REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE
96 FEB -5 AM 10:02
H.D.
C00256610

USE FEC MAILING LABEL OR TYPE OR PRINT

1. C00256610 IL/00 120495 P 404
EARL WENDELL HOPEWELL
A CAROL MOSELEY BRAUN FOR U S SE
NATE
201 N WELLS SUITE
C CHICAGO IL 60606

2. FEC IDENTIFICATION NUMBER

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report
- ☐ July 15 Quarterly Report
- ☐ October 15 Quarterly Report
- ☒ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)
- ☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
- ☐ Thirtieth day report following the General Election on _____ in the State of _____
- ☐ Termination Report

This report contains activity for 1998 ☒ Primary Election ☒ 1992 General Election ☐ Special Election ☐ Runoff Election

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 7/1/95 through 12/31/95		
6.	Net Contributions (other than loans)		
(a)	Total Contributions (other than loans) (from Line 11(e))	269,349.00	525,539.00
(b)	Total Contribution Refunds (from Line 20(d))	33,500.70	104,660.90
(c)	Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	235,848.30	420,879.10
7.	Net Operating Expenditures	243,500.26	443,050.08
(a)	Total Operating Expenditures (from Line 17)		
(b)	Total Offsets to Operating Expenditures (from Line 14)	-0-	120.00
(c)	Net Operating Expenditures (subtract Line 7(b) from 7(a))	243,500.26	442,930.08
8.	Cash on Hand at Close of Reporting Period (from Line 27)	1,466.67	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	2,858.89	
10.	Debts and Obligations Owed BY (Itemize all on Schedule C and/or Schedule D) Pre-Elec.203,741.82 Pos-Elec.359,582.35	563,324.17	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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: Earl Hopewell

Signature of Treasurer: Earl Hopewell

Date: January 31,1996

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

FE5AN059

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full): Carol Moseley Braun For U.S.Senate C00256610

Report Covering the Period: From: July 1 To: December 31

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)	160,750.00		11(a)(i)
(ii) Unitemized	26,499.00		11(a)(ii)
(iii) Total of contributions from individuals	187,249.00	334,639.00	11(a)(iii)
(b) Political Party Committees			11(b)
(c) Other Political Committees (such as PACs)	82,100.00	190,900.00	11(c)
(d) The Candidate			11(d)
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	269,349.00	525,539.00	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate			13(a)
(b) All Other Loans			13(b)
(c) TOTAL LOANS (add 13(a) and (b))			13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	-0-	120.00	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	6,084.07	15,157.50	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	275,433.07	540,816.50	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	243,500.26	443,050.08	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			19(a)
(b) Of All Other Loans			19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	32,000.70	103,160.90	20(a)
(b) Political Party Committees			20(b)
(c) Other Political Committees (such as PACs)	1,500.00	1,500.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	33,500.70	104,660.90	20(d)
21. OTHER DISBURSEMENTS			21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	277,000.96	547,710.98	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 3,034.56	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 275,433.07	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 278,467.63	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 277,000.96	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 1,466.67	27

FE5AN059

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CAROL MOSELEY BRAUN
DEMOCRAT U.S. SENATE

Earmarked Contributions

Organization Sending Earmarked Contribution	Contributor
General Electric Company Political Action Committee FEC No.C00024869 1299 Pennsylvania Ave.,NW Washington, DC 20004	James Shepard 3000 North Grandview Blvd Waukesha, WI 53188 General Manager-Nuclear Medicine GE Medical Systems $200.00 December 29, 1995
ATT Political Action Committee FEC No. C00185124 32 Ave. of the Americas New York, NY 10013	Rosezeal Smith 17901 Los Angeles Street Homewood, IL 60430 Manager ATT Communications $120.00 August 22, 1995

960205094

201 North Wells Street • Suite 1420 • Chicago Il. 60606
Phone 1-312-541-9292 • Fax 1-312-541-3737

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS

Page 1 of 2 for
LINE NUMBER 9

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor State of Illinois Deport. of Employment Security P.O. Box 802551 Chicago, IL 60680-2551	1,361.49			1,361.49
--Nature of Debt (Purpose): Overpayment during 1992.				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor AAA Office Service, Inc. 645 North Michigan Avenue Chicago, IL 60611	512.40			512.40
--Nature of Debt (Purpose): Double payment from overbilling during 1992.				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Audrey Krasnow 656 West Melrose Avenue Chicago, IL 60657	95.00			95.00
--Nature of Debt (Purpose): Double payment from overbilling during 1992.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor U.S. Postmaster Main Post Office 433 West VanBuren Chicago, IL 60601				0.00
--Nature of Debt (Purpose): Refund from "self-stamped" Business Reply Direct Mailings-Unestim.				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Austin-Sheinkopf 7700 River Edge Drive Columbus, OH 43245				0.00
--Nature of Debt (Purpose): Refund from unexecuted media purchases-Unestimateable.				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Illinois Bell Bill Payment Center Chicago, IL 60663	890.00			890.00
--Nature of Debt (Purpose): Final amount due from payments during 1992 (all-deposit inclusive).				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	2,858.89
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 B
(Revised 3/86)

DEBTS AND OBLIGATIONS

Page 2 of 2 for

Name of Committee (in Full)	Balance at Beginning of This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Axelrod & Associates Suite 404 730 N. Franklin Chicago,IL 60610	57,000.00	(57,000.00)		-0-
Nature of Debt (Purpose): Media buy accounting made. Final adjustment pending review of forthcoming invoices.				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Shields and Associates 190 Smallwood Village Ctr Waldorf,, MD 20602				0.00
Nature of Debt (Purpose): Receivable from direct mail list rentals. Accounting requested, currently unestimateable.				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Losser and Associates 1710 U Street N.W. Suite 3 Washington DC 20602				0.00
Nature of Debt (Purpose): Receivable from direct mail list rentals. Accounting requested, currently unestimateable.				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	0.00
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)	2,858.89

TOTAL ALL PAGES:

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 7

FOR LINE NUMBER: 11(a)

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): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence, O'Donnell Marcus & Company 55 Water Street New York, NY 10041 Receipt For: [x] Primary [ ] General [ ] Other (specify):	Investment Firm Occupation Aggregate Year-to-Date > $ 500.00	08-08-95	500.00
B. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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)	500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 2 OF 17

FOR LINE NUMBER: 11(i)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code CMJ Partners Two Wall Street New York, NY 10005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Investment Firm Occupation Aggregate Year-to-Date > $ 500.00	08-08-95	500.00
B. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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) 500.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 17

FOR LINE NUMBER: Partnership 11(1)

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NAME OF COMMITTEE (In Full)

Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code Holleb & Coff 55 E. Monroe Street Suite 4100 Chicago, IL 60603	Name of Employer Best Effort Request Made	Date (month, day, year) 12-06-95	Amount of Each Receipt this Period 500.00
Receipt For: X Primary ☐ General ☐ Other (specify):	Occupation Attorneys at Law		
	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
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	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
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	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
Receipt For: ☐ Primary ☐ General ☐ 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
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $		

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

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SCHEDULE A — ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page — PAGE 4 OF 7

Partnership — FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00255610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Law Offices of Karlin and Fleisher 111 W. Washington St. Chicago, IL 60602 Receipt For: X Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 500.00	12-06-95	500.00
B. Full Name, Mailing Address and ZIP Code Richard S. Fleisher 111 W. Washington Chicago,IL 60602 Receipt For: X Primary ☐ General ☐ Other (specify):	Name of Employer: Karlin & Fleisher Occupation: Attorney Aggregate Year-to-Date > $ 500.00	12-06-95	500.00 Memorandum
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) 500.00

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

4-00172

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SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 5 OF 17

FOR LINE NUMBER: 11(i)

Partnership

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code Nash, Lalich & Kralovec 30 N. LaSalle, Ste. 1526 Chicago, IL 60602 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Law Firm Occupation: Aggregate Year-to-Date > $ 250.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 250.00
B. Full Name, Mailing Address and ZIP Code Michael Kralovec 30 N. La Salle, Ste. 1526 Chicago, IL 60602 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Nash, Lalich & Kralovec Occupation: Attorney Aggregate Year-to-Date > $ 250.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 250.00 Memorandum
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) > 250.00

