walled Lake, MI 48390		Name of Employer Occupation Retired	Date (month, day, year) 10/7/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 255.00		
B. Full Name, Mailing Address and ZIP Code Mary Putney 1405 Journey's End Rd Croton On Hudson, NY 10520		Name of Employer Citigroup	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 800.00		
C. Full Name, Mailing Address and ZIP Code Orit Frenkel 3054 Davenport St, NW Washington, DC 20008		Name of Employer General Electric Co	Date (month, day, year) 10/14/00	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 3250.00		
D. Full Name, Mailing Address and ZIP Code Margot Massey 2536 Bedford Rd Ann Arbor, MI 48104-4135		Name of Employer Self-employed	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code Naomi Paley 101 Central Park West New York, NY 10023		Name of Employer Occupation Retired	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 3350.00		
F. Full Name, Mailing Address and ZIP Code Bruce S Jansifer MD 2634 Pebble Breeze San Antonio, TX 78232		Name of Employer Occupation Retired	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 8900.00		
G. Full Name, Mailing Address and ZIP Code Bruce S Jansifer MD 2634 Pebble Breeze San Antonio, TX 78232		Name of Employer Occupation Retired	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 900.00		

SUBTOTAL of Receipts This Page (optional) _____

\$900.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$100.00
B. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period MEMO \$250.00
C. Full Name, Mailing Address and ZIP Code John M Olson 26210 Harper Ave St Clair Shores, MI 48081 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer JM Olson Corp Occupation Chairman Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Joanne C Spatz 29640 Middlebelt Rd #2604 Farmington Hills, MI 48334 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$40.00
E. Full Name, Mailing Address and ZIP Code Ned Shure 2671 Apple Way Ann Arbor, MI 48104-1801 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Cross Street Investments Occupation Property Investor Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and ZIP Code Harvey S Bronstein 22490 Hallcroft Trl Southfield, MI 48034-5498 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Oakland College Orchard Ridge Campus Occupation Professor Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Harvey S Bronstein 22490 Hallcroft Trl Southfield, MI 48034-5498 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Oakland College Orchard Ridge Campus Occupation Professor Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$15.00

SUBTOTAL of Receipts This Page (optional) \$705.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary E Cynowa 45451 Fielding St Macomb, MI 48042-5436	L'Anse Creuse Public Schools	10/10/00	\$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$	\$245.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary E Cynowa 45451 Fielding St Macomb, MI 48042-5436	L'Anse Creuse Public Schools	10/16/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$	\$245.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Aleta Aslani Styers 301 E 47th Street #10J New York, NY 10017	Self-employed	10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate Sales	Aggregate Year-to-Date > \$	\$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martha Kveran 44/1 Bird Rd Ann Arbor, MI 48103	Information Requested	10/4/00	\$350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$350.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eva Jane R Coombe 8 Corbin Dr Cincinnati, OH 45206-1270		10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JoAnne K Arick 22772 Beech St Dearborn, MI 48120		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$275.00

SUBTOTAL of Receipts This Page (optional) \$815.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Katharine Pillsbury 34 Carver Rd Newton Highlands, MA 02161	Self-employed	10/5/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Photographer		
	Aggregate Year-to-Date > \$	\$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/5/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marianne Williamson 363 St Clair Grosse Pointe, MI 48230	Church of Today	10/9/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Author/Religious Leader		
	Aggregate Year-to-Date > \$	\$900.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary F White 1606 Morton Ave Ann Arbor, MI 48104-4441	University of Michigan	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor		
	Aggregate Year-to-Date > \$	\$400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	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
Priscilla J McMillan 12 Hilliard St Cambridge, MA 02138-1820	Self-employed	10/4/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer		
	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Note: Above Contribution earmarked through this org.	10/4/00	MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$16,798.00		
	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$1,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 113 OF 179
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Molly Tan Hayden 23 Indian Wells Moraga, CA 94556		10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Note: Above Contribution earmarked through this org.	10/4/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$16,796.00		
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rita Zernach 381 Kelburn Rd #213 Deerfield, IL 60015		10/11/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/11/00	MEMO \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Timothy Gill 451 Race St Denver, CO 80206	Quark Inc	10/16/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman/CEO		
	Aggregate Year-to-Date > \$	\$2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Penn Payne 3586 Tuxedo Park NW Atlanta, GA 30305	Information Requested	10/6/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested		
	Aggregate Year-to-Date > \$	\$250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Janel S Schroeder 6944 Lakeshore Ct Farmville, MI 49408-9764		10/5/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$215.00	

SUBTOTAL of Receipts This Page (optional)

\$1,575.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Haasmukh I Patel 1979 Thistlewood Rd Okemos, MI 48864-3721	Self-employed	10/11/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Radiologist Aggregate Year-to-Date > \$		\$250.00
B. Full Name, Mailing Address and ZIP Code Robert E Rossiter Jr 37844 N Laurel Park Dr Livonia, MI 48152-2687	Lear Corporation	10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President/CEO Aggregate Year-to-Date > \$		\$500.00
C. Full Name, Mailing Address and ZIP Code Lois H England 2832 NW Chain Bridge Rd Washington, DC 20016-3406	Information Requested	10/14/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > \$		\$850.00
D. Full Name, Mailing Address and ZIP Code Elizabeth M Ellis 801 Amsterdam Ave NE Atlanta, GA 30306	Information Requested	10/13/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Information Requested Aggregate Year-to-Date > \$		\$250.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution sanctioned through this org.	10/13/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,978.00 Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code Eric Dorn 3810 Edgemont Dr Troy, MI 48064	MI Regional Council of Carpenters	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Carpenter Aggregate Year-to-Date > \$		\$1,000.00
G. Full Name, Mailing Address and ZIP Code Darnell D Ebbing 8 Norwich Rd Pleasant Ridge, MI 48069-1026	Self-employed	10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Author Aggregate Year-to-Date > \$		\$600.00

SUBTOTAL of Receipts This Page (optional)

\$2,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **115** OF **178**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code A B Savage 122 Varner Ct. Midland, MI 48640	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/5/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$710.00	
B. Full Name, Mailing Address and ZIP Code A B Savage 122 Varner Ct. Midland, MI 48640	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/5/00	\$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$710.00	
C. Full Name, Mailing Address and ZIP Code Donald L Herman 3102 Manhattan Ln SE Grand Rapids, MI 49506	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired/Professor	10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$800.00	
D. Full Name, Mailing Address and ZIP Code Dorothy S Staller 5190 Leverett Lane Fayetteville, NY 13068-0000	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/10/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$260.00	
E. Full Name, Mailing Address and ZIP Code Anne P Armstrong 31699 Southview Rd Beverly Hills, MI 48025-1172	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/10/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$475.00	
F. Full Name, Mailing Address and ZIP Code Kay Deaux 20 E 9th St #20E New York, NY 10003	Name of Employer City University of New York	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Professor	10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$800.00	
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution is marked through this org.	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Conduit total: \$116,979.00	10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$810.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 118 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Gene Pokorny 384 Marlborough St Boston, MA 02115-4239</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Cambridge Reports</p> <p>Occupation Market Researcher</p> <p>Aggregate Year-to-Date > \$ <u>300.00</u></p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$18,796.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period MEMO \$200.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Paul G Wanick 2 Forest Lodge Kincheloa, MI 49788</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Ameritech</p> <p>Occupation Telephone Repair Man</p> <p>Aggregate Year-to-Date > \$ <u>600.00</u></p>	<p>Date (month, day, year) 10/14/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Ernst Epstein 420 Edgewood Rd San Mateo, CA 94402</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ <u>300.00</u></p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$18,796.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period MEMO \$300.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Jeffrey Corbin 274 N Stony Point Rd Suttons Bay, MI 49682</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Corbin Design</p> <p>Occupation Designer</p> <p>Aggregate Year-to-Date > \$ <u>250.00</u></p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Geneva Trisworth 589D Golfview Dr Dearborn Heights, MI 48127-23DB</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ <u>340.00</u></p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$20.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$595.00</p>
<p>TOTAL This Period (last page (1)s line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 117 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beverly Nettles-Nickerson 2909 S Cambridge Rd Lansing, MI 48911-1024	District Court	10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation District Judge	Aggregate Year-to-Date > \$	\$225.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert E Debrodt 4812 Whitman Cir Ann Arbor, MI 48103-8774		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,150.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul R. Swanson 607 Shelby #550 Detroit, MI 48226	Swanson and Lyons	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lynne Church B14 A Street SE Washington, DC 20003	Electric Power Supply Association	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	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
Barbara J Gottschalk 22025 Orchard Way Beverly Hills, MI 48025	Seeds of Peace	10/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles S Anderson 5410 Village Green Los Angeles, CA 90016		10/7/00	\$35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$240.00

SUBTOTAL of Receipts This Page (optional)

\$2,410.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 118 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JoAnn Shanahan 731 W Six Mile Creek Rd Henderson, MI 48841		10/5/00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker Aggregate Year-to-Date > \$		\$500.00
B. Full Name, Mailing Address and ZIP Code Dale Randa 121 W Long Lake Rd 3rd Fl Bloomfield Hills, MI 48304	Name of Employer Rankauf Company	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Principal Aggregate Year-to-Date > \$		\$1,000.00
C. Full Name, Mailing Address and ZIP Code Carolyn Phinney 52 Scenic Dr Orinda, CA 94563	Name of Employer	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$		\$400.00
D. Full Name, Mailing Address and ZIP Code Ronald M Yoshiyama 2751 Brentwood Pl Davis, CA 95616-4877	Name of Employer University of California	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Biologist Aggregate Year-to-Date > \$		\$275.00
E. Full Name, Mailing Address and ZIP Code Ronald M Yoshiyama 2751 Brentwood Pl Davis, CA 95616-4877	Name of Employer University of California	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Biologist Aggregate Year-to-Date > \$		\$275.00
F. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$18,796.00 Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code Maryanne Tagney-Jones PO Box 71B Preslon, WA 98050	Name of Employer Self-employed	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Political Consultant Aggregate Year-to-Date > \$		\$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$2,615.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 119 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Cheryl Gregory 4551 Sawgrass Ct Alexandria, VA 22312	Name of Employer EMILY's List Occupation Development Director Aggregate Year-to-Date > \$	Date (month, day, year) 10/9/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	\$250.00	
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/9/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Alice I Wiren 4250 NE 86th St Seattle, WA 98115	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$275.00	
D. Full Name, Mailing Address and ZIP Code Nancy Pitt 10 E Calle De Amistad Tucson, AZ 85716	Name of Employer Self-employed Occupation Writer Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$750.00	
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code John Lyons 230 W End Ave PH B New York, NY 10023	Name of Employer Self-employed Occupation Film Producer Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code Soleyman Cohensadgh 702 N Elm Dr Beverly Hills, CA 90210	Name of Employer Western Dental Occupation Dentist Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
SUBTOTAL of Receipts This Page (optional)			\$2,575.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **120** OF **179**
FOR LINE NUMBER **11(a)(i)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code Michaux Wilkinson 10817 Brewington Rd Richmond, VA 23233-4109 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Virginia	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
	Occupation Research Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code Michaux Wilkinson 10817 Brewington Rd Richmond, VA 23233-4109 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Virginia	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$150.00
	Occupation Research Aggregate Year-to-Date > \$ 250.00		
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period MEMO \$100.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$150.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Ayle E Holmes 94 E Boston Blvd Detroit, MI 48202-1319 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$50.00
	Occupation Retired Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Charles R Perrin 2495 Emerald Lake Dr East Lansing, MI 48823-7256 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$50.00
	Occupation Retired Aggregate Year-to-Date > \$ 550.00		
G. Full Name, Mailing Address and ZIP Code Catherine Lederer 40 Birchwood Lane Hartsdale, NY 10530 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer ICAN Realty Corp	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$500.00
	Occupation Real Estate Broker Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)