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

4-00172

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SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code The Bourgeios Law Firm, 8555 S. Cottage Grove Chicago, IL 60625 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation: Law Firm Aggregate Year-to-Date > $ 500.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 500.00
B. Full Name, Mailing Address and ZIP Code Adam Bourgeois 8555 S. Cottage Grove Chicago,IL 60625 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Bourgeios Law Firm Occupation: Attorney Aggregate Year-to-Date > $ 250.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 250.00 Memorandum
C. Full Name, Mailing Address and ZIP Code Christopher Millett 8555 S. Cottage Grove Chicago,IL 60625 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Bourgeios Law Firm Occupation: Attorney Aggregate Year-to-Date > $ 250.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 250.00 Memorandum
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)	500.00
TOTAL This Period (last page this line number only)	

4-00172

9 4 0 2 0 0 5 0 1 0 2

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

Entry	Full Name, Mailing Address and ZIP Code	Receipt For	Name of Employer	Occupation	Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
A.	Blank	[ ] Primary [ ] General [ ] Other (specify):					
B.	Blank	[ ] Primary [ ] General [ ] Other (specify):					
C.	Blank	[ ] Primary [ ] General [ ] Other (specify):					
D.	Blank	[ ] Primary [ ] General [ ] Other (specify):					
E.	MADHIC Partnership 2650 N. Lakeview Chicago, IL 60614	[XX] Primary [ ] General [ ] Other (specify):			500.00	12-06-95	500.00
F.	Marshall M. Holleb 2650 N. Lakeview Chicago, IL 60614	[XX] Primary [ ] General [ ] Other (specify):	MADHIC Partnership	Attorney	250.00	12-06-95	250.00 Memo Entry
G.	Doris B. Holleb 2650 N. Lakeview Chicago, IL 60614	[XX] Primary [ ] General [ ] Other (specify):	MADHIC Partnership	Professor	250.00	12-06-95	250.00 Memo Entry

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	3,250.00

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page: Partnership	PAGE 1 OF 12
	FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas A.Coleman CMJ Partners Two Wall Street New York, NY 10005	Occupation: Investment Firm Partner	8-8-95	71.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 71.00		Memo

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Gonzalez CMJ Partners Two Wall Street New York, NY 10005	Occupation: Investment Firm Partner	8-8-95	69.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 69.00		Memo

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph A. Mahoney CMJ Partners Two Wall Street New York, NY 10005	Occupation: Investment Firm Partner	8-8-95	74.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 74.00		Memo

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel P. Mahoney CMJ Partners Two Wall Street New York, NY 10005	Occupation: Investment Firm Partner	8-8-95	69.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 69.00		Memo

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alfred E. Smith IV CMJ Partners Two Wall Street New York, NY 10005	Occupation: Investment Firm Partner	8-8-95	44.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 44.00		Memo

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael J. Kelly CMJ Partners Two Wall Street New York, NY 10005	Occupation: Investment Firm Partner	8-8-95	48.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 48.00		Memo

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jose W. Noyes CMJ Partners Two Wall Street New York, NY 10005	Occupation: Investment Firm Partner	8-8-95	8.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 8.00		Memo

SUBTOTAL of Receipts This Page (optional)	-0-
TOTAL This Period (last page this line number only)	-0-

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SCHEDULE A — **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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)
Carol Moseley Braun
For U.S.Senate C00256610

Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Receipt For	Date (month, day, year)	Amount of Each Receipt this Period	Aggregate Year-to-Date
A. Perry P. Jacobson CMJ Partners Two Wall Street New York, NY 10005	→ (CMJ Partners)	Investment Firm Partner	[X] Primary [ ] General [ ] Other (specify):	8-8-95	48.00 Memo	$ 48.00
B. Mark E. Axelrod CMJ Partners Two Wall Street New York, NY 10005	→ (CMJ Partners)	Investment Firm Partner	[X] Primary [ ] General [ ] Other (specify):	8-8-95	3.00 Memo	$ 3.00
C. Joseph P. Finnegan CMJ Partners Two Wall Street New York, NY 10005	→ (CMJ Partners)	Investment Firm Partner	[X] Primary [ ] General [ ] Other (specify):	8-8-95	26.00 Memo	$ 26.00
D. Kevin M. Shaughnessy CMJ Partners Two Wall Street New York, NY 10005	→ (CMJ Partners)	Investment Firm Partner	[X] Primary [ ] General [ ] Other (specify):	8-8-95	21.00 Memo	$ 21.00
E. Louis V. Studer CMJ Partners Two Wall Street New York, NY 10005	→ (CMJ Partners)	Investment Firm Partner	[X] Primary [ ] General [ ] Other (specify):	8-8-95	10.00 Memo	$ 10.00
F. James M. Mullin CMJ Partners Two Wall Street New York, NY 10005	→ (CMJ Partners)	Investment Firm Partner	[X] Primary [ ] General [ ] Other (specify):	8-8-95	10.00 Memo	$ 10.00
G.			[ ] Primary [ ] General [ ] Other (specify):			$

SUBTOTAL of Receipts This Page (optional) .... -0-

TOTAL This Period (last page this line number only) .... -0-

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 14

FOR LINE NUMBER 11(b)

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): Carol Moseley Braun For U.S.Senate C00256610

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code BLANK Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code Salvatore Amato Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date: $ 8.49	8-8-95	8.49 Memo
C. Full Name, Mailing Address and ZIP Code Marvin Balm Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date: $ 8.49	8-8-95	8.49 Memo
D. Full Name, Mailing Address and ZIP Code Shirley Berkowitz Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date: $ 2.83	8-8-95	2.83 Memo
E. Full Name, Mailing Address and ZIP Code Joseph Bongiorno Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date: $ 22.65	8-8-95	22.65 Memo
F. Full Name, Mailing Address and ZIP Code James Cleaver, Jr. Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date: $ 48.14	8-8-95	48.14 Memo
G. Full Name, Mailing Address and ZIP Code Robert M. Flanagan Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date: $ 48.14	8-8-95	48.14 Memo

SUBTOTAL of Receipts This Page (optional)	-0-
TOTAL This Period (last page this line number only)	-0-

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SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 2 OF 14

FOR LINE NUMBER: 11b1

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): Carol Moseley Braun For U.S.Senate C00256610

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. John J. Flanagan, Jr. Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	INVESTMENT FIRM / PARTNER / $ 16.98	8-8-95	16.98 Memo
B. William R. Flanagan Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	INVESTMENT FIRM / PARTNER / $ 9.91	8-8-95	9.91 Memo
C. Fredrick J. Gorsline Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	INVESTMENT FIRM / PARTNER / $ 15.56	8-8-95	15.56 Memo
D. Gerard T. Hayes Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	INVESTMENT FIRM / PARTNER / $ 7.08	8-8-95	7.08 Memo
E. Michael J. Hayward Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	INVESTMENT FIRM / PARTNER / $ 15.57	8-8-95	15.57 Memo
F. John V. Hoey Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	INVESTMENT FIRM / PARTNER / $ 31.15	8-8-95	31.15 Memo
G. Richard Kepner Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 — Receipt For: [X] Primary [ ] General [ ] Other (specify):	INVESTMENT FIRM / PARTNER / $ 8.50	8-8-95	8.50 Memo

SUBTOTAL of Receipts This Page (optional)	-0-
TOTAL This Period (last page this line number only)	-0-

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11i

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A.Vincent Lawrence Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 22.65	8-8-95	22.65 Memo
B. Full Name, Mailing Address and ZIP Code Edward F. Luppens Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 9.92	8-8-95	9.92 Memo
C. Full Name, Mailing Address and ZIP Code Loretta Maragni Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 4.25	8-8-95	4.25 Memo
D. Full Name, Mailing Address and ZIP Code Steve Marcus Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 45.30	8-8-95	45.30 Memo
E. Full Name, Mailing Address and ZIP Code Mark J. Mazzella Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 9.92	8-8-95	9.92 Memo
F. Full Name, Mailing Address and ZIP Code John F. O'Donnell Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 48.38	8-8-95	48.38 Memo
G. Full Name, Mailing Address and ZIP Code Michael T. Russo, Jr. Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 31.15	8-8-95	31.15 Memo