\$850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt This Period MEMO \$500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Ruth Lucas 1100 8th St SW #704 Washington, DC 20024-2822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt This Period MEMO \$250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Berenice Hess 3300 Darby Rd #3219 Haverford, PA 19041-1722</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt This Period \$50.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Berenice Hess 3300 Darby Rd #3219 Haverford, PA 19041-1722</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt This Period MEMO \$100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Nancy M Osborne 16726 Cornstock St Livonia, MI 48154-1608</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Taylor Public Schools</p> <p>Occupation Teacher</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt This Period \$25.00</p>

SUBTOTAL of Receipts This Page (optional) \$425.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 122 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Ellen R Malcolm 5060 Linnear Ave Washington, DC 20008-2041 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer EMILY's List	Date (month, day, year) 10/6/00	Amount of Each Receipt This Period \$1,000.00
	Occupation President Aggregate Year-to-Date > \$	\$1,000.00	
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/6/00	Amount of Each Receipt This Period MEMO \$1,000.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Lucile E Belen 610 W Ottawa St #1203 PO Box 14043 Lansing, MI 48933-8001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Belen's Flowers	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$25.00
	Occupation Owner Aggregate Year-to-Date > \$	\$225.00	
D. Full Name, Mailing Address and ZIP Code Robert E Sirdler II 44 Allendale St #506 Jamaica Plain, MA 02130 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/18/00	Amount of Each Receipt This Period \$100.00
	Occupation Retired Aggregate Year-to-Date > \$	\$400.00	
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt This Period MEMO \$100.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code Paul Lieberman 4102 Winterset Ln W Bloomfield, MI 48323-2709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Paul Lieberman	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$68.00
	Occupation Attorney Aggregate Year-to-Date > \$	\$680.00	
G. Full Name, Mailing Address and ZIP Code June Rokoff 30 Graylock Road Wellesley, MA 02481 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/17/00	Amount of Each Receipt This Period \$250.00
	Occupation Management Consultant Aggregate Year-to-Date > \$	\$250.00	

SUBTOTAL of Receipts This Page (optional)

\$1,441.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 123 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt this Period MEMO \$250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Mary M Bechtol 2712 Fairfax Lansing, MI 48910</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer MI St Building & Construction Trades Council</p> <p>Occupation Administrative Assistant</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Glyde K Rodkey Jr PO Box 668 Mount Dora, FL 32758-0668</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Shirley P Fogelberg 25135 Greenbrooke Dr Southfield, MI 48034</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Judith Goldfein 50 E 89th St New York, NY 10128</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Emily's List</p> <p>Occupation Fundraiser</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt this Period MEMO \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Donna Lutke 218 S Martin St McBain, MI 49657-9705</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Michigan Education Association</p> <p>Occupation Lobbyist</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>

SUBTOTAL of Receipts This Page (optional)

\$725.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 124 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donna Lutke 218 S Martin St McBain, MI 49657-9705	Michigan Education Association	10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lobbyist	Aggregate Year-to-Date > \$	\$350.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Claire S Colman MD 2725 Endeleigh Dr Bloomfield Hills, MI 48301	Self-employed	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychiatrist	Aggregate Year-to-Date > \$	\$925.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dave Trainor 38568 Kingsbury Livonia, MI 48154	Danou	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Land Developer	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elaine M Bryant 4030 Oakgrove St Orchard Lake, MI 48323-1560	Oakland County	10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Social Worker	Aggregate Year-to-Date > \$	\$400.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frederick H Townsend 3651 Granger Rd Ortonville, MI 48462		10/5/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$220.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James J Chlodini 6934 Howe Rd Bath, MI 48808-9475	White Przybylowicz	10/6/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$700.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barry Lipman 316 Walnut St San Francisco, CA 94118-2015	Goldforb & Lipman	10/14/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,500.00

SUBTOTAL of Receipts This Page (optional)

\$1,925.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 125 OF 179
FOR LINE NUMBER
11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bettylou W Eller 15179 LaGrande Pl Warren, MI 48093-3962		10/11/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired		
	Aggregate Year-to-Date >	\$	\$500.00
B. Full Name, Mailing Address and ZIP Code Susan M Hall 2126 Briarhill Lansing, MI 48917-1751	Name of Employer State of Michigan	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Public Administrator		
	Aggregate Year-to-Date >	\$	\$205.00
C. Full Name, Mailing Address and ZIP Code Mary Leita Christian 702 Maxine St Flint, MI 48503-5318	Name of Employer	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date >	\$	\$490.00
D. Full Name, Mailing Address and ZIP Code Charlotte M Ford 25 Sutton PL #14 New York, NY 10022	Name of Employer	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date >	\$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Sara R Joy 1150 River Dr Aspen, CO 81611	Name of Employer Self-employed	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Artist		
	Aggregate Year-to-Date >	\$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Susan O'Hara 2115 Whiteoaks Dr Alexandria, VA 22306-2660	Name of Employer	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date >	\$	\$245.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$118,979.00		
	Aggregate Year-to-Date >	\$	

SUBTOTAL of Receipts This Page (optional)

\$2,190.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules (a) for each category of the Detailed Summary Page

PAGE 126 OF 179
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Merry A Demarest 6015 NW Rosewood Dr Corvallis, OR 97330-1709	Self-employed	10/3/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Community Organizer	Aggregate Year-to-Date > \$	\$2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George Ann Hyams 307 N. Bristol Avenue Los Angeles, CA 90049-0000	George Spola Productions	10/4/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Theatrical Producer	Aggregate Year-to-Date > \$	\$400.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/4/00	MEMO \$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Barbara S Stowe 11507 Woodstock Way Reston, VA 20194		10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$600.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joyce Fogg Gregory 11483 Barnum Lake Rd Fenton, MI 48430-9720		10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$700.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William P Rock 3427 Oakwood Terrace NW Washington, DC 20010	The Smith Company	10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Program Coordinator	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/4/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$2,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **127** OF **179**
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Ann Jewett 586 Sandstone Pl Athens, GA 30605 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$250.00
B. Full Name, Mailing Address and ZIP Code Jay Trucks 300 N Russell #22 Mount Pleasant, MI 48858 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Jay Trucks & Associates Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/14/00	Amount of Each Receipt This Period \$250.00
C. Full Name, Mailing Address and ZIP Code Robert Dishon 3961 Olive Branch Rd Gallen, MI 49113 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$100.00
D. Full Name, Mailing Address and ZIP Code Joseph Falcone 103 Calvin Pl Santa Cruz, CA 95060-3123 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer ePocrates Inc Occupation Executive Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt This Period \$250.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution eMarketed through this org. Occupation Conduit total: \$116,978.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt This Period MEMO \$250.00
F. Full Name, Mailing Address and ZIP Code Paul Growald † Belmont Ave San Francisco, CA 94111 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Investor Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Marybel Balendonck 3132 East Quartz Lane #4 Fullerton, CA 92831 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt This Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$2,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,879.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period MEMO \$500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Evelyn Landgral 426 Beechmont Street Dearborn, MI 48124</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/7/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Mark L Kahn 15151 Ford Rd #321 Dearborn, MI 48126</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Arbitrator Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Mark L Kahn 15151 Ford Rd #321 Dearborn, MI 48126</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Arbitrator Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Tobi Hanna-Davies 1548 Broadway St Ann Arbor, MI 48105</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer City of Ann Arbor Occupation Councilmember Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Lucia Woods Lindley 1217 Ridge Ave Evanston, IL 60202</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Photographer Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/16/00</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Jaan Whitehead 44 Gramercy Park N #11B New York, NY 10010</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Art Consultant Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>\$2,250.00</p>
<p>TOTAL This Period (last page this line number only)</p>			<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 129 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald F Tucker 753 Willits St Birmingham, MI 48009-3309	Howard and Howard Attorneys PC	10/14/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Herbert Abrams 714 Alvarado Row Stanford, CA 94305	Stanford	10/10/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician Aggregate Year-to-Date > \$ 400.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Walter J Dex 3890 Larkspur Drive Allentown, PA 18103		10/17/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org. Conduit total: \$116,979.00	10/17/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morton Goldfein 60 E 88th St New York, NY 10128	Self-employed	10/8/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org. Conduit total: \$116,979.00	10/8/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Leslie D Tyvela 1600 10th St Bay City, MI 48708	Immanuel Lutheran Church	10/14/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Clergyman Aggregate Year-to-Date > \$ 750.00		

SUBTOTAL of Receipts This Page (optional)

\$1,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 130 OF 179
FOR LINE NUMBER 11(A)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roy K Dennison 1374 S Holly Rd Fenton, MI 48430-0773		10/11/00	\$15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$235.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James J Clark 805 Irwin St Plymouth, MI 48170	Detroit Board of Education	10/12/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accompanist		
	Aggregate Year-to-Date > \$	\$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Porter 101 Old Coach Rd Norwich, VT 05055-9526		10/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Community Volunteer		
	Aggregate Year-to-Date > \$	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pat Close 3306 E John Street Seattle, WA 98112	Self-employed	10/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Restaurateur		
	Aggregate Year-to-Date > \$	\$1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	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
Kathleen Fojtik-Stroud 2271 Plaaid Way Ann Arbor, MI 48105-1205		10/11/00	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date > \$	\$425.00	

SUBTOTAL of Receipts This Page (optional)

\$2,190.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 131 OF 178
FOR LINE NUMBER 11(a)(6)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Arthur Oleinick 2016 Vinewood Blvd Ann Arbor, MI 48104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Michigan	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$150.00
	Occupation Faculty	Aggregate Year-to-Date > \$	\$350.00
B. Full Name, Mailing Address and ZIP Code Patricia L Lent 818 Marywood Dr Royal Oak, MI 48067-1728 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$275.00
C. Full Name, Mailing Address and ZIP Code Council for a Livable World 11D Maryland Ave NE Washington, DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$100.00
	Occupation Conduit total: \$16,798.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Donald Priest 11526 Wilson Ave Belleville, MI 48111 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$1,070.00
E. Full Name, Mailing Address and ZIP Code Donald Priest 11526 Wilson Ave Belleville, MI 48111 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$1,070.00
F. Full Name, Mailing Address and ZIP Code Nancy Schwartz 2244 Burcham Dr East Lansing, MI 48823-2117 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan State University	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$100.00
	Occupation Teacher	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code Betty J Thomas 401 High St #107 Northville, MI 48167-0025 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$200.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$400.00

SUBTOTAL of Receipts This Page (optional)

\$675.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 132 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00944479

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sarah J Kilpatrick 728 W Jackson Blvd #1006 Chicago, IL 60661	Self-employed	10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 806 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James M McNeely 8734 Lakeshore Rd Fort Gratiot, MI 48059	Self-employed	10/7/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Publisher	Aggregate Year-to-Date > \$	\$1,500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Miriam Stimson 915 E Siena Heights Dr Adrian, MI 49221		10/5/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$225.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edna R Bick DO 9468 Beecher Rd Flushing, MI 48433-9769	Genesys Regional Medical Center	10/18/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	\$950.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold J Leeman Sr 529 N Francis Ave Lansing, MI 48912-4212		10/3/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold J Leeman Sr 629 N Francis Ave Lansing, MI 48912-4212		10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00

SUBTOTAL of Receipts This Page (optional)	\$1,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 133 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code James L Ballard 2391 Forest Oak Trl Williamston, MI 48895-9715 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan Association of Secondary School Principals	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
	Occupation Executive Director Aggregate Year-to-Date > \$	\$1,150.00	
B. Full Name, Mailing Address and ZIP Code Mary Ellen Lapp 8150 Wayne Williams Road Alanson, MI 49708-0000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
	Occupation Designer Aggregate Year-to-Date > \$	\$275.00	
C. Full Name, Mailing Address and ZIP Code Marvin Weinreb 65 Hiller Dr Oakland, CA 94618 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired Aggregate Year-to-Date > \$	\$300.00	
D. Full Name, Mailing Address and ZIP Code Fred Afari 712 N Elm Dr Beverly Hills, CA 90210 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Parkview Financial	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Businessman Aggregate Year-to-Date > \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code Mark Olson 1129 Shelter Lane Lansing, MI 48912-4402 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$250.00
	Occupation Information Requested Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code Charles MacCluer 1390 Haslett Rd Williamston, MI 48895-9715 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan State University	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$20.00
	Occupation Professor Aggregate Year-to-Date > \$	\$300.00	
G. Full Name, Mailing Address and ZIP Code Walter R Kernitz Sr 1133 W Huron River Dr Ann Arbor, MI 48103-4841 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$500.00
	Occupation Retired Aggregate Year-to-Date > \$	\$1,300.00	