SUBTOTAL of Receipts This Page (optional) ..... -0-

TOTAL This Period (last page this line number only) ..... -0-

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 14
Partnership	FOR LINE NUMBER 11i

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)
Carol Moseley Braun
For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code Siegfried R. Schramm Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 9.92	Date (month, day, year): 8895	Amount of Each Receipt this Period: 9.92 Memo
B. Full Name, Mailing Address and ZIP Code Michael F. Stern Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 33.97	Date (month, day, year): 8895	Amount of Each Receipt this Period: 33.97 Memo
C. Full Name, Mailing Address and ZIP Code Harold Yosco Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 25.48	Date (month, day, year): 8895	Amount of Each Receipt this Period: 25.48 Memo
D. Full Name, Mailing Address and ZIP Code James W. Zucker Lawrence, O'Donnell, Marcus & Company 61 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: INVESTMENT FIRM Occupation: PARTNER Aggregate Year-to-Date > $ 15.57	Date (month, day, year): 8895	Amount of Each Receipt this Period: 15.57 Memo
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)	-0-
TOTAL This Period (last page this line number only)	-0-

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SCHEDULE A — **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
George Morrow 3102 Devon Road Durham, NC 27707 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Best Effort Request Made Occupation Aggregate Year-to-Date $ 1,000.00	07-17-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Margaret B. Dardess 44 Cedar Hills Cir. Chapel Hill, NC 27514 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Glaxo Wellcome Occupation: Corp.Vice-President Aggregate Year-to-Date $ 1,000.00	Date (month, day, year): 07-18-95	Amount of Each Receipt this Period: 1,000.00
C. Full Name, Mailing Address and ZIP Code Karen M Proctor 3426 Rugby Road Durham, NC 27707 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Best Effort Request Made Occupation Aggregate Year-to-Date $ 1,000.00	Date (month, day, year): 07-18-95	Amount of Each Receipt this Period: 1,000.00
D. Full Name, Mailing Address and ZIP Code Janie A. Kinney 4825 Quebec St.NW Washington, DC 20015 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Glaxo Corporation Occupation: Corp.Vice-President Aggregate Year-to-Date $	Date (month, day, year): 08-08-95	Amount of Each Receipt this Period: 1,000.00
E. Full Name, Mailing Address and ZIP Code Randolph B. Fenninger 9009 Avis Ct Vienna, VA 22182 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: MARC Associates, Inc. Occupation: Attorney/Lobbyist Aggregate Year-to-Date $ 1,000.00	Date (month, day, year): 08-10-95	Amount of Each Receipt this Period: 1,000.00
F. Full Name, Mailing Address and ZIP Code Leonard Bickwit, Jr. 2821 Dumbarton Ave.NW Washington, DC 20007 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Miller & Chevalier Chartered Occupation: Lobbyist Aggregate Year-to-Date $ 1,000.00	Date (month, day, year): 08-11-95	Amount of Each Receipt this Period: 1,000.00
G. Full Name, Mailing Address and ZIP Code Marsha Aldridge 711 Hight Street Des Moines, IA 50392 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: The Principal Finan. Occupation: Financial Services Aggregate Year-to-Date $ 1,000.00	Date (month, day, year): 08-11-95	Amount of Each Receipt this Period: 1,000.00

SUBTOTAL of Receipts This Page (optional) 7,000.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 35

FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (In Full) Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James H. Davidson 1101 Penn.Ave. NW Washington, DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	The Principal Davidson Colling Group, zLobbyist $ 1,000.00	08-14-95	1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Z. Slavin 4620 N. Park Avenue Chevy Chase, MD 20815 Receipt For: [ ] Primary [X] General [ ] Other (specify):	C.J.O'Shaughnessy, Inc. Principal (Broker) $ 500.00	08-17-95	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Henry W. Foster 4140 W. Hamilton Road. Nashville, TN 37218 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Meharry Medical School Medical Docotor $ 250.00	08-17-95	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Robert P. Corey 350 East Dundee Road Wheeling, IL 60090 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Cole Talor Bank Banking $ 300.00	08-30-95	300.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Walter P. Lomax 200 Highpoint Drive Chalfont, PA 18914 Receipt For: [X] Primary [ ] General [ ] Other (specify):	OmniCare Health Meical Doctor $ 500.00	08-30-95	500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Gary J. Maher 1108 Fair Oaks Oak Park, IL 60302 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Cable Televison Assoc. President $ 1,000.00	09-14-95	1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
John O'Hanlon 1907 Belfield Rd. Alexandria, VA 22307 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Raffaelli,Spees, Springer Partner $ 500.00	09-15-96	500.00

SUBTOTAL of Receipts This Page (optional) 4,050.00

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 3 OF 35

FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Percy E. Sutton 10 W. 135th Street New York, NY 10037 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Inner CityTheatre Group General Partner $ 2,000.00	09-20-95	1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Thomas R. Donovan 141 W. Jackson Blvd #600A Chicago, IL 60604 Receipt For: [X] Primary [ ] General [ ] Other (specify):	President & CEO CBOT Chicago Board of Trade Financial Industry $ 1,000.00	09-21-95	1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Bruce D'Alba 10 Maple Hill Road Glencoe, IL 60022 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Chicago Board of Trade Financial Industry $ 500.00	09-21-95	500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Flynn 401 S. LaSalle #302 Chicago, IL 60605 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Chicago Board of Trade Financial Industry $ 500.00	09-21-95	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
T. Lance Murdock 20 Brinker Road Barrington, IL 60010 Receipt For: [X] Primary [ ] General [ ] Other (specify):	ChicagoBoard of Trade Financial Industry $ 500.00	09-21-95	500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Thomas J. Cashman 141 W. Jackson #300 Chicago, IL 60604 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Chicago Board of Trade Financial Industry $ 500.00	09-21-95	500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ralph I Goldenberg 141 W. Jackson #1701A Chicago, IL 60604 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Chicago Board of Trade Financial Services $ 500.00	09-21-95	500.00

SUBTOTAL of Receipts This Page (optional) ____ 4,500.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code
Ann E. Berg
141 W. Jackson #1701A
Chicago, IL 60604

Name of Employer: Chicago Board of Trade
Occupation: Financial Industry
Date (month, day, year): 09-21-95
Amount of Each Receipt this Period: 500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Aggregate Year-to-Date > $ 500.00

B. Full Name, Mailing Address and ZIP Code
John A. Bollero, JR.
175 W. Jackson #631
Chicago, IL 60604

Name of Employer: Chicago Board of Trade
Occupation: Financial Industry
Date (month, day, year): 09-21-95
Amount of Each Receipt this Period: 500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Aggregate Year-to-Date > $ 500.00

C. Full Name, Mailing Address and ZIP Code
Michale J. O'Brien
53 W. Jackson #1236
Chicago, IL 60604

Name of Employer: Chicago Board of Trade
Occupation: Financial Industry
Date (month, day, year): 09-21-95
Amount of Each Receipt this Period: 500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Aggregate Year-to-Date > $ 500.00

D. Full Name, Mailing Address and ZIP Code
Al M. DiSanto
141 W. Jackson #1420
Chicago, IL 60604

Name of Employer: Chicago Board of Trade
Occupation: Financial Industry
Date (month, day, year): 09-21-95
Amount of Each Receipt this Period: 500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Aggregate Year-to-Date > $ 500.00

E. Full Name, Mailing Address and ZIP Code
Wayne I. Elliott
315 W. Wisconsin
Chicago, IL 60614

Name of Employer: Chicago Board of Trade
Occupation: Financial Industry
Date (month, day, year): 09-21-95
Amount of Each Receipt this Period: 500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):
Aggregate Year-to-Date > $ 500.00

F. Full Name, Mailing Address and ZIP Code
Blank

Name of Employer:
Occupation:
Date (month, day, year):
Amount of Each Receipt this Period:
Receipt For: [ ] Primary [ ] General [ ] Other (specify):
Aggregate Year-to-Date > $

G. Full Name, Mailing Address and ZIP Code
Blank

Name of Employer:
Occupation:
Date (month, day, year):
Amount of Each Receipt this Period:
Receipt For: [ ] Primary [ ] General [ ] Other (specify):
Aggregate Year-to-Date > $

SUBTOTAL of Receipts This Page (optional) 2,500.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martin L. Karlov 141 W. Jackson #300 Chicago, IL 60604	Chcago Board of Trade Occupation: Financial Industry	09-21-95	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
Patrick Arbor 141 W. Jackson #600A Chicago, IL 60604	Chicago Board of Trade Occupation: Chair CBOT Financial Industry	09-21-95	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
Jacob Morowitz 417 Central Wilmette, IL 60091	Chicago Board of Trade Occupation: Financial Industry	09-21-95	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
Harey J. Israel 141 W. Jackson #310 Chicago, IL 60604	Chicago Board of Trade Occupation: Financial Industry	09-21-95	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
George B. Abercrombie 105 Red Bud Lane Chapel Hill, NC 27514	Glaxo-Wellcome, Inc. Occupation: Vice President	09-26-95	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	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
Gary C. Dennis MD 6205 Nebraska Ave.NW Washington, DC 20015	Self-Employed Occupation: Medical Doctor	09-26-95	250.00
Receipt For: [X] Primary [ ] General [ ] 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
Carol Pensky 10100 Logan Drive Potomac, MD 20854	Homemaker Occupation: N/A Homemaker	10-05-95	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date: $ 250.00		

SUBTOTAL of Receipts This Page (optional): 4,000.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Judith Scully 100 E. Ohio Chicago, IL 60611 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Employer: St.Paul Federal Occupation: Savings & Loan Aggregate Year-to-Date $ 1,000.00	10-30-95	1,000.00
B. Patrick J. Agnew 239 S. Scoville Oak Park, IL 60302 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Employer: St. Paul Federal Occupation: Savings & Loan Aggregate Year-to-Date $ 1,000.00	10-30-95	1,000.00
C. Carol B. Segal 34 Woodley Road Winnetka, IL 60093 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Employer: President Crate & Barrel Occupation: Retail Aggregate Year-to-Date $	10-30-95	1,000.00
D. Robert N. Pfeiffer 6700 West North Avenue Chicago, IL 60635 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Employer: St. Paul Federal Occupation: Savings & Loan Aggregate Year-to-Date $ 500.00	10-30-95	500.00
E. Earl C. Weber 4786 Milwaukee Avenue Chicago, IL 60630 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Employer: Hoyne Savings Bank Occupation: Savings & Loan Aggregate Year-to-Date $ 250.00	10-30-95	250.00
F. Donald G. Ross Receipt For: [X] Primary [ ] General [ ] Other (specify):	Employer: St. Paul Federal Occupation: Savings & Loan Aggregate Year-to-Date $ 250.00	10-30-95	250.00
G. Mark T. Doyle 3960 W. 26th Street Chicago, IL 606 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Employer: Second Federal Savings Occupation: Savings & Loan Aggregate Year-to-Date $ 250.00	10-30-95	250.00

SUBTOTAL of Receipts This Page (optional) 4,250.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(i)

NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S.Senate C00256610

Full Name, Mailing Address and ZIP Code	Receipt For	Name of Employer	Occupation	Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
A. David H. Mackiewich, 709 Brougham Lane, Oak Brook, IL 60521	[X] Primary [ ] General [ ] Other (specify):	Standard Federal	Savings & Loan	300.00	10-30-95	300.00
B. Paula Hiza, 4052 N. Paulina, Chicago, IL 60613	[ ] Primary [X] General [ ] Other (specify):	Household Bank	Savings & Laon	300.00	10-30-95	300.00
C. John Schukay, 448 Waterford Drive, Willowbrook, IL 60521	[X] Primary [ ] General [ ] Other (specify):	St. Paul Federal	Savings & Laon	300.00	10-30-95	300.00
D. Linda M. Rinella, 629 Hillcrest, Elmhurst, IL 60126	[X] Primary [ ] General [ ] Other (specify):	St. Paul Federal	Savings & Laon	300.00	10-30-95	300.00
E. Robert G. Rowen, 4107 Clausen Avenue, Western Springs, IL 60558	[ ] Primary [X] General [ ] Other (specify):	Bell Federal Savings	Savings & Loan	500.00	10-30-95	500.00
F. James J. Renn, 1944 Pleasant Hill Lane, Lisle, IL 06532	[ ] Primary [X] General [ ] Other (specify):	Lisle Savings	Savings & Loan	500.00	10-30-95	500.00
G. Patricia A. Butkus, 8311 W. 145th Place, Orland Park, IL 60462	[X] Primary [ ] General [ ] Other (specify):	AJ Smith Federal savings	Savings & Loan	500.00	10-30-95	500.00

SUBTOTAL of Receipts This Page (optional) 2,700.00

TOTAL This Period (last page this line number only)

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SCHEDULE A — ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 8 OF 35 | FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jean W. Clark 2828 Blackhawk Road Wilmitte, IL 60091 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Housewife N/A Aggregate Year-to-Date $ 1,000.00	1101-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Donald C. Clark 2828 Blackhawk Road Wilmitte, IL 60091 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Household International Chairman (CEO) Aggregate Year-to-Date $ 1,000.00	11-01-95	1,000.00
C. Full Name, Mailing Address and ZIP Code Alberta M. Aldinger 280 S. Green Bay Road Lake Forest, IL 60045 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Housewife N/A Aggregate Year-to-Date $ 1,000.00	11-01-95	1,000.00
D. Full Name, Mailing Address and ZIP Code William P. Aldinger 280 S. Green Bay Road Lake Forest, IL 60045 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Household International President Aggregate Year-to-Date $ 1,000.00	11-01-95	1,000.00
E. Full Name, Mailing Address and ZIP Code Byron L Landau 222 N. LaSalle Street Chicago, IL 60601 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Landau Et AL Attorney Aggregate Year-to-Date $ 1,000.00	11-01-95	1,000.00
F. Full Name, Mailing Address and ZIP Code Micheal Segal 875 N. Michigan Chicago, IL 60611 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Near North Ins. Insurance Aggregate Year-to-Date $ 1,000.00	11-03-95	1,000.00
G. Full Name, Mailing Address and ZIP Code Amy E. Kabatznick 111 Broadway New York, NY 10006 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Best Effort Request Made Aggregate Year-to-Date $ 1,000.00	11-14-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 7,000.00

TOTAL This Period (last page this line number only)

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

Full Name, Mailing Address and ZIP Code	Receipt For	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Matthew Greene 235 W. 48th St.NO 38A New York, NY 10036	[X] Primary [ ] General [ ] Other (specify):	Utendahl Cornwell Partners / Sr.Vice President / $ 1,000.00	11-14-95	1,000.00
B. Tracy V. Maitland 247 W. 12th St New York, NY 10014	[ ] Primary [X] General [ ] Other (specify):	Aduant Capitol / President & CEO / $ 1,000.00	11-14-95	1,000.00
C. Dail St. Claire Simmons 445 Fifth Street New York, NY 10016	[X] Primary [ ] General [ ] Other (specify):	Utendahl Cornwell Partners / Marketing Dir. / $ 1,000.00	11-14-95	1,000.00
D. Theodore Tannebaum 875 N. Michigan Ste. Chicago, IL 60611	[X] Primary [ ] General [ ] Other (specify):	HMO Americay,Inc. / Chairman / $ 1,000.00	11-14-95	1,000.00
E. Eugene Golub 625 N. Michigan Chicago, IL 60611	[X] Primary [ ] General [ ] Other (specify):	Golub & Co. / Chairman / $ 500.00	11-14-95	500.00
F. Marilyn Shafernich 1932 De Cook Ave. Park Ridge, IL 60066	[X] Primary [ ] General [ ] Other (specify):	Requested-Not Provided / Occupation: / $ 1,000.00	11-20-95	1,000.00
G. Dr. Alexander Shafernich 1932 De Cook Ave. Park Ridge, IL 60066	[X] Primary [ ] General [ ] Other (specify):	Self-Employed / Medical Doctor / $ 1,000.00	11-20-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 6,500.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 10 OF 35