SUBTOTAL of Receipts This Page (optional)

\$1,895.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 134 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Michele M Fluck 424 Highland Ave East Lansing, MI 48823-3915 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Michigan State University Occupation Professor Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$750.00	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and ZIP Code Ettie E Westervell 26 Southridge East Tiburon, CA 94920 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Investor Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00 \$500.00	Amount of Each Receipt this Period MEMO \$500.00
D. Full Name, Mailing Address and ZIP Code Jon Silver 355 Portola Rd Portola Valley, CA 94028-8037 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Quicksilver Delivery Service Occupation Owner Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$290.00	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Howard Wohl 141 Heather Ln Mill Neck, NY 11765 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Ivy Asset Management Corp Occupation Investment Advisor Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 \$1,000.00	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Jack H Bindez 17000 W Ten Mile Rd #10D Southfield, MI 48075-4752 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Jack A Bindez Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00 \$650.00	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Anita Norman 12 Berrill Farms Ln Hanover, NH 03755-0963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00 \$250.00	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)	\$2,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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135 179
FOR LINE NUMBER
11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt This Period MEMO \$250.00
	Occupation Conduit total: \$16,796.00 Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code Dolores N Curiel 33783 Vista Dr Farmington Hills, MI 48331-2270 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Farmington Public Schools	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period \$50.00
	Occupation Teacher Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code Tracy Tondro 424 Turner Terrace #4 San Mateo, CA 94401-2478 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Longview International Inc	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period \$250.00
	Occupation Computer Programmer Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/12/00	Amount of Each Receipt This Period MEMO \$250.00
	Occupation Conduit total: \$118,978.00 Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code George P Buhalls 1585 Pebble Creek Dr Rochester, MI 48307 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Blue Cross System	Date (month, day, year) 10/8/00	Amount of Each Receipt This Period \$1,000.00
	Occupation Benefit Consultant Aggregate Year-to-Date > \$ 1,200.00		
F. Full Name, Mailing Address and ZIP Code Terry H Corum 5810 Woodland Dr Oxon Hill, MD 20745-1039 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$200.00
	Occupation Retired Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period MEMO \$200.00
	Occupation Conduit total: \$116,978.00 Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$1,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Priscilla Tapley 9707 Old Georgetown Rd #1204 Bethesda, MD 20814-1324	Name of Employer Occupation Retired	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 450.00	
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduct total: \$116,979.00	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Jennifer Berlekamp 120 Hazel Lane Piedmont, CA 94611-4033	Name of Employer Occupation Homemaker	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 550.00	
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduct total: \$116,979.00	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Martha O Ford 3814 Mason Street Fairfax, VA 22030-3213	Name of Employer Occupation Retired	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 410.00	
F. Full Name, Mailing Address and ZIP Code Martha O Ford 3814 Mason Street Fairfax, VA 22030-3213	Name of Employer Occupation Retired	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$35.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 410.00	
G. Full Name, Mailing Address and ZIP Code Nell J Hodges 1638 Forest Hills Dr Okemos, MI 48864	Name of Employer Occupation Retired	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 300.00	

SUBTOTAL of Receipts This Page (optional)

\$885.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
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FOR LINE NUMBER
11(a)(1)

Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of enrolling 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)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James C MacBain 3036 Dhu Varren Ct Ann Arbor, MI 48105-1981	University of Michigan College of Engineering	10/16/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Research Director	Aggregate Year-to-Date > \$	\$710.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James C MacBain 3036 Dhu Varren Ct Ann Arbor, MI 48105-1981	University of Michigan College of Engineering	10/13/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Research Director	Aggregate Year-to-Date > \$	\$710.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara L Olazewski 1595 Harbour Dr #158 Trenton, MI 48183	Danou Enterprises	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Administrative Assistant	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marian S Clayton 803 Hamilton Dr Champaign, IL 61820		10/11/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 16th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/11/00	MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	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
Beverly Geyer 1916 Superior St Muskegon, MI 49442	Association for the Blind	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director	Aggregate Year-to-Date > \$	\$300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Davies 1548 Broadway St Ann Arbor, MI 48105	University of Michigan School of Social Work	10/11/00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Asst Professor	Aggregate Year-to-Date > \$	\$300.00

SUBTOTAL of Receipts This Page (optional)	\$1,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 138 OF 178
FOR LINE NUMBER 11(a)(ii)

Contributions from Individuals/Persons

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)

Stabenow for Senate 000344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Goelz 3232 N Lakewood Chicago, IL 60657	Capri Capitol	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Advisor	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Bradford Perkins 3401 Berry Rd Ypsilanti, MI 48198	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	10/5/00	\$200.00
	Aggregate Year-to-Date > \$	\$725.00	
C. Full Name, Mailing Address and ZIP Code James Knox 22 Coleman Pl #2 Menlo Park, CA 94025-7118	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	10/17/00	\$50.00
	Aggregate Year-to-Date > \$	\$250.00	
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,978.00	10/17/00	MEMO \$50.00
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Alice M Strange 100 Harper Ln Midland, MI 48640	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	10/12/00	\$50.00
	Aggregate Year-to-Date > \$	\$250.00	
F. Full Name, Mailing Address and ZIP Code Anusuya P Babu 541 Burgundy Sq #102 East Lansing, MI 48823	Name of Employer Blue Cross Network	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	10/16/00	\$250.00
	Aggregate Year-to-Date > \$	\$250.00	
G. Full Name, Mailing Address and ZIP Code Penelope Roderer 8147 Manitoba Playa Del Rey, CA 90293	Name of Employer KPMG LLP	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Consultant	10/10/00	\$250.00
	Aggregate Year-to-Date > \$	\$250.00	

SUBTOTAL of Receipts This Page (optional)	\$1,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **139** OF **179**
FOR LINE NUMBER **11(a)(ii)**

Contributions from Individuals/Persons

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)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Patricia J Blackard 34404 W Nine Mile Rd Farmington Hills, MI 48335-4600 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/10/00	\$20.00
Aggregate Year-to-Date > \$		\$505.00	
B. Full Name, Mailing Address and ZIP Code Patricia J Blackard 34404 W Nine Mile Rd Farmington Hills, MI 48335-4600 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/10/00	\$10.00
Aggregate Year-to-Date > \$		\$505.00	
C. Full Name, Mailing Address and ZIP Code Patricia J Blackard 34404 W Nine Mile Rd Farmington Hills, MI 48335-4600 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/10/00	\$10.00
Aggregate Year-to-Date > \$		\$505.00	
D. Full Name, Mailing Address and ZIP Code Patricia J Blackard 34404 W Nine Mile Rd Farmington Hills, MI 48335-4600 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/10/00	\$10.00
Aggregate Year-to-Date > \$		\$505.00	
E. Full Name, Mailing Address and ZIP Code Charles Faulkner 4456 Pease Rd Bellevue, MI 49021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Retired	10/5/00	\$50.00
Aggregate Year-to-Date > \$		\$250.00	
F. Full Name, Mailing Address and ZIP Code Charles Primus 58 Twin Lakes Dr Waterford, CT 06365 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Whaling City Ford Inc	10/11/00	\$250.00
Aggregate Year-to-Date > \$		\$250.00	
G. Full Name, Mailing Address and ZIP Code EMILY's List 605 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Note: Above Contribution marked through this org.	10/11/00	\$250.00
Conduit total: \$116,979.00 Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional) **\$360.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 140 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Billie M Bobbitt 2500 N Kuther Rd #303 Sidney, OH 45385 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/6/00	\$500.00
Aggregate Year-to-Date > \$		\$1,500.00	
B. Full Name, Mailing Address and ZIP Code Jo Ann Delor 7731 Fleuter Dearborn, MI 48128 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/11/00	\$25.00
Aggregate Year-to-Date > \$		\$300.00	
C. Full Name, Mailing Address and ZIP Code Martha Maas 93 E Longview Ave Columbus, OH 43202 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/5/00	\$100.00
Aggregate Year-to-Date > \$		\$250.00	
D. Full Name, Mailing Address and ZIP Code Tracey Ann Martin 28574 Regent Ct S Southfield, MI 48076-2434 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Executive Director	10/13/00	\$45.00
Aggregate Year-to-Date > \$		\$910.00	
E. Full Name, Mailing Address and ZIP Code Frank Bishop 6105 Weatherly Dr Atlanta, GA 30328 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation President	10/10/00	\$1,000.00
Aggregate Year-to-Date > \$		\$1,000.00	
F. Full Name, Mailing Address and ZIP Code Marjorie P Love 2442 17th Ave Carmel, CA 93923 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Retired	10/12/00	\$100.00
Aggregate Year-to-Date > \$		\$500.00	
G. Full Name, Mailing Address and ZIP Code Leah McFadden 792B Scherzo Ln Houston, TX 77040 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Account Executive	10/4/00	\$350.00
Aggregate Year-to-Date > \$		\$500.00	

SUBTOTAL of Receipts This Page (optional)

\$2,120.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 141 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be 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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Leah McFadden 7926 Scherzo Ln Houston, TX 77040</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer RCG Information Technology</p> <p>Occupation Account Executive</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$150.00</p>
<p>B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt this Period MEMO \$350.00</p>
<p>C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period MEMO \$150.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Debra Naile 503 S Kedzie Hall East Lansing, MI 48824-1032</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Michigan State University</p> <p>Occupation Professor</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Frances S Elliot 1027 Miller Ave Ann Arbor, MI 48103-3750</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$16,796.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period MEMO \$50.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Trish Knight 18867 28 Mile Rd Ablon, MI 49224</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt this Period \$150.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$550.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(B)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Zan Alley 36441 W Lyman Rd Farmington Hills, MI 48331-3523	Name of Employer Michigan Education Association	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$16.00
	Occupation Uniserv Director Aggregate Year-to-Date > \$ 220.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Alice B Belgray 450 West End Ave New York, NY 10024	Name of Employer Self-employed	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$100.00
	Occupation Editor Aggregate Year-to-Date > \$ 285.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Alice B Belgray 450 West End Ave New York, NY 10024	Name of Employer Self-employed	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$50.00
	Occupation Editor Aggregate Year-to-Date > \$ 285.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period MEMO \$50.00
	Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$100.00
	Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Lawrence A Dickie 6108 Old Allegan Rd Saugatuck, MI 49453	Name of Employer Information Requested	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$200.00
	Occupation Information Requested Aggregate Year-to-Date > \$ 250.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Carolyn B Singer 3316 S Creek Dr SE #103 Grand Rapids, MI 49512-6368	Name of Employer	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500.00
	Occupation Retired Aggregate Year-to-Date > \$ 1,400.00		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) \$865.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE **148** OF **179**
FOR LINE NUMBER **11(a)(1)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9069 Berkeley, CA 94709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period MEMO \$500.00
B. Full Name, Mailing Address and ZIP Code Sandra Ferry 30 Rockefeller Plaza #5600 New York, NY 10112 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Philanthropist Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00	Amount of Each Receipt This Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Marion D Turowski 5314 Shrewsbury Dr Troy, MI 48098-3242 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Somerset Counseling Center Occupation Counselor Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00	Amount of Each Receipt This Period \$200.00
D. Full Name, Mailing Address and ZIP Code Ruth E Bernstein 150 Broadway New York, NY 10038 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Law Offices of Ruth Bernstein Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$250.00
E. Full Name, Mailing Address and ZIP Code Paul Bennett 3755 Jocelyn St NW Washington, DC 20015 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Writer Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period \$250.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period MEMO \$250.00
G. Full Name, Mailing Address and ZIP Code James L Webb 113 Grogans Point Rd The Woodlands, TX 77380 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Davis Hamilton Jackson & Assoc Occupation Investment Manager Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt This Period \$250.00