FOR LINE NUMBER 11(a)

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Myron M. Cherry 30 North LaSalle St. Suite 2300 Chicago, IL 60602 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Cherry & Flynn Attorney Aggregate Year-to-Date $ 1,000.00	11-20-95	1,000.00
B. Full Name, Mailing Address and ZIP Code John Leovy 605 W. Madison Chicago, IL 60661 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Cherry & Flynn Attorney Aggregate Year-to-Date $ 1,000.00	11-20-95	1,000.00
C. Full Name, Mailing Address and ZIP Code Sandra Shafernich 1932 De Cook Ave. Park Ridge, IL 60066 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Cherry & Flynn Attorney Aggregate Year-to-Date $ 1,000.00	11-20-95	1,000.00
D. Full Name, Mailing Address and ZIP Code Richard D. Parsons 75 Rockefeller Plaza New York, NY 10019 Receipt For: [X] Primary [ ] General [ ] Other (specify):	President Time Warner Occupation President Aggregate Year-to-Date $ 500.00	11-24-95	500.00
E. Full Name, Mailing Address and ZIP Code J.Bruce Herrellys 725 East Erie Philadelphia, PA 19134 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Phile Coss coles Occupation Attorney Aggregate Year-to-Date $ 1,000.00	11-24-95	1,000.00
F. Full Name, Mailing Address and ZIP Code Dana E. Owens 20 Kiwanis Drive Wayne, NJ 07470 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed Occupation Entertainment Aggregate Year-to-Date $ 500.00	11-24-95	500.00
G. Full Name, Mailing Address and ZIP Code Jacqueline Avant 1140 Maytor Place Beverly Hills, CA 90210 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Housewife Occupation N/A Aggregate Year-to-Date $ 500.00	11-24-95	500.00

SUBTOTAL of Receipts This Page (optional) 5,500.00

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

SAMPLE

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 11 OF 35

FOR LINE NUMBER 11(1)

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sylvester Green 100 William Street New York, NY 10038 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Chubb & Son, Ins. Occupation: Managing Director Aggregate Year-to-Date: $ 500.00	11-24-95	500.00
B. Full Name, Mailing Address and ZIP Code Thomas J. Klutznick 900 N. Michigan Ave.,Ste.2050 Chicago, IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Thomas Klutznick and Company Occupation: President Aggregate Year-to-Date: $ 1,000.00	11-28-95	1,000.00
C. Full Name, Mailing Address and ZIP Code Richard G. Smolev 385 Washington Ave. Glencoe, IL 60022 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Sachnoff & Weaver, Ltd. Occupation: Attorney Aggregate Year-to-Date: $ 250.00	11-28-95	250.00
D. Full Name, Mailing Address and ZIP Code Susan L. Stern 9049 N. Karlov Skokie, IL 60076 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Sachnoff & Weaver, Ltd Occupation: Attorney Aggregate Year-to-Date: $ 250.00	11-28-95	250.00
E. Full Name, Mailing Address and ZIP Code Lowell Sachnoff 30 S. Wacker Drive Chicago, IL 60606 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Sachnoff & Weaver, Ltd. Occupation: Attorney Aggregate Year-to-Date: $ 1,000.00	11-28-95	1,000.00
F. Full Name, Mailing Address and ZIP Code Carolyn H. Rosenberg 219 Pine Point Drive Highland Park, IL 60035 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Sachnoff & Weaver, Ltd. Occupation: Attorney Aggregate Year-to-Date: $ 250.00	11-28-95	250.00
G. Full Name, Mailing Address and ZIP Code M.Marshall Seeder 30 S. Wacker Drive Chicago, IL 60606 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Sachnoff & Weaver, Ltd Occupation: Attorney Aggregate Year-to-Date: $ 250.00	11-28-95	250.00

SUBTOTAL of Receipts This Page (optional) 3,500.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frank Savage 87 Ridgecrest Road Stamford, CT 06903 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Chairman Alliance Capital Occupation: Investment Aggregate Year-to-Date: $ 500.00	11-30-95	500.00
B. Full Name, Mailing Address and ZIP Code Bobette Zacharias 755 Sheridan Rd. Winnetka, IL 60093 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Retired Occupation: N/A Aggregate Year-to-Date: $ 1,000.00	11-30-95	1,000.00
C. Full Name, Mailing Address and ZIP Code James Zacharias 755 Sheridan Rd. Winnetka, IL 60093 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Retired Occupation: N/A Aggregate Year-to-Date: $ 1,000.00	11-30-95	1,000.00
D. Full Name, Mailing Address and ZIP Code Mary A. Dempsey 180 E. Pearson Chicago, IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: City of Chicago Occupation: Commissioner Aggregate Year-to-Date: $ 1,000.00	12-04-95	1,000.00
E. Full Name, Mailing Address and ZIP Code Philip H. Corboy 33 N. Dearborn St. Chicago, IL 60602 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Corboy & Demetrio Occupation: Attorney Aggregate Year-to-Date: $ 1,000.00	12-04-95	1,000.00
F. Full Name, Mailing Address and ZIP Code Robert J. Bingle 634 S. Washington Hinsdale, IL 60521 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Corboy & Demetrio Occupation: Attorney Aggregate Year-to-Date: $ 1,000.00	12-04-95	1,000.00
G. Full Name, Mailing Address and ZIP Code Kevin Burke 730 Terry Ln. Countryside, IL 60525 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Corboy & Demtrio Occupation: Attorney Aggregate Year-to-Date: $ 800.00	12-04-95	800.00

SUBTOTAL of Receipts This Page (optional) 6,300.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Michael K. Demetrio 2946 Indianwood Wilmette,IL 60091 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 1,000.00	12-04-95	1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Susan J. Schwartz 2608 N. Lakeview Chicago,IL 60614 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 600.00	12-04-95	600.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Frances R. Grossman 5529 S. Kimbark Ave. Chcago, IL 60637 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 250.00	12-04-95	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
William M. Goodyear 33 North Dearborn Chicago, IL 60602 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 1,500.00	12-04-95	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
William M. Goodyear 33 North Dearborn Chicago, IL 60602 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 1,500.00	12-04-95	1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Wilma Jean Smelcer 1120 N. Lake Shore Dr. Chicago,IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $	12-04-95	1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
T.A. Demetrio 66 E. Elm St. Chicago, IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 1,000.00	12-04-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 5,350.00

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

FEC FORM 3 (1995)

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)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Philip Harnet Corboy, Jr. 711 Glenridge Rd. Glenview, IL 60025 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 1,000.00	12-04-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Francis Patrick Murphy 164 Gage Rd. Riverside, IL 60546 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Corboy & Demetrio Attorney Aggregate Year-to-Date $ 1,000.00	12-04-95	1,000.00
C. Full Name, Mailing Address and ZIP Code Elizabeth J. Sturgeon 1040 Hinman Ave. Evanston, IL 60202 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Homemaker N/A Aggregate Year-to-Date $ 1,000.00	12-05-95	1,000.00
D. Full Name, Mailing Address and ZIP Code William D. Smithburg 321 N. Clark St.;27-13 Chicago, IL 60604 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Quaker Oats President and CEO Occupation Executive Aggregate Year-to-Date $ 250.00	12-05-95	250.00
E. Full Name, Mailing Address and ZIP Code Ellen A. Rudnick 1316 Woodland Ln. Riverwoods, IL 60015 Receipt For: [ ] Primary [X] General [ ] Other (specify):	CEO Advisors CEO Aggregate Year-to-Date $ 250.00	12-06-95	250.00
F. Full Name, Mailing Address and ZIP Code John H. Bryan P.O. Box 454 Lake Bluff, IL 60044 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Sara Lee CEO Aggregate Year-to-Date $ 1,000.00	12-06-95	1,000.00
G. Full Name, Mailing Address and ZIP Code Robert E. Allgyer 282 W. Laurel Ave. Lake Forest, IL 60045 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Arthur Andersen Partner-Public Acct Aggregate Year-to-Date $ 1,000.00	12-06-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 5,500.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
William N. Weaver, Jr. 39 E. Schiller St. Chicago, IL 60610 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed / Attorney / $ 500.00	12-06-95	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Frona C. Weaver 39 E. Schiller St. Chicago, IL 60610 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed / Attorney / $ 500.00	12-06-95	500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Theodore R. Tetzlaff 1845 N. Lincoln Avenue Chicago, IL 60614 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed / Attorney / $ 1,000.00	12-06-95	1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Penny Pritzker and Bryan Traubert Fund 200 W. Madison St. Chicago, IL 60606 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Pritzker & Pritzker / Corporate Exec. / $ 1,000.00	12-06-95	1,000.00 Refunded
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Robert Weissbourd 1843 N. Dayton Chicago, IL 60614 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Shorebank / Development & Banking / $ 1,000.00	12-06-95	1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Juanita Passmore 6901 S. Oglesby, Chicago, IL 60649 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Retired / N/A / $ 1,000.00	12-06-95	1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Robert A. Helman 4950 S. Chicago Beach Dr. Chicago, IL 60615 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Mayer, Brown & Platt / Attorney / $ 1,000.00	12-06-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 6,000.00