SUBTOTAL of Receipts This Page (optional)	\$1,950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
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FOR LINE NUMBER
11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code James L Webb 113 Grogans Point Rd The Woodlands, TX 77380 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Davis Hamilton Jackson & Assoc.	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$250.00
	Occupation Investment Manager Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code Edna M Fillinger 315 Ray Street Newcomerstown, OH 43832-0000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code Lisa C Ward 1022 Timber Creek Dr Grand Ledge, MI 48837 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
	Occupation Attorney Aggregate Year-to-Date > \$ 225.00		
D. Full Name, Mailing Address and ZIP Code Lisa C Ward 1022 Timber Creek Dr Grand Ledge, MI 48837 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
	Occupation Attorney Aggregate Year-to-Date > \$ 225.00		
E. Full Name, Mailing Address and ZIP Code Marion Blumenthal 1030 5th Ave #9W New York, NY 10028 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$500.00
	Occupation Psychotherapist Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Lucy Stroock 55 Frost Street Cambridge, MA 02140 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer City of Cambridge	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Teacher Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution remarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$1,000.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$2,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER

11(a)(ii)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pamela D Killen 36 1/2 Cliff Road Nantucket, MA 02554	Self-employed	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychotherapist	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$118,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Renea N Chellan 5719 Bloomfield Glens Dr West Bloomfield, MI 48322-2502	Northland Family Planning	10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Administrator	Aggregate Year-to-Date > \$	\$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James J Vlasic 290 Cranbrook Rd Bloomfield Hills, MI 48034	Sommers Schwartz Silver & Schwartz	10/4/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,150.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Zena Zumeta 3268 Bolgas Cir Ann Arbor, MI 48105	Self-employed	10/14/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mediator	Aggregate Year-to-Date > \$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul C Jacobs PhD 6300 Gilbert Lake Rd Bloomfield Twp, MI 48301-1530	Beacon Hill Clinic	10/12/00	\$125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychologist	Aggregate Year-to-Date > \$	\$1,025.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Camille Bares Massie 501 High St Alexandria, VA 22302-1604		10/16/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$1,375.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 146 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward B Lewis 805 Winthrop Rd San Marino, CA 91108	CalTech	10/12/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$16,796.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Jane Hawkins 26880 Havelock Dearborn Heights, MI 48127	Name of Employer Information Requested	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$230.00
D. Full Name, Mailing Address and ZIP Code Richard Siriani 30049 Mayfair Dr Farmington, MI 48331	Name of Employer Richard J Siriani	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$350.00
E. Full Name, Mailing Address and ZIP Code Barry S Fagan 30020 Mayfair Farmington, MI 48331	Name of Employer Dib & Fagan PC	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code Jane Snyder Toll Box 410 Solebury, PA 18963	Name of Employer	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,500.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$1,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00944473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary R Morgan 1120 Fifth Ave New York, NY 10128	Self-employed	10/16/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Therapist	Aggregate Year-to-Date > \$	\$2,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol Kuller 197 Great Barrington Housatonic, MA 02136	Self-employed	10/9/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Human Resources	Aggregate Year-to-Date > \$	\$325.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/9/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Benjamin H Harris 261 W 91st St #2 New York, NY 10024		10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Graduate Student	Aggregate Year-to-Date > \$	\$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sandra K Welch 5834 Robins Nest Ln Burke, VA 22015	Paul Magliochetti & Associates	10/8/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Associate	Aggregate Year-to-Date > \$	\$600.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wade Rendlett 968 Dattaro San Francisco, CA 94107	Red Gorilla	10/10/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP Business Development	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eileen Namvar 12249 San Vicente Blvd Los Angeles, CA 90049		10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$1,000.00

SUBTOTAL of Receipts This Page (optional) **\$4,600.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CDD344473

<p>A. Full Name, Mailing Address and ZIP Code Richard Mironov 111 Aragon Blvd San Mateo, CA 94402</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer IPASS</p> <p>Occupation Marketing Executive</p> <p>Aggregate Year-to-Date > \$ 350.00</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period \$150.00</p>
<p>B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period MEMO \$150.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Shirley Perlman 4000 Island Blvd #806 Aventura, FL 33180</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Chloe's Beauty Skin Care</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date > \$ 600.00</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/18/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Mildred P. Johansson 72 Smoky Hollow Road W East Berne, NY 12059-0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/17/00</p>	<p>Amount of Each Receipt this Period MEMO \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Judith K Knepper 700 Fitzhugh Way Alexandria, VA 22314-6209</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer US General Accounting Office</p> <p>Occupation Program Analyst</p> <p>Aggregate Year-to-Date > \$ 1,750.00</p>	<p>Date (month, day, year) 10/5/00</p>	<p>Amount of Each Receipt this Period \$750.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1,250.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Susan M Helm 555 Sunnyside Dr Louisville, KY 40206		10/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lisbeth S Fried 2826 Provincial Dr Ann Arbor, MI 48104	Self-employed	10/17/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Writer Aggregate Year-to-Date > \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MOVEON ORG PAC P.O. Box 9053 Berkeley, CA 94709	Note: Above Contribution earmarked through this org.	10/17/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$14,804.00 Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Joy PO Box 23 Aspen, CO 81612	Sun Microsystems	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Executive Aggregate Year-to-Date > \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Timothy R Kaltenbach 512 Bartlett St Lansing, MI 48915-1106	Michigan House of Representative	10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chief of Staff Aggregate Year-to-Date > \$ 750.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arden S Epstein 78 Douglas Road Glen Ridge, NJ 07028-0000	Gastroenterology Group of NJ	10/13/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Receptionist Aggregate Year-to-Date > \$ 350.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/13/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) \$2,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Myra Larson 3575 E Huron River Dr Ann Arbor, MI 48104-3520</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10/12/00</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Edna P Warren 7 North Blvd #2 Richmond, VA 23220</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10/12/00</p>	<p>Amount of Each Receipt This Period</p> <p>\$30.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Edward G Sindelar 1710 8th St NW Grand Rapids, MI 49504</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Castgate Pharmacy</p> <p>Occupation Pharmacist</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10/7/00</p>	<p>Amount of Each Receipt This Period</p> <p>\$50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Harvey Sparks B122 W Lovejoy Rd Perry, MI 48872-0321</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer MSU College of Osteopathic Medicine</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10/14/00</p>	<p>Amount of Each Receipt This Period</p> <p>\$50.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Marcia Burnam 10660 Wilshire Blvd #1104 Los Angeles, CA 90024</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10/17/00</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution separated through this org.</p> <p>Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10/17/00</p>	<p>Amount of Each Receipt This Period</p> <p>MEMO \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Jane D Hawkins 4004 E Joy Rd Ann Arbor, MI 48105-9609</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p> <p>10/10/00</p>	<p>Amount of Each Receipt This Period</p> <p>\$50.00</p>

SUBTOTAL of Receipts This Page (optional)

\$530.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C0034473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rachel Rion 18151 Mayfield St Livonia, MI 48152-4425		10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Astri Lindberg 2896 Sheridan Pl Evanston, IL 60201-0000		10/16/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$275.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick B Waszkiewicz 22849 Schafer Clinton Township, MI 48035-2968		10/14/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$380.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick B Waszkiewicz 22849 Schafer Clinton Township, MI 48035-2968		10/16/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$380.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark E Williams 19845 Beverly Rd Beverly Hills, MI 48025-1565	Romain	10/14/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$	\$750.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kate McGee 10227 Big Rock Rd Silver Spring, MD 20901	Oracle Corporation	10/6/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Director of Corporate Affairs	Aggregate Year-to-Date > \$	\$1,800.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maxine Isaacs 3101 Woodland Drive NW Washington, DC 20008-0000	Harvard University Kennedy School	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Adjunct Lecturer	Aggregate Year-to-Date > \$	\$1,000.00

SUBTOTAL of Receipts This Page (optional)	\$2,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 152 OF 178
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period MEMO \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Boeing Occupation Engineer Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 \$225.00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Realtor Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$225.00	Amount of Each Receipt this Period \$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Social Worker Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00 \$600.00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00 \$250.00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Farmer Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$450.00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Playboy Enterprises Occupation CEO Aggregate Year-to-Date > \$	Date (month, day, year) 10/8/00 \$2,000.00	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)	\$1,625.00
TOTAL This Period (last page this line number only)	\$1,625.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 153 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sarah M Galas 40 Winchester St Brookline, MA 02446		10/10/00	\$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward L Jensen 3148 Wagon Trl Flint, MI 48507-1214		10/5/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Yoniko Saneyoshi 13395 Mulholland Dr Beverly Hills, CA 90210-3019	Self-employed	10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$1,500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/4/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David H Morris 14796 Brewster Ct Shelby Township, MI 48315	MI Regional Council of Carpenters	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Millwright	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sarah JoAnn Murphy 8210 Marcy Brighton, MI 48116-2113		10/13/00	\$20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$520.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold Haas 6801 Pleasant Lake Ct West Bloomfield, MI 48322		10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$400.00

SUBTOTAL of Receipts This Page (optional)	\$2,245.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 154 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carol Neuman de Vegvar 2360 Panhandle Rd Delaware, OH 43016	Ohio Wesleyan Univ	10/18/00	\$260.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Art Historian/Assoc Professor	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rahelch Farahnik 9715 Royce Ct Beverly Hills, CA 90210		10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Cecile Farber 810 Waring Avenue Bronx, NY 10467-0000		10/11/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harold Julian Kaller 5588 Baywater Rd West Bloomfield, MI 48322	Advanced Counseling	10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Social Worker	Aggregate Year-to-Date > \$	\$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Contributions Unitemized	Information Requested	10/7/00	\$10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$6,316.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Contributions Unitemized	Information Requested	10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$6,316.00

SUBTOTAL of Receipts This Page (optional)

\$1,435.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 155 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00944473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
L Graham Ward 21559 Ingram Novi, MI 48375-4764	Ward Anderson Peritt & Billa	10/14/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$425.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
V John Barnard 3248 Woodside Ct Bloomfield Hills, MI 48304		10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$350.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas A Madden 8130 Kedvale Ave Skokie, IL 60076		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$550.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas A Madden 9130 Kedvale Ave Skokie, IL 60076		10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$550.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	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
Kathleen Kleaveland 1634 Sunset Dr North Muskegon, MI 49445-1305	Hackley Hospital	10/13/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Medical Director	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Sturdevant 185 El Cerro Ave San Rafael, CA 94901	The Sturdevant Law Firm	10/16/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Trial Attorney	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$575.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joe L. Byers 3118 S Cambridge Rd Lansing, MI 48911-1814		10/7/00	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$350.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joe L. Byers 3118 S Cambridge Rd Lansing, MI 48911-1814		10/10/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$350.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Heather Dom 3810 Edgemont Dr Troy, MI 48064	Consolidated Legal Services	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jacob Braslaw 30320 Stratford Ct Farmington Hills, MI 48331	Ford Motor Company	10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Research Engineer	Aggregate Year-to-Date > \$	\$450.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eunice Tuttle 29242 Widdbrook Dr Southfield, MI 48034-6346		10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$600.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Nina Rosenwald 122 E 42nd St New York, NY 10017	Self-employed	10/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Lewandowski 2701 22nd St Bay City, MI 48706	Action Signs	10/13/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OWNER	Aggregate Year-to-Date > \$	\$225.00

SUBTOTAL of Receipts This Page (optional)

\$2,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 157 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gerald Sikora 267B1 Cecile Dearborn Heights, MI 48127		10/19/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$650.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred A Custer 18894 Valencia St Northville, MI 48167-2738	Materna & Custer	10/19/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$750.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Daniel P Mullan 16325 Middlebelt Livonia, MI 48154	Self-employed	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Realtor	Aggregate Year-to-Date > \$	\$788.50
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Clare Winter 49-693 Old Troon Ct Indio, CA 92201		10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution remarked through this org.	10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	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
William S Cassels 18909 Mills Choice Rd #6 Gaithersburg, MD 20879		10/10/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ruth E Max 16438 Clarkson Dr Farmers, MI 48026-0000		10/7/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$470.00

SUBTOTAL of Receipts This Page (optional)