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

FEC/SA/059

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 16 OF 35

FOR LINE NUMBER 11(a)

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Levin 350 West Hubbard Chicago,IL 60610 Receipt For: [ ] Other (specify): [X] Primary [ ] General	The Habitat Company Executive Vice Pre. $ 500.00	12-06-95	500.00
B. Full Name, Mailing Address and ZIP Code Daniel W. Weil 1809 N. Sedgwick St. Chicago, IL 60614 Receipt For: [ ] Other (specify): [X] Primary [ ] General	Chapman & Cutler Attorney $ 500.00	12-06-95	500.00
C. Full Name, Mailing Address and ZIP Code William E. Lowry, Jr. 1023 W. Vernon Park Place Chicago,IL 60607 Receipt For: [ ] Other (specify): [X] Primary [ ] General	MacArthur Foundation Vice President $ 500.00	12-06-95	250.00
D. Full Name, Mailing Address and ZIP Code JoAnne Gazarek Bloom 5490 South Shore Dr. Chicago, IL 60615 Receipt For: [ ] Other (specify): [X] Primary [ ] General	Com Edison Attorney $	12-06-95	250.00
E. Full Name, Mailing Address and ZIP Code Julia M. Stasch 556 W. Arlington Pl Chicago, IL 60614 Receipt For: [ ] Other (specify): [X] Primary [ ] General	Stein & Company Real Estate Exec. $ 500.00	12-06-95	500.00
F. Full Name, Mailing Address and ZIP Code Bernard V. Wetchler, 5201 N. Shagbark Circle Peoria, IL 61619 Receipt For: [ ] Other (specify): [X] Primary [ ] General	Bernard V. Wetchler, MD.,P.C. Physician $ 250.00	12-06-95	250.00
G. Full Name, Mailing Address and ZIP Code Jorie Wetchler, 5201 N. Shagbark Circle Peoria, IL 61619 Receipt For: [ ] Other (specify): [X] Primary [ ] General	Best Effort Request Made Occupation $ 250.00	12-06-95	250.00

SUBTOTAL of Receipts This Page (optional) _____

TOTAL This Period (last page this line number only) _____ 2,500.00

SA/SB/SC

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 17 OF 35

FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Peggy A. Montes 9220 S. Michigan Ave. Chicago,IL 60619 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Volunteer / N/A / $ 500.00	12-06-95	500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Janice L. Toftey 100 E. Walton, 40B Chicago,IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Sara Lee Corp. / Manager / $ 250.00	12-06-95	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lisa Bowers White 160 Sheridan road Winnetka, IL 60093 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Homemaker / N/A / $ 250.00	12-06-95	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James H. Lowry 3100 N. Sheridan Rd. Chicago, IL 60657 Receipt For: [X] Primary [ ] General [ ] Other (specify):	James H. Lowry & Assoc. / Lab. Exec. / $ 1,000.00	12-06-95	1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ronald J. Baltierra 2998 S. Archer Chicago, IL 60608 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Balti Contracting / Director / $ 1,000.00	12-06-95	1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Maurice F. Rabb 161 E. Chicago Ave Chicago,IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Emloyed / Physician / $	12-06-95	1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lewis Manilow 19820 S. Wolf Rd. Mokena, IL 60448 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed / Attorney / $ 1,000.00	12-06-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 5,000.00

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

FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S.Senate C00256610

Full Name, Mailing Address and ZIP Code	Name of Employer	Occupation	Receipt For	Date (month, day, year)	Amount of Each Receipt this Period	Aggregate Year-to-Date
A. Susan R. Manilow, 1900 N. Howe Street, Chicago, IL 60614	Self-Employed	Consultant	X Primary	12-06-95	1,000.00	$ 1,000.00
B. Elzie L. Higginbottom, 1927 N. Burling, Chicago, IL	Self-Employed	Real Estate Management	X Primary	12-06-95	1,000.00	$ 1,000.00
C. Anthony J. Fusco, Jr., 1810 N. Fremont St., Unit 12, Chicago IL 60614	Chicago Comm Devel Corp.	Attorney	X Primary	12-06-95	1,000.00	$ 1,000.00
D. Daniel J. Burke, 617 N. Lombard Ave., Oak Park, IL 60302	Chicago Comm. Devel	Attorney	X Primary	12-06-95	1,000.00	$ 1,000.00
E. Manuel Sanchez, 2246 Pebble Creek Dr., Lisle, IL 60532	Sanchez & Daniels	Attorney	X Primary	12-06-95	1,000.00	$ 1,000.00
F. Miles Berger, 1325 Astor, Chicago, IL 60610	Heitman Financial	Vice President	X Primary	12-06-95	1,000.00	$ 1,000.00
G. Sally Berger, 1325 Astor, Chicago, IL 60610	Self-Employed	HealthCare Consultant	X Primary	12-06-95	1,000.00	$ 1,000.00

SUBTOTAL of Receipts This Page (optional) 7,000.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 19 OF 35

FOR LINE NUMBER 11(a)

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): Carol Moseley Braun For U.S.Senate C00256610

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Ralph G. Moore 4600 S. Chicago Beach Dr. Chicago, IL 60615	Ralph G. Moore & Assoc.	12-06-95	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Consultant	Aggregate Year-to-Date $	1,000.00
B. Full Name, Mailing Address and ZIP Code Mrs. Robert Crown 33 Canterbury Ct. Wilmette, IL 60091	Name of Employer: N/A	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Not Employed	Aggregate Year-to-Date $	1,000.00
C. Full Name, Mailing Address and ZIP Code Rebecca E. Crown 17 Woodley Rd. Winnetka, IL 60093	Name of Employer: Baker Demo.School	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Education	Aggregate Year-to-Date $	1,000.00
D. Full Name, Mailing Address and ZIP Code Sara C. Star 2102 N. Kenmore Ave. Chicago, IL 60614	Name of Employer: N/A	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date $	1,000.00
E. Full Name, Mailing Address and ZIP Code John W. Rogers, Jr. 307 N. Michigan Ave. Suite 500 Chicago, IL 60601	Name of Employer: Ariel Capital	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: FinanceInvestment Mger.	Aggregate Year-to-Date $	1,000.00
F. Full Name, Mailing Address and ZIP Code Desiree Glapion Rogers 307 N. Michigan Ave Suite 500 Chicago, IL 60601	Name of Employer: State of Illinois	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Lottery Director	Aggregate Year-to-Date $	500.00
G. Full Name, Mailing Address and ZIP Code Nicholas S. Gouletas 505 N. Lake Shore Drive Chicago,IL 60611	Name of Employer: American Invsco	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Chair	Aggregate Year-to-Date $	2,000.00