\$1,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 158 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Arner 105 Hillside Avenue Menlo Park, CA 94025		10/5/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$750.00	
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/5/00	Amount of Each Receipt This Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code David B Harris 33 W 84th St #3 New York, NY 10024	Name of Employer Children's Research & Education Institute	Date (month, day, year) 10/4/00	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$	\$1,000.00	
D. Full Name, Mailing Address and ZIP Code Margaret H Benedict 1201 Melville Sq #211A Richmond, CA 94804	Name of Employer	Date (month, day, year) 10/18/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		
	Aggregate Year-to-Date > \$	\$350.00	
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt This Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00		
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code Chris Colenda 5610 Silverleaf Ct Haslett, MI 48840	Name of Employer MSU College of Human Medicine	Date (month, day, year) 10/8/00	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Dean		
	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code Donald Edwards 14605 Tomahawk Ln Big Rapids, MI 49307-9505	Name of Employer	Date (month, day, year) 10/10/00	Amount of Each Receipt This Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$325.00	

SUBTOTAL of Receipts This Page (optional)

\$2,650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Victoria R Cordova 4414 35th St NW Washington, DC 20008		10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$275.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda Montgomery 782 Cheney St San Francisco, CA 94131	Self-employed	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Accountant	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/18/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul P Somers Jr 1135 Marigold Ave East Lansing, MI 48823-5130	Michigan State University	10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Professor	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Pochodylo 1423 Francis St. Port Huron, MI 48060		10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marcus Alexis 1022 Greenwood St Evanston, IL 60201	Northwestern University	10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Professor	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 160 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Mary Ann Stehr 4428 Elmwood Dr Okemos, MI 48864-3059 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Psychotherapist Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$300.00	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and ZIP Code Virginia Royden 13488 N Fork Ln Los Altos Hills, CA 94022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$750.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Henry Oginsky 2800 Byron Lennon, MI 48449 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$400.00	Amount of Each Receipt this Period \$400.00
D. Full Name, Mailing Address and ZIP Code Nancy B Wise PO Box 206 Landisville, PA 17538 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00 \$300.00	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00 \$200.00	Amount of Each Receipt this Period MEMO \$200.00
F. Full Name, Mailing Address and ZIP Code Gail Shackel 3211 Point White Dr NE Bainbridge Island, WA 98110 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation CFP Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$650.00	Amount of Each Receipt this Period \$200.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$200.00	Amount of Each Receipt this Period MEMO \$200.00

SUBTOTAL of Receipts This Page (optional)	\$1,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 167 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mahin Kamran 9307 Olympic Blvd Beverly Hills, CA 90212	12th St Dance & Accessories	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Businessman	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Landon E Geren 4739 Sandpiper Ln West Bloomfield, MI 48323	Self-employed	10/11/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Financial Advisor	Aggregate Year-to-Date > \$	\$250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G Lovell 5039 Harkson Dr East Lansing, MI 48823-3773	Lansing Community College	10/8/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Teacher	Aggregate Year-to-Date > \$	\$300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen A Stiffler 3876 Norway Pine Dr Dewitt, MI 48820	Michigan Department of Community Health	10/14/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Health Manager	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Margaret Zierdt 701 Roxboro Road Rockville, MD 20850		10/19/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/13/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00	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
Anne F Skinner 57 Woodlawn Dr Williamstown, MA 01267	Williams College	10/11/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Teacher	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

\$1,775.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **182** OF **179**
FOR LINE NUMBER **11(a)(1)**

Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be valid 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)
Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/11/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$118,979.00 Aggregate Year-to-Date > \$		
Sheila M Pfafflin 173 Gates Ave Gillette, NJ 07933		10/5/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	\$400.00	
Jeannette Safran 9822 Sharp Rd Clifford, MI 48727		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	\$310.00	
Jeannette Safran 9822 Sharp Rd Clifford, MI 48727		10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	\$310.00	
Ebrahim Simhaee 112 N Maple Dr Beverly Hills, CA 90210	Crown Poly Inc	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner Aggregate Year-to-Date > \$	\$1,000.00	
Stanford G Lozon 1778 Oak St #101 Wyandotte, MI 48192-5425		10/13/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Aggregate Year-to-Date > \$	\$400.00	
Arthur B Blackwell 1130 W Boston Detroit, MI 48202-2709	Self-employed	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor Aggregate Year-to-Date > \$	\$1,000.00	

SUBTOTAL of Receipts This Page (optional)	\$2,410.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 163 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Slabonow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code John A Brass Jr 1827 N Orleans Chicago, IL 60614		Name of Employer Northern Trust	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Banker	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Stella M Banich 3 Proslwick Ct Dearborn, MI 48120		Name of Employer	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code Gerald J Reilly 934 Grant St Kalamazoo, MI 49008		Name of Employer Cablevision of Michigan	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Cable TV Technician	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Gerard M Breitzer 4680 Ottawa Dr Okemos, MI 48864		Name of Employer Michigan State University	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Physician	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code Grace L Hansen 26860 Havelock Dr Dearborn Heights, MI 48127		Name of Employer Information Requested	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Information Requested	Aggregate Year-to-Date > \$ 235.00	
F. Full Name, Mailing Address and ZIP Code Priscilla Mason 400D Cathedral Ave NW #117B Washington, DC 20016		Name of Employer	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Retired	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005		Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$2,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)
 Stabenow for Senate C0034473

A. Full Name, Mailing Address and ZIP Code Richard G Rockefeller 71 Foreside Rd Falmouth, ME 04105 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$500.00
	Occupation Physician	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code Elizabeth A Utley 8144 Walnut Hill Ln #550 PO Box 25852 Dallas, TX 75225 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/6/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Homemaker	Aggregate Year-to-Date > \$	\$2,000.00
C. Full Name, Mailing Address and ZIP Code Gordon Lee Pollock 1242 N Lake Shore Dr #15 Chicago, IL 60610 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Capri Capitol	Date (month, day, year) 10/19/00	Amount of Each Receipt this Period \$1,000.00
	Occupation Investment Advisor	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code Mary Porter 1440 Sherwood SE Grand Rapids, MI 49506 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$400.00
E. Full Name, Mailing Address and ZIP Code Rochelle F Grossman 8050 Baxter Avenue #3D Elmhurst, NY 11373-1354 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution examined through this org.	Date (month, day, year) 10/18/00	Amount of Each Receipt this Period MEMO \$100.00
	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code Elizabeth A R Robinson 1409 White St Ann Arbor, MI 48104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer University of Michigan	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$200.00
	Occupation Researcher	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)	\$2,825.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER

11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Sam Offen 181 S Woodward Birmingham, MI 48009	Name of Employer Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$100.00
	Occupation Retired Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code Matthew T West 2111 Jefferson Davis Hwy #310N Arlington, VA 22202	Name of Employer Baker & Betts LLP Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$25.00
	Occupation Attorney Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code Andrea Kramer 227 West Monroe Chicago, IL 60606	Name of Employer McDermott Will & Emery Date (month, day, year) 10/8/00	Amount of Each Receipt this Period \$250.00
	Occupation Attorney Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Date (month, day, year) 10/6/00	Amount of Each Receipt this Period MEMO \$250.00
	Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code David Rockefeller Jr 30 Rockefeller Plaza #5800 New York, NY 10112	Name of Employer Rockefeller & Co Inc Date (month, day, year) 10/8/00	Amount of Each Receipt this Period \$500.00
	Occupation Executive Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code Gerald Shapiro 17022 Hartsok St Encino, CA 91316	Name of Employer Uptown Drug Company Incorporated Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$25.00
	Occupation Pharmacist Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code Neal Potter 6801 Brookville Rd Chevy Chase, MD 20815	Name of Employer Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$500.00
	Occupation Retired Aggregate Year-to-Date > \$ 1,500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Receipts This Page (optional)

\$1,400.00

TOTAL This Period (list page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
168 179
FOR LINE NUMBER
11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neal Potter 6801 Brookville Rd Chevy Chase, MD 20815		10/16/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$1,500.00
B. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$16,796.00	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code Wilma Tays 904 Miller Road Kalamazoo, MI 49001	Name of Employer	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$220.00
D. Full Name, Mailing Address and ZIP Code Nancy L Meyer 50 Hayfields Rd Portola Valley, CA 94028	Name of Employer Self-employed	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code Ezri Namvar 12248 San Vicente Blvd Los Angeles, CA 90049	Name of Employer Nanco Capital Group	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banker	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code Maria Hardaway-McDowell 1614 Girard St NE Washington, DC 20018	Name of Employer The Smith Company	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$2,260.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 187 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Tom Butch 709 Louisa Street Gladstone, MI 49837	Information Requested	10/13/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > 6	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Sheila Karabess 3231 Warwick Royal Oak, MI 48073	Information Requested	10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy G White 8100 Westchester Park Dr #1417 College Park, MD 20740	Self-employed	10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Accountant	Aggregate Year-to-Date > \$	\$300.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Conduit total: \$116,979.00	Aggregate Year-to-Date > 3
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kay Griffith Hammond 2511 Leonard St NE Grand Rapids, MI 49505	Self-employed	10/16/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$300.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kay Griffith Hammond 2511 Leonard St NE Grand Rapids, MI 49505	Self-employed	10/12/00	\$25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > 6	\$300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathryn Hirsch 17 Stratton Rd Scarsdale, NY 10583	Retired	10/4/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

\$625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER
11(a)(1)

Contributions from Individuals/Persons

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)

Stabenow for Senate C0034473

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Raymond Gist 6301 Deepdale Dr Grand Blanc, MI 48439	Name of Employer Self-employed Occupation Dentist Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Jean J Baron 1501 Hamman Ave Evanston, IL 60201-0000	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Louise S Young 1063 Casetas Pass Road # 106 Carpinteria, CA 93013	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Roland Lashbrook 8000 E Jefferson Detroit, MI 48214	Name of Employer United Auto Workers Occupation Union Representative Aggregate Year-to-Date > \$	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Harold L Lewis 6727 Grandville Ave Detroit, MI 48228	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code George Steinberger 25800 W 11 Mile Rd #413 Southfield, MI 48034	Name of Employer Self-employed Occupation Insurance Executive Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) \$925.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 169 OF 179
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code JoAnne Dain 11242 Primrose Circle Bradenton, FL 34202 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/19/00 \$300.00	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and ZIP Code JoAnne Dain 11242 Primrose Circle Bradenton, FL 34202 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/11/00 \$300.00	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period MEMO \$50.00
D. Full Name, Mailing Address and ZIP Code Donna Fossum 200 N Pickett St #811 Alexandria, VA 22304-0000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer RAND Corporation Occupation Policy Analyst Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00 \$300.00	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period MEMO \$100.00
F. Full Name, Mailing Address and ZIP Code Daniel G Rath 823 Glendale Ave Pontiac, MI 48341 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 \$300.00	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Randee C Selger 27087 Old Trace Ln Los Altos, CA 94022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-employed Occupation Artist Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00 \$500.00	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)	\$800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabanow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sandra L McClurg 1900 Lenomar Court Rochester Hills, MI 48309	Oakland University	10/13/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Zlotoff 1832 Cimmaron Ct Bloomfield Hills, MI 48302-1712	Unipro Incorporated	10/5/00	\$750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$2,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Anne Ford 217 Abbott Woods East Lansing, MI 48823	Michigan State Medical Society	10/7/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cynthia Kagno 132 Palfrey St Watertown, MA 02472	AIR Inc	10/9/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/9/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduct total: \$116,979.00	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
Jeffrey F Loo 45257 Horsehoe Circle Canton, MI 48187	Information Requested	10/4/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$275.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard S Jones 4826 Tremont Dallas, TX 75246	Southern Methodist University	10/14/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$300.00

SUBTOTAL of Receipts This Page (optional)

\$1,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **171** OF **179**
FOR LINE NUMBER **11(a)(b)**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344479