SUBTOTAL of Receipts This Page (optional): 6,500.00

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

FEC FORM 3P

SCHEDULE A — ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Deborah Franczek 5555 S. Everett Chicago, IL 60637	N/A	12-06-95	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Attorney	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
Joyce E. Moran 10 Canterbury Court Lakeinthe Hills,IL 60102		12-06-95	250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Attorney	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
Eugene Sawyer 7801 S. Michigan Ave. Chicago,IL 60619	Crown Energy	12-06-95	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Vice President	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
Larry J. Hochberg 275 N. Deere Park E. Highland Park, IL 60035	Sportmart Inc.	12-06-95	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: CEO	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
Beverly Susler Parkhurst 260 E. Chestnut St. Chicago, IL 60611	Holleb & Coff	12-06-95	750.00
Receipt For: ☒ Primary ☐ General ☐ 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
Neville P.Bryan Box 454 Lake Bluff, IL 60044	Arthur Andersen	12-06-95	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Consulting	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
David Y. Schwartz 1354 Linclon Ave. South Highland Park,IL 60035	Arthur Andersen	12-06-95	800.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify): A	Occupation: Consulting	Aggregate Year-to-Date $	800.00

SUBTOTAL of Receipts This Page (optional): 5,800.00

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

SA/SB

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(1)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Sanek 502 Robinwood Lane Wheaton,IL 60187	Arther Andersen	12-06-95	685.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Consulting	Aggregate Year-to-Date $	685.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry B. Rudman 5905 Finch Ct. Long Grove, IL 60047	Arthur Andersen	12-06-95	580.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Consulting	Aggregate Year-to-Date $	580.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wanye John Peters 712 Merritt Ct. Naperville, IL 60540	Arthur Andersen	12-06-95	560.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Consulting	Aggregate Year-to-Date $	560.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Wambay 2005 Franklin Dr. Glenview, IL 60025	Arther Andersen	12-06-95	525.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Consulting	Aggregate Year-to-Date $	525.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Kellman 2 N. La Salle, #2500 Chicago, IL 60602	Globe Glass & Mirror Co.	12-06-95	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Chairman & CEO	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
Patricia C. Bobb 3 First National Plaza Suite 660 Chicago, IL 60602	Patricia Bobb & Associates	12-06-95	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: CEO	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
Laurel G. Bellows 79 W. Monroe St. Chicago, IL 60603	Bellows & Bellows	12-06-95	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation: Attorney	Aggregate Year-to-Date $	500.00

SUBTOTAL of Receipts This Page (optional) 3,600.00

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)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code Muhammad Javaid 8117 S. Odell Bridgeview, IL 60155 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Best Effort Request Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) Made 12-06-95	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Hamida Khan Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Best Effort Request Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) Made 12-06-95	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Rashid Chaudary 7013 Natelli Wood Ln. Bethesda, MD 20917 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Paskistan American Affairs Occupation Chairman Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) Public 12-06-95	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Aisha R. Chaudary 7013 Natelli Woods Ln. Bethesda, MD 20817 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Best Effort Request Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) Made 12-06-95	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Samia Chaudary 7013 Natelli Wood Ln. Bethesda, MD 20917 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Best Effort Request Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) Made 12-06-95	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Bashir Begam 7013 Natelli Woods Ln. Bethesda, MD 20817 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Best Effort Request Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) Made 12-06-95	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Mohammed H. Arain 506 Sauk Path Oak Brook, IL 60521 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Best Effort Request Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) Made 12-06-95	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional) > 7,000.00

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

FEC 459

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ali N. Syed 13320 Georgetown Dr. Orland Park,IL 60462 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Best Effort Request Made Occupation Aggregate Year-to-Date $ 1,000.00	12-06-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Geraldine M. ALexis 1022 Greenwood St. Evanston,IL 60201 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Sidley & Austin Occupation: Attorney Aggregate Year-to-Date $ 250.00	12-06-95	250.00
C. Full Name, Mailing Address and ZIP Code William O. Fifield 1933 N. Mohawk Chicago, IL 60614 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Self-Employed Occupation: Attorney Aggregate Year-to-Date $ 250.00	12-06-95	250.00
D. Full Name, Mailing Address and ZIP Code Jewel Lafontant-Mankarious 180 E. Pearson Chicago,IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Holleb & Coff Occupation: Attorney Aggregate Year-to-Date $ 1,000.00	12-06-95	1,000.00
E. Full Name, Mailing Address and ZIP Code Charles F. Mackelvie 720 Wesley Dr. Park Ridge, IL 60068 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Mackelvie & Assoc. Occupation: Attorney Aggregate Year-to-Date $ 250.00	12-06-95	250.00
F. Full Name, Mailing Address and ZIP Code Barbara L. Bowles 5020 S. Ellis Chicago, IL 60615 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Kenwood Group Occupation: Money Manager Aggregate Year-to-Date $ 250.00	12-06-95	250.00
G. Full Name, Mailing Address and ZIP Code William E. Lowry, Jr. 1023 W. Vernon Park Place Unit #A Chicago, IL 60607 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: MacArthur Foundation Occupation: Vice President Aggregate Year-to-Date $ 500.00	12-06-95	250.00

SUBTOTAL of Receipts This Page (optional)	3,250.00
TOTAL This Period (last page this line number only)	

FEC/SB

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Susan E. Lloyd 715 Sheridan Rd. Evanston, IL 60202 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Self-Employed Consultant $ 250.00	12-06-95	250.00
B. Full Name, Mailing Address and ZIP Code Barry S. Cain 755 Smoke Tree Rd. Deerfield, IL 60015 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Energy Efficient Environments, Inc. President $ 250.00	12-06-95	250.00
C. Full Name, Mailing Address and ZIP Code R. Susan Motley 1640 E. 50th Street #8B Chicago, IL 60615 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	MacArthur Foundation Sen. Prog. Officer $ 250.00	12-06-95	250.00
D. Full Name, Mailing Address and ZIP Code John E. Clay 229 6th Street Wilmette, IL 60091 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Public Int.Law Initiative Attorney $ 250.00	12-06-95	250.00
E. Full Name, Mailing Address and ZIP Code Gwendolyn L. Stanback 5024 S. Ellis Chicago, IL 60616 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Bears Sterns Assoc.Director $ 250.00	12-06-95	250.00
F. Full Name, Mailing Address and ZIP Code Sheldon Karon 162 Prospect Ave. Highland Park, IL 60035 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Keck, Mahin & Cate Attorney $ 500.00	12-06-95	500.00
G. Full Name, Mailing Address and ZIP Code Patricia Y. Jones 5415 N. Sheridan, 2211 Chicago, IL 60640 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	CEO-Self-Employed Psychologist $ 500.00	12-06-95	500.00

SUBTOTAL of Receipts This Page (optional) 2,250.00

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

FN058

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey J.Peck 5900 Cromwell Dr. Bethesda, MD 20816 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Arthur Andersen Attorney $ 500.00	12-06-95	500.00
B. Full Name, Mailing Address and ZIP Code Marge Collens 1555 N. Astor St. Chicago, IL 60610 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Illinois Inst.Tech. Professor/President $ 500.00	12-06-95	500.00
C. Full Name, Mailing Address and ZIP Code Nicholas S. Gouletas 505 N. Lake Shore Dr. Chicago, IL 60611 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	American Invsco Chairmant $ 2,000.00	12-06-95	1,000.00
D. Full Name, Mailing Address and ZIP Code Dr. Richard L. Tolliver 5400 S. Hyde Park Blvd. Chicago, IL 60615 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	St. Edward's Church Priest $ 1,000.00	12-06-95	1,000.00
E. Full Name, Mailing Address and ZIP Code Duane L. Durnham 15 Bridlewood Rd. Northbrook, IL 60062 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Chairman & CEO Abbott Laboratories $ 1,000.00	12-06-95	1,000.00
F. Full Name, Mailing Address and ZIP Code Daniel J. Walsh 9801 S. Damen Chicago, IL 60643 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Best Effort Request Made $ 1,000.00	12006-95	1,000.00
G. Full Name, Mailing Address and ZIP Code Michael E. Murphy 1242 N. Lake Shore Dr. #25 Chicago, IL 60610 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Sara Lee Corporation Vice President $ 1,000.00	12-06-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 6,000.00

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

FEC FORM 3

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 26 OF 35

FOR LINE NUMBER 11(a)