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709	Note: Above Contribution earmarked through this org.	10/14/00	MEMO \$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Conduit total: \$14,804.00		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code J. Martin Barnick 547 E Jefferson Ave Detroit, MI 48226-4519	Name of Employer Erick Rosen & Barnick	Date (month, day, year) 10/7/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Attorney		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$750.00	
C. Full Name, Mailing Address and ZIP Code Jeanne Clear 1129 W Montclair Avenue Milwaukee, WI 53217	Name of Employer	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Retired		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
D. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution earmarked through this org.	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Conduit total: \$116,979.00		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Cornelia D Jehncke 125 W Lyon Farm Dr Greenwich, CT 06831	Name of Employer	Date (month, day, year) 10/12/00	Amount of Each Receipt this Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Retired		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$350.00	
F. Full Name, Mailing Address and ZIP Code Linda R Myers 2295 Knotwood Dr Holt, MI 48842	Name of Employer Michigan Education Association	Date (month, day, year) 10/11/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Lobbyist		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$800.00	
G. Full Name, Mailing Address and ZIP Code Hector A Bullynck 49661 Nautical Dr New Baltimore, MI 48047	Name of Employer Self-employed	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation CPA		
<input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	

SUBTOTAL of Receipts This Page (optional)

\$2,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Westbrook 637B Charles Dr West Bloomfield, MI 48322	Information Requested	10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John James Reed 8052 Perry Lake Rd Clarkston, MI 48348	Self-employed	10/10/00	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date > \$	\$250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eleanor Weinstock 525 S Flagler Dr #12C West Palm Beach, FL 33401		10/12/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/12/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bahman Farahnik 8715 Royce Ct Beverly Hills, CA 90210	RX1 Plastics	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elizabeth Edisson 20 Nickerson Rd Lexington, MA 02421	Inmajic Inc	10/8/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Byrle Breny 10 Webster St Somerville, MA 02145		10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)	\$2,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C0034479

A. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$250.00
B. Full Name, Mailing Address and ZIP Code Jule Berman 5114 Woodlands Lane Bloomfield Hills, MI 48302-0000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00	Amount of Each Receipt this Period MEMO \$250.00
D. Full Name, Mailing Address and ZIP Code Joseph G Nuyen Jr. 815 Carpenter St Northville, MI 48167-9263 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Honigman Miller Schwartz & Cohn Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code Eileen R Growald 1611 Harper Rd Shelburne, VT 05482 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$	Date (month, day, year) 10/16/00	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code John I Tesija 733 Westview Road Bloomfield Hills, MI 48304 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Novava Tesija & Michela Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Renee Greden 2015 Woodside Rd Ann Arbor, MI 48104-6981 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Huron Valley Tennis Club Occupation Birrer Aggregate Year-to-Date > \$	Date (month, day, year) 10/15/00	Amount of Each Receipt this Period \$150.00

SUBTOTAL of Receipts This Page (optional)

\$2,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 174 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary L Runner 156 Vine Place Vacaville, CA 95688		10/10/00	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sally Carson 3153 N 17th Street Arlington, VA 22201-4913		10/2/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$650.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lisa Kalmbach 180 Regui Rd Oakland, CA 94611-4038	Kaufman & Broad	10/12/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homebuilder	Aggregate Year-to-Date > \$	\$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/12/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Murray E Jackson 1300 Lafayette #2807 Detroit, MI 48207-2942		10/12/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$400.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gorky Hale 9100 Oriole Way Los Angeles, CA 90069	Information Requested	10/17/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	MEMO \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

\$1,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beth Hutchins 25 NW 23 Place #6 PMB 1B1 Portland, OR 97210	Noetic Designs	10/4/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Business Analyst Aggregate Year-to-Date > \$300.00		
B. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005	Name of Employer Note: Above Contribution eemarked through this org.	Date (month, day, year) 10/4/00	Amount of Each Receipt this Period MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Conduit total: \$116,979.00 Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Theodore J Cohn 4787 Beaumont Dr La Mesa, CA 91941	Name of Employer	Date (month, day, year) 10/9/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$800.00		
D. Full Name, Mailing Address and ZIP Code Francis E Steiner 18922 Fairfield Detroit, MI 48221	Name of Employer	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$300.00		
E. Full Name, Mailing Address and ZIP Code William T Sledd 7852 W Lovejoy Rd Perry, MI 48872	Name of Employer Michigan State University	Date (month, day, year) 10/10/00	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Professor Aggregate Year-to-Date > \$300.00		
F. Full Name, Mailing Address and ZIP Code I William Sherr 23249 Morningside St Southfield, MI 48034-5178	Name of Employer Sherr Development Corporation	Date (month, day, year) 10/14/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$1,000.00		
G. Full Name, Mailing Address and ZIP Code Mark A Millich 50 Fordcroft Grosse Pointe Shores, MI 48236	Name of Employer JMI Olson Corp	Date (month, day, year) 10/13/00	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: President Aggregate Year-to-Date > \$1,500.00		

SUBTOTAL of Receipts This Page (optional) \$1,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 176 OF 179

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be 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)

Stabenow for Senate C00944473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert J Freeston PO Box 252 Rosendale, NY 12472	Canal Press	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Printer	Aggregate Year-to-Date > \$	\$300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert J Freeston PO Box 252 Rosendale, NY 12472	Canal Press	10/17/00	\$100.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Printer	Aggregate Year-to-Date > \$	\$300.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EMILY's List 805 15th St NW Washington, DC 20005	Note: Above Contribution earmarked through this org.	10/17/00	MEMO \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Conduit total: \$116,979.00	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joanne K Hart 1111 Race St #12AB Denver, CO 80206		10/10/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$2,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John F White 11574 Algonquin Dr Pinckney, MI 48189-8429	ERIM	10/15/00	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$	\$550.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lots Lynch 2950 Emerald Forest Cir East Lansing, MI 48823	Michigan State University	10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date > \$	\$600.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edith Allen 59 Richfield Rd Arlington, MA 02474-1041	Self-employed	10/12/00	\$250.00 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Artist	Aggregate Year-to-Date > \$	\$750.00

SUBTOTAL of Receipts This Page (optional)

\$1,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 177 OF 179
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code EMILY's List 606 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period MEMO \$250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Diane Rigoli 304 E Maple Ave Bancroft, MI 48414-9437</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer AFSCME AFL-CIO Occupation Special Ass't to the President Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Elspeth Bobbs 630 E Alameda Santa Fe, NM 87501-2642</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Property Manager Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code William F Hellmuth 3939 Walnut Ave #187 Camichael, CA 95608</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9083 Berkeley, CA 94709</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Marian Kellogg 772 Brush Hill Rd Stowe, VT 05672</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/7/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Tor Shwayder MD 26349 Harwich Drive Farmington Hills, MI 48334</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Henry Ford Hospital Occupation Physician Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$600.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>\$600.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **178** OF **179**
FOR LINE NUMBER **11(a)(1)**

Contributions from Individuals/Persons

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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code MOVEON ORG PAC P.O. Box 9063 Berkeley, CA 94709</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$14,804.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period MEMO \$100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Joan Hohlt Wich 3115 Ferndale St Houston, TX 77098</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed Occupation Investor Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt this Period \$750.00</p>
<p>C. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/4/00</p>	<p>Amount of Each Receipt this Period MEMO \$750.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Claire A LeVine-Lien 105 Lynton Ave San Carlos, CA 94070</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Cisco Systems Occupation Sales Manager Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/14/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and ZIP Code James Leonard 1600 N Oak St #1814 Arlington, VA 22209</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested Occupation Computer Programmer Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Council for a Livable World 110 Maryland Ave NE Washington, DC 20002</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$16,796.00 Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/12/00</p>	<p>Amount of Each Receipt this Period MEMO \$250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Hene A Birge 2420 Adare Rd Ann Arbor, MI 48104</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/7/00</p>	<p>Amount of Each Receipt this Period \$100.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 178 OF 178
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Sarah Z Minard 123 Beechmont Rd Pittsburgh, PA 15206</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$300.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Samuel I Rapaport 7887 Lockout Dr La Jolla, CA 92037</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Retired</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/10/00</p>	<p>Amount of Each Receipt this Period \$160.00</p>
<p>C. Full Name, Mailing Address and ZIP Code M Chandler Naults 413 Sumark Way Ann Arbor, MI 48103-6305</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested Occupation Information Requested</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/13/00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Carole Lane Widmayer 333 N Jefferson #403 Chicago, IL 60651-0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Cahners Publishing Occupation Salesperson</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code EMILY's List 805 15th St NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Note: Above Contribution earmarked through this org. Occupation Conduit total: \$116,979.00</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 10/11/00</p>	<p>Amount of Each Receipt this Period MEMO \$500.00</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>\$1,200.00</p>
<p>TOTAL This Period (last page this line number only)</p>			<p>\$295,562.25</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(h)

Contributions from Party Committees

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Praqua Lake County Democratic Party 381 S 4th Street Rogers Dily, MI 49779 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code Alpena County Democratic Party 419 S First Alpena, MI 49707 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/13/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$110.00
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

SUBTOTAL of Receipts This Page (optional)	\$360.00
TOTAL This Period (last page this line number only)	\$360.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Democrats Abroad France 22 Chemin de la Roueterie Paris France,		10/14/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mainstream America Political Action Committee 301 Main St #1400 Baton Rouge, LA 70825		10/13/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	\$2,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Women's Campaign Fund 735 15th Street NW #500 Washington, DC 20005		10/12/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	\$1,500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Searchlight Leadership Fund 818 Connecticut Ave NW #1100 Washington, DC 20008		10/5/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	\$3,500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002	* In-Kind: Printing	10/10/00	\$117.20 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	\$232.89
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002	* In-Kind: List	10/10/00	\$16.66 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	\$232.89
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002	* In-Kind: Supplies	10/10/00	\$2.78 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	\$232.89

SUBTOTAL of Receipts This Page (optional)

\$5,838.64

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer Date (month, day, year)	Amount of Each Receipt this Period
National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	* In-Kind: Postage Occupation Aggregate Year-to-Date > \$ 232.89	10/6/00 \$96.25
B. Full Name, Mailing Address and ZIP Code Blumenauer for Congress PO Box 1396 Portland, OR 97207- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) Occupation Aggregate Year-to-Date > \$ 500.00	10/11/00 \$500.00
C. Full Name, Mailing Address and ZIP Code Action Committee for Rural Electrification 4901 Wilson Blvd Arlington, VA 22203 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) Occupation Aggregate Year-to-Date > \$ 5,000.00	10/10/00 \$3,000.00
D. Full Name, Mailing Address and ZIP Code Hispanic Unity USA 9531 Via Ricardo Los Angeles, CA 91504 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) Occupation Aggregate Year-to-Date > \$ 3,000.00	10/10/00 \$3,000.00
E. Full Name, Mailing Address and ZIP Code Utility Workers Union of America POC 815 16th St NW #605 Washington, DC 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) Occupation Aggregate Year-to-Date > \$ 2,000.00	10/11/00 \$1,000.00
F. Full Name, Mailing Address and ZIP Code NATFARMPAC National Farmer's Union PAC 1190D E Cornell Ave Aurora, CO 80014 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) Occupation Aggregate Year-to-Date > \$ 1,250.00	10/16/00 \$500.00
G. Full Name, Mailing Address and ZIP Code Bob Emerson Election Committee PO Box 10 Flint, MI 48501 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Date (month, day, year) Occupation Aggregate Year-to-Date > \$ 500.00	10/12/00 \$100.00
SUBTOTAL of Receipts This Page (optional)		\$8,196.25
TOTAL This Period (last page this line number only)		

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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 committees.

NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Physical Therapy PAC 1111 N Fairfax St Alexandria, VA 22314		10/6/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$10,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pipe Fitter's Local 636 (PPAC) 16856 Meyers Detroit, MI 48235		10/10/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
16th Congressional Democratic District 950 Moran Lincoln Park, MI 48146		10/10/00	\$999.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$999.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michigan Pride PAC 220 Bagley #908 Detroit, MI 48226-3422		10/10/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Democratic Candidate Fund 1310 18th St NW Washington, DC 20036		10/13/00	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mikulski for Senate PO Box 13147 Baltimore, MD 21203-		10/12/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Children's PAC 6740 Newbold Drive Bethesda, MD 20817		10/5/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00

SUBTOTAL of Receipts This Page (optional) \$10,349.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)

Stabenow for Senate G00344473

A. Full Name, Mailing Address and ZIP Code The Jefferson Committee 650 Poydras St #2245 New Orleans, LA 70130- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/5/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Amalgamated Transit Union COPE Account Voluntary Fund 5025 Wisconsin Ave NW Washington, DC 20016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/12/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$4,000.00
C. Full Name, Mailing Address and ZIP Code American Nurses Association PAC 800 Maryland Ave SW #100W Washington, DC 20024-2571 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/2/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$5,000.00
D. Full Name, Mailing Address and ZIP Code Archer's Arrows PAC 400 Renaissance Ctr #3600 Detroit, MI 48243 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/17/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Bi-County PAC 180 Willis Ave Mineola, NY 11501- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$2,000.00
F. Full Name, Mailing Address and ZIP Code Chicago & Central States Units PAC 333 S Ashland Ave Chicago, IL 60607- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/6/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$1,500.00
G. Full Name, Mailing Address and ZIP Code Citizens for Joe Kennedy PO Box 425788 Kendall Square Branch Cambridge, MA 02142- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/18/00 Aggregate Year-to-Date > \$	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$15,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Citizens for Responsible Government PO Box 4078 Butte, MT 59701-		10/6/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee to Elect Artina Tinsley Hardman 3009 Cadillac Detroit, MI 48214-		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$100.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee to Elect Nancy Quarles 18131 Magnolia Southfield, MI 48075-		10/5/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Computer & Communications Industry PAC 688 11th St NW #600 Washington, DC 20001-		10/6/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dairy Farmers of America Inc DEPAC 1022D N Executive Hills Blvd Kansas City, MO 66153-		10/18/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ford Lincoln Mercury Minority Dealers Association 1600 W Nine Mile Rd #803 Southfield, MI 48075		10/11/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$5,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Great Lakes PAC 2000 Town Center #2350 Southfield, MI 48075-		10/13/00	\$900.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$900.00

SUBTOTAL of Receipts This Page (optional) \$8,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Great Plains Leadership Fund 807 14th St NW #800 Washington, DC 20005		10/16/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$3,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Human Rights Campaign Fund PAC 919 18th Street NW #800 Washington, DC 20006	* In-Kind: Staffer Stipend	10/4/00	\$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$4,052.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Keycorp PAC 127 Public Square Cleveland, OH 44114		10/10/00	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Metro Ventures PAC 1300 First National Bldg #1107 Detroit, MI 48226		10/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Metro Ventures PAC 1300 First National Bldg #1107 Detroit, MI 48226		10/11/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$2,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
National Rural Letter Carriers PAC 1630 Duke St 4th Fl Alexandria, VA 22314-3485		10/17/00	\$4,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$10,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paper Allied-Industrial Chemical & Energy Workers P O Box 1475 Nashville, TN 37202		10/13/00	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$7,000.00

SUBTOTAL of Receipts This Page (optional)

\$9,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Participation 2000 236 Massachusetts Ave NE Washington, DC 20002	* In-Kind: Staffer Stipend Occupation	10/15/00	\$750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$2,396.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
People for the American Way Voter Alliance 2000 M St NW #400 Washington, DC 20036-	Occupation	10/6/00	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Prairie Political Action Committee PO Box 2002 Springfield, IL 62705	Occupation	10/11/00	\$4,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$4,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rivers for Congress PO Box 8293 Ann Arbor, MI 48107-	Occupation	10/5/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sen John Chery's Genesee Fund 432 N Saginaw St #303 Flint, MI 48502-	Occupation	10/14/00	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$100.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TimeFuture Inc 4 Hawthorne Ave Princeton, NJ 08540-	Occupation	10/13/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Unite Campaign Committee 1701 Broadway New York, NY 10019	Occupation	10/6/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$4,500.00	

SUBTOTAL of Receipts This Page (optional)

\$12,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 8
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Volunteers for Vento PO Box 66254 Saint Paul, MN 55166		10/1/00	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

\$1,000.00

TOTAL This Period (Just page this line number only)

\$73,031.89

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 19(b)

Other Loans

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)

Stabenow for Senate C00S44473

A. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/10/00	\$300,000.00
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		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
	Occupation		
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$300,000.00

TOTAL This Period (last page this line number only)

\$300,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

Other Receipts

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)

Stabenow for Senate C00344473

<p>A. Full Name, Mailing Address and ZIP Code Michigan National Trust & Investment 27777 Inkster Rd Farmington Hills, MI 48334</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Interest Occupation</p> <p>Aggregate Year-to-Date > \$ \$70,676.64</p>	<p>Date (month, day, year) 10/2/00</p>	<p>Amount of Each Receipt this Period \$3,077.01</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$3,077.01</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>\$3,077.01</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 15
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Stabency for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
2 Unique Caterers 1250 Kensington Bloomfield Hills, MI 48304	FR Food & Beverage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/00	\$181.74
B. Full Name, Mailing Address and ZIP Code National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002	Purpose of Disbursement Misc Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/00	\$117.20 * * in-kind received
C. Full Name, Mailing Address and ZIP Code National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002	Purpose of Disbursement Misc List Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/00	\$16.66 * * in-kind received
D. Full Name, Mailing Address and ZIP Code National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002	Purpose of Disbursement Misc Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/00	\$2.78 * * in-kind received
E. Full Name, Mailing Address and ZIP Code National Jewish Democratic Council PAC 501 Capitol Court NE #300 Washington, DC 20002	Purpose of Disbursement Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/8/00	\$86.25 * * in-kind received
F. Full Name, Mailing Address and ZIP Code A Complete Rental 1020 West Mount Hope Lansing, MI 48917	Purpose of Disbursement FR Equipment Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$112.62
G. Full Name, Mailing Address and ZIP Code A.J. Goodman Consulting 1718 M St NW #238 Washington, DC 20036	Purpose of Disbursement FR Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	\$4,000.00
H. Full Name, Mailing Address and ZIP Code Amanda Jones 233 N Pine Lansing, MI 48933	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$738.00
I. Full Name, Mailing Address and ZIP Code Amanda Jones 233 N Pine Lansing, MI 48933	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$738.00

SUBTOTAL of Disbursements This Page (optional) \$6,003.15

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Angela Autera 1886 Melrose East Lansing, MI 48823	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$570.08
Angela Autera 1886 Melrose East Lansing, MI 48823	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,385.70
Balloons-N-More 27105 Ford Rd. Dearborn Hgls., MI 48127	FR Decorations Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$330.00
Bank of America P.O. Box 27025 Richmond, VA 23261	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	\$3.00
Bill Sweeney 3030 Staten Ave # 10 Lansing, MI 48910	Reimbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$42.35
Bill Sweeney 3030 Staten Ave # 10 Lansing, MI 48910	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,222.31
Bill Sweeney 3030 Staten Ave # 10 Lansing, MI 48910	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,222.31
Bob Gibson 1933 Wood St #2 Lansing, MI 48912	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$864.29
Margee Ganady 1434 Karlin Ct East Lansing, MI 48823-2333	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,357.05

SUBTOTAL of Disbursements This Page (optional)

\$7,097.10

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Margee Canady 1434 Karlin Ct East Lansing, MI 48823-2333	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,357.05
B. Full Name, Mailing Address and ZIP Code Carol Butler 1229 Weber Dr. Lansing, MI 48912	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$3,140.92
C. Full Name, Mailing Address and ZIP Code Carol Butler 1229 Weber Dr. Lansing, MI 48912	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$3,140.92
D. Full Name, Mailing Address and ZIP Code Carrie Jones 233 N. Pine St. Lansing, MI 48933	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$738.00
E. Full Name, Mailing Address and ZIP Code Carrie Jones 233 N. Pine St. Lansing, MI 48933	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$738.00
F. Full Name, Mailing Address and ZIP Code OB Richard Ellis/Marlin 1111 Michigan Ave, #201 East Lansing, MI 48823	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	\$2,742.00
G. Full Name, Mailing Address and ZIP Code Cheryl Handsor 221 N. Francis Lansing, MI 48912	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,151.28
H. Full Name, Mailing Address and ZIP Code Cheryl Handsor 221 N. Francis Lansing, MI 48912	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,151.28
I. Full Name, Mailing Address and ZIP Code Citibank P.O. Box 6415 The Lakes, NY 88901	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$73.43

SUBTOTAL of Disbursements This Page (optional)

\$14,232.88

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

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NAME OF COMMITTEE (In Full) Stabenow for Senate C00344473			
A. Full Name, Mailing Address and ZIP Code City National Bank Plaza Towers Office 2029 Century Park East B Level Los Angeles, CA 90067	Purpose of Disbursement Bank Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/1/00	Amount of Each Disbursement This Period \$5.00
B. Full Name, Mailing Address and ZIP Code Dinah Dale 16 Windsor Ct Little Rock, AR 72212-1440	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/16/00	Amount of Each Disbursement This Period \$2,712.29
C. Full Name, Mailing Address and ZIP Code Dinah Dale 16 Windsor Ct Little Rock, AR 72212-1440	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/1/00	Amount of Each Disbursement This Period \$2,712.29
D. Full Name, Mailing Address and ZIP Code Dustie Janitorial P.O. Box 44045 Detroit, MI 48244	Purpose of Disbursement Janitorial Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/2/00	Amount of Each Disbursement This Period \$206.88
E. Full Name, Mailing Address and ZIP Code Dustie Janitorial P.O. Box 44045 Detroit, MI 48244	Purpose of Disbursement Janitorial Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/17/00	Amount of Each Disbursement This Period \$206.88
F. Full Name, Mailing Address and ZIP Code Britany Eiseler 1737 Alan Ln Lansing, MI 48917-2901	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/16/00	Amount of Each Disbursement This Period \$309.10
G. Full Name, Mailing Address and ZIP Code Britany Eiseler 1737 Alan Ln Lansing, MI 48917-2901	Purpose of Disbursement Payroll Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/1/00	Amount of Each Disbursement This Period \$309.10
H. Full Name, Mailing Address and ZIP Code Britany Eiseler 1737 Alan Ln Lansing, MI 48917-2901	Purpose of Disbursement Reimbursement Auto Expense Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/16/00	Amount of Each Disbursement This Period \$81.48
I. Full Name, Mailing Address and ZIP Code Emilys List 805 15th St NW Washington, DC 20005	Purpose of Disbursement Bank Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 10/18/00	Amount of Each Disbursement This Period \$592.13
SUBTOTAL of Disbursements This Page (optional)			\$7,135.15
TOTAL This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C0034473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Emilys List 805 15th St NW Washington, DC 20005	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/00	\$666.23
Emilys List 805 15th St NW Washington, DC 20005	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$5,896.00
Emilys List 805 15th St NW Washington, DC 20005	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/00	\$235.03
Emilys List 805 15th St NW Washington, DC 20005	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	\$6,768.00
Executive Conference Inc. 415 Hamburg Turnpike Wayne, NJ 07470	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/00	\$673.66
Facsimile Systems 27200 Haggerty #B2 Farmington Hills, MI 48331	Equipment Rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$227.17
Susan Geiger 7905 Taeker Rd Lake Odessa, MI 48849-9427	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$56.98
Gordon & Schwenkmeier 300 N Sepulveda Blvd # 2050 El Segundo, CA 90245	Telemarketing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$7,193.01
Gordon Insurance Agency, Inc. 2145 University Park Dr. #256 Okemos, MI 48864	Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/00	\$336.00

SUBTOTAL of Disbursements This Page (optional)

\$22,152.08

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)

Stabenow for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Heather Farr 1029 Runaway Bay Dr. 3A Lansing, MI 48917	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$989.30
Heather Farr 1029 Runaway Bay Dr. 3A Lansing, MI 48917	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$989.30
Hitches & More 2605 N Grand River Lansing, MI 48912	Equipment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$143.50
JoAnne Huls 436 New Jersey Ave SE Washington, DC 20003-1014	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,328.95
JoAnne Huls 436 New Jersey Ave SE Washington, DC 20003-1014	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,328.95
Human Rights Campaign Fund PAC 919 18th Street NW #800 Washington, DC 20006	Staffer Stipend Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/00	\$400.00 *
Ian Woodward 348 M.A.C Ave East Lansing, MI 48823	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$785.50
Ian Woodward 346 M.A.C Ave East Lansing, MI 48823	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$785.50
Integram 2730 Prosperity Ave #C Fairfax, VA 22031	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$13,786.36

SUBTOTAL of Disbursements This Page (optional)

\$20,507.36

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Operating Expenditures

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ivy Shannon 1304 Whittier Place Washington, DC 20012	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$900.29
Ivy Shannon 1304 Whittier Place Washington, DC 20012	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$757.77
Jason Ziech 739 Louisa #66 Lansing, MI 48911	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$827.65
Jason Ziech 739 Louisa #66 Lansing, MI 48911	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$827.65
Jennifer Lefevre 509 Westmoreland Ave Lansing, MI 48915	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,284.66
Jennifer Lefevre 509 Westmoreland Ave Lansing, MI 48915	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,284.66
Kerin Polla 1516 West Ottawa Lansing, MI 48915	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,123.68
Kerin Polla 1516 West Ottawa Lansing, MI 48915	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,123.68
Kimberly Hoffman 1905 Peppertree Lane Lansing, MI 48912	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$954.72

SUBTOTAL of Disbursements This Page (optional)

\$9,064.76

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SCHEDULE B

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Operating Expenditures

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kimberly Hoffman 1805 Peppertree Lane Lansing, MI 48912	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$954.72
Kimberly Trent 28870 Inkster Rd Southfield, MI 48034	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,586.49
Kimberly Trent 28870 Inkster Rd Southfield, MI 48034	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,586.49
Kinko's 626 Michigan Ave. East Lansing, MI 48823	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$24.00
Lake Sagin Snell Perry & Associates 1730 Rhode Island NW Ste 400 Washington, DC 20036	Research Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$17,997.00
Lake Sagin Snell Perry & Associates 1730 Rhode Island NW Ste 400 Washington, DC 20036	Travel and Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$3,166.49
Media Strategies 31B Massachusetts Ave NE Washington, DC 20002	Media Buy Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/00	\$506,260.00
Media Strategies 31B Massachusetts Ave NE Washington, DC 20002	Media Buy Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	\$293,740.00
Michigan Bankard Services P.O. Box 30993 Lansing, MI 48909	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/00	\$1,718.19

SUBTOTAL of Disbursements This Page (optional)

\$927,033.38

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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Operating Expenditures

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Michigan Department of Treasury Dept. 77602 Detroit, MI 48277	State Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$9,462.84
B. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Purpose of Disbursement Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/00	\$453.00
C. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Purpose of Disbursement Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	\$15.00
D. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Purpose of Disbursement Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/00	\$5.95
E. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Purpose of Disbursement Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/00	\$15.00
F. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Purpose of Disbursement Federal Withholding Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$31,278.00
G. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Purpose of Disbursement Federal Unemployment Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$531.80
H. Full Name, Mailing Address and ZIP Code Michigan National Bank PO Box 40766 Lansing, MI 48901	Purpose of Disbursement Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/00	\$5.00
I. Full Name, Mailing Address and ZIP Code Michigan State Senate P.O. Box 30035 Lansing, MI 48909	Purpose of Disbursement Health Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$598.25

SUBTOTAL of Disbursements This Page (optional)

\$42,365.84

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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Operating Expenditures

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NAME OF COMMITTEE (in Full)

Stephanov for Senate CD0344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MOVEON.ORG PAC P.O. Box 9063 Berkeley, CA 94708	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	\$198.51
B. Full Name, Mailing Address and ZIP Code MOVEON.ORG PAC P.O. Box 9063 Berkeley, CA 94709	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$101.55
C. Full Name, Mailing Address and ZIP Code Northwest Airlines 4100 Capitol City Blvd. Lansing, MI 48906	Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/00	\$50.00
D. Full Name, Mailing Address and ZIP Code Northwest Airlines 4100 Capitol City Blvd. Lansing, MI 48906	Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	\$448.50
E. Full Name, Mailing Address and ZIP Code Denise O'Neal 268 Phillips Hall East Lansing, MI 48825	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$512.08
F. Full Name, Mailing Address and ZIP Code Denise O'Neal 268 Phillips Hall East Lansing, MI 48825	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$517.58
G. Full Name, Mailing Address and ZIP Code Palmnet 226 International Parkway Lake Mary, FL 32746	Equipment Maintenance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/8/00	\$41.55
H. Full Name, Mailing Address and ZIP Code Participallon 2000 236 Massachusetts Ave NE Washington, DC 20002	Staffer Stipend Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/00	\$750.00 *
I. Full Name, Mailing Address and ZIP Code Patty Bouch 1555 Grotton Rd Bloomfield Hills, MI 48302	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,022.24

SUBTOTAL of Disbursements This Page (optional)

\$3,638.01

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF 15
FOR LINE NUMBER 17

Operating Expenditures

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)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Patty Bouch 1555 Groton Rd Bloomfield Hills, MI 48302	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,022.24
B. Full Name, Mailing Address and ZIP Code Teresa Plachetka 1375 Germany Rd Williamston, MI 48895-9610	Consultant Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	\$3,550.00
C. Full Name, Mailing Address and ZIP Code Postmaster3 East Lansing, MI 48823	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	\$23.13
D. Full Name, Mailing Address and ZIP Code Postmaster3 East Lansing, MI 48823	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Postmaster3 East Lansing, MI 48823	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	\$1,562.00
F. Full Name, Mailing Address and ZIP Code Postmaster3 East Lansing, MI 48823	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$198.00
G. Full Name, Mailing Address and ZIP Code Postmaster Washington DC 20515	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$70.00
H. Full Name, Mailing Address and ZIP Code Radio Shack Detroit MI 48201	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$28.59
I. Full Name, Mailing Address and ZIP Code Jeanne Raven 136 Reniger Ct #311 East Lansing, MI 48823	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$309.10

SUBTOTAL of Disbursements This Page (optional)

\$7,763.06

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 12 OF 15
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
File Aid 4485 Jefferson Detroit, MI 48214	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	\$13.98
B. Full Name, Mailing Address and ZIP Code River Plaza Apartments 8430 East Jefferson Detroit, MI 48214	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/8/00	\$375.00
C. Full Name, Mailing Address and ZIP Code River Plaza Apartments 8430 East Jefferson Detroit, MI 48214	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/00	\$512.50
D. Full Name, Mailing Address and ZIP Code Robert Gibbs 3618 Keller Ave Alexandria, VA 22302	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$2,107.06
E. Full Name, Mailing Address and ZIP Code Robert Gibbs 3618 Keller Ave Alexandria, VA 22302	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$2,107.06
F. Full Name, Mailing Address and ZIP Code Sam's Club 340 E. Edgewood Blvd. Lansing, MI 48915	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/00	\$61.72
G. Full Name, Mailing Address and ZIP Code Sealander Brokerage 200 G St NE Washington, DC 20002	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	\$1,057.50
H. Full Name, Mailing Address and ZIP Code Shanna Singh 812 Packard Ann Arbor, MI 48104	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$748.00
I. Full Name, Mailing Address and ZIP Code Shanna Singh 812 Packard Ann Arbor, MI 48104	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$748.00

SUBTOTAL of Disbursements This Page (optional)

\$7,730.82

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 13 OF 15
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shannon Tabron 5383 Holcomb Detroit, MI 48213	Event Food & Bev Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$300.00
Todd Stabenow 6100 Columbia St Haslett, MI 48840-9734	Reimbursement Auto Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$198.63
Todd Stabenow 6100 Columbia St Haslett, MI 48840-9734	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$919.17
Todd Stabenow 6100 Columbia St Haslett, MI 48840-9734	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$919.17
Stacey Younger 716 4th St NE Washington, DC 20002	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$886.69
Stacey Younger 716 4th St NE Washington, DC 20002	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$886.69
State Mini Storage 3946 E. State Rd Bath, MI 48808	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/5/00	\$67.00
Stephanie Serwa 2345 N. Harrison Rd #10 East Lansing, MI 48823	Reimbursement Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$34.98
Stephanie Serwa 2345 N. Harrison Rd #10 East Lansing, MI 48823	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$337.57

SUBTOTAL of Disbursements This Page (optional)

\$4,549.90

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 14 OF 15
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stephanie Serwa 2345 N. Harrison Rd #10 East Lansing, MI 48823	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$549.71
B. Full Name, Mailing Address and ZIP Code Steven Banks 1978 Preat Detroit, MI 48235	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$404.82
C. Full Name, Mailing Address and ZIP Code Steven Banks 1978 Preat Detroit, MI 48235	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$404.82
D. Full Name, Mailing Address and ZIP Code Amanda Still 1214 Blanchard Flint, MI 48503-3587	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$748.00
E. Full Name, Mailing Address and ZIP Code United Airlines P.O. Box 7780-21729 Philadelphia, PA 19182	Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/00	\$1,066.00
F. Full Name, Mailing Address and ZIP Code Vivian Leung 1527 W. Ottawa Lansing, MI 48915	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$1,236.79
G. Full Name, Mailing Address and ZIP Code Vivian Leung 1527 W. Ottawa Lansing, MI 48915	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$1,236.79
H. Full Name, Mailing Address and ZIP Code Walter Herzig 320 Stratford Farmdale, MI 48220	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$2,144.80
I. Full Name, Mailing Address and ZIP Code Walter Herzig 320 Stratford Farmdale, MI 48220	Reimbursement Auto Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	\$42.87

SUBTOTAL of Disbursements This Page (optional)

\$7,834.70

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 15 OF 15
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Stabenow for Senate C00944473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Walter Herzig 320 Stratford Ferndale, MI 48220	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/00	\$2,144.80
B. Full Name, Mailing Address and ZIP Code Tim Wynn 7479 Prairie St Detroit, MI 48210-1019	Field Coordinator Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code US Bank National Assn. ND P.O. Box 6345 Fargo, ND 58125	Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$1,299.99
D. Full Name, Mailing Address and ZIP Code Hotel Pontchartrain Detroit MI 48214	Lodging Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	MEMO \$303.00
E. Full Name, Mailing Address and ZIP Code Marriott Hotel Detroit MI	Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	MEMO \$120.45
F. Full Name, Mailing Address and ZIP Code Marriott Hotel Detroit MI	Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	MEMO \$55.25
G. Full Name, Mailing Address and ZIP Code Marriott Hotel Detroit MI	Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	MEMO \$120.45
H. Full Name, Mailing Address and ZIP Code Wyndham Hotel Los Angeles CA	Lodging Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	MEMO \$475.99
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$4,444.79

TOTAL This Period (last page this line number only)

\$991,572.98

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 2
FOR LINE NUMBER 20(a)

Refunds of Contributions to Individuals

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NAME OF COMMITTEE (In Full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Amy S Courter 9081 Silverside Dr South Lyon, MI 48178-9325	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$25.00
Michael F Fink 3439 Brae Bourn Dr Huntingdon Valley, PA 19006	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	\$100.00
Timothy F Hannegan 6601 Lybrook Ct Bethesda, MD 20817	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	\$300.00
Joanne Hart 1111 Race St #12AB Denver, CO 80206	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	\$700.00
Marion F Levy 333 E 66th St New York, NY 10021	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	\$500.00
Kate McGee 10227 Big Rock Rd Silver Spring, MD 20901	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$550.00
Barbara Miller 30 Usonia Rd Pleasantville, NY 10570-2617	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	\$50.00
Vera C Pratt 4314 Kingle St NW Washington, DC 20015	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$500.00
Margaret Reuss 34 Cove Rd Belvedere Tiburon, CA 94920	Refund Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$500.00

SUBTOTAL of Disbursements This Page (optional)

\$3,225.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 20(a)

Refunds of Contributions to Individuals

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NAME OF COMMITTEE (In Full)

Slabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Marc Ross 1056 Martin Pl Ann Arbor, MI 48104-3511	Refund Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/00	\$50.00
B. Full Name, Mailing Address and ZIP Code Seminole Tribe of Florida 8300 Stirling Rd Hollywood, FL 33024	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Lila Silverman 4054 Cranbrook Ct Bloomfield Hills, MI 48301-1714	Refund Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	\$50.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$1,100.00

TOTAL This Period (See page this line number only)

\$4,325.00

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Preparer

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