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Carolyn Bradley R.R 1 Box 118 Ridgway, IL 62979 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Best Effort Request Made Occupation Aggregate Year-to-Date $ 250.00	12-06-95	250.00
B. Full Name, Mailing Address and ZIP Code Frances Dyhrkopp Shawneetown, IL 62984 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Coal Mining/Prod. Aggregate Year-to-Date $ 250.00	12-06-95	250.00
C. Full Name, Mailing Address and ZIP Code Marilyn K. Gerdes 642 W. Bittersweet Pl. Chicago, IL 60613 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sara Lee Corp. Occupation: Attorney Aggregate Year-to-Date $ 250.00	12-06-95	250.00
D. Full Name, Mailing Address and ZIP Code Elynor A. Williams 222 E. Chestnut AB Chicago, IL 60611 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sara Lee Corp. Occupation: Corporate Executive Aggregate Year-to-Date $ 250.00	12-06-95	250.00
E. Full Name, Mailing Address and ZIP Code Robert E. Lee 7516 S. Prairie Chicago, IL 60619 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Retired Occupation: N/A Aggregate Year-to-Date $ 250.00	12-06-95	250.00
F. Full Name, Mailing Address and ZIP Code Marcena W. Love 1175 Pelham Rd. Winnetka, IL 60093 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Activist Occupation Aggregate Year-to-Date $ 250.00	12-06-95	250.00
G. Full Name, Mailing Address and ZIP Code Susan S. Sher 1923 N. Berling St. Chicago, IL 60614 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: City of Chicago Occupation: Corporate Counsel Aggregate Year-to-Date $ 250.00	12-06-95	250.00
SUBTOTAL of Receipts This Page (optional)			1,750.00
TOTAL This Period (last page this line number only)			

FEC/AI059

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 27 OF 35

FOR LINE NUMBER 11(1)

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mary L. Sfasciotti P.O. Box 8016 Northfield, IL 60093 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Occupation: Attorney Aggregate Year-to-Date: $ 12-06-95	12-06-95	250.00
B. Full Name, Mailing Address and ZIP Code Richard L. Thomas 130 Wentworth Ave. Glencoe, IL 60022 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: First Chicago Occupation: Banker Aggregate Year-to-Date: $ 1,000.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 1,000.00
C. Full Name, Mailing Address and ZIP Code H. Roderic Heard 225 W.Wacker Dr. Chicago, IL 60606 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Wildman,Harrold Occupation: Attorney Aggregate Year-to-Date: $ 250.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 250.00
D. Full Name, Mailing Address and ZIP Code Peggy A. Montes 9220 S. Michigan Ave. Chicago, IL 60619 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Volunteer. Occupation: Aggregate Year-to-Date: $ 500.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 500.00
E. Full Name, Mailing Address and ZIP Code Frederic J. Artwick 1425 Ridge Evanston, IL 60201 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sidley & Austin Occupation: Attorney Aggregate Year-to-Date: $ 250.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 250.00
F. Full Name, Mailing Address and ZIP Code Philip Jay Crihfield 1133 Michigan Ave. Evanston, IL 60202 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sidley & Austin Occupation: Attorney Aggregate Year-to-Date: $ 250.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 250.00
G. Full Name, Mailing Address and ZIP Code Lawrence W. Schumacher 6485 N. Tower Ct. Lincolnwood,IL 60646 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Sidley & Austin Occupation: Attorney Aggregate Year-to-Date: $ 500.00	Date (month, day, year): 12-06-95	Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 3,000.00

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 28 OF 35

FOR LINE NUMBER 11(A)

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): Carol Moseley Braun For U.S.Senate C00256610

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Marc S. Schulman 161 Chicago Avenue East Chicago, IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	IIT Professor $ 500.00	12-06-95	500.00
B. Zirl S. Smith 1133 W. Pratt Blvd. Chicago, IL 60626 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self-Employed Construction $ 1,000.00	12-06-95	1,000.00
C. James Hill, Jr. 116 S. Michigan Ave. Chicago, IL 60603 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Hill,taylor & Co. CPA $ 500.00	12-06-95	500.00
D. Henry Gray 10359 S. Vernon Chicago, Il 60628 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Best Effort Request Made $ 250.00	12-06-95	250.00
E. Pamela James 195 N. Harbor Dr. Chicago, IL 60601 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Best Effort Request Made $ 500.00	12-06-95	500.00
F. Michelle D. Jordan 7750 S, Hoyne Chicago, IL 60620 Receipt For: [ ] Primary [X] General [ ] Other (specify):	U.S.EPA Deputy Regional Adm. $ 250.00	12-06-95	250.00
G. Niva M. Lubin 8541 South State Chicago, IL 60619 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self-Employed Medical Dorctor $ 250.00	12-06-95	250.00

SUBTOTAL of Receipts This Page (optional) _____

TOTAL This Period (last page this line number only) 3,250.00

FAN059

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 29 OF 35

FOR LINE NUMBER 11(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)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
David Driver 8128 S. Dobson Chicago, Il 60619 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Best Effort Request Made 12-06-95 $ 250.00	12-06-95	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lewis Michael Nixon 310 Ashland Ave. River Forest, Il 60305 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-employed Attorney $ 250.00	12-06-95	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Clarence J. Crooks 303 E. Wacker Dr. Chicago, IL 60601 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Attorney $ 250.00	12-06-95	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Henry B. Betts 1727 N. Orleans St. Chicago, IL 60614 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Rehab.Inst.of Chicago President & CEO Medical Doctor $ 250.00	12-06-95	250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Charles A. Davis 2400 S. Michigan Ave. Chicago, IL 60616 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Charles Davis & Assoc. Public Relations $ 500.00	12-06-95	500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Carl Latimer 9712 S. Charles Chicago, IL 60643 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Coalition for United Comm Action President $ 250.00	12-06-95	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Sharon Gist Gilliam 602 S. Loomis Chicago, IL 60606 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Unison Consulting Group Mang. Consultant $ 250.00	12-06-95	250.00

SUBTOTAL of Receipts This Page (optional) 2,000.00

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

FEC FORM 3

4-88472

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(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)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Richard C. Vie 6286 Timberview Dr. Lisle, IL 60532 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Unitrin, Inc. Occupation: Consultants Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
B. Full Name, Mailing Address and ZIP Code Thomas H. Maloney 2325 Burr Oak Rd. Northfield, IL 60093 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Unitrin, Inc. Occupation: Consultants Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
C. Full Name, Mailing Address and ZIP Code O. Lopez Illinois Masonic Medical Center 836 W. Wellington Chicago, IL 60657 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Medical Doctor Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
D. Full Name, Mailing Address and ZIP Code Madeline Rabb 161 Chicago Ave. East Chicago, IL 60611 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Murphy Rabb, Inc. Occupation: Art Consultant Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
E. Full Name, Mailing Address and ZIP Code Susan S. Suter 2409 Country Club Dr. Springfield, IL 62704 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Rehab. Inst. of Chicago Occupation: Medical : Aggregate Year-to-Date: $ 250.00	12-06-95	250.00
F. Full Name, Mailing Address and ZIP Code Mark Durham 7658 S. Calumet Chicago, IL 60619 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Chicago St. University Occupation: Public Affairs Director Aggregate Year-to-Date: $ 250.00	12-06-95	250.00
G. Full Name, Mailing Address and ZIP Code Royal B. Martin 193 Chestnut Winnetka, IL 60093 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Attorney Aggregate Year-to-Date: $ 250.00	12-06-95	250.00

SUBTOTAL of Receipts This Page (optional) 2,750.00

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

4-88172

SCHEDULE A — **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(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)

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. William Filan, 311 S. Wacker Dr., Suite 4200, Chicago, IL 60606. Receipt For: [ ] Primary [X] General [ ] Other (specify):	Employer: Self-Emloyed; Occupation: Attorney; Aggregate Year-to-Date > $ 250.00	12-06-95	250.00
B. Earl L. Neal, 111 W. Washington, Suite 1010, Chicago, IL 60602. Receipt For: [X] Primary [ ] General [ ] Other (specify):	Employer: Self-Employed; Occupation: Attorney; Aggregate Year-to-Date > $ 1,000.00	12-06-95	1,000.00
C. Marcia Evans, 901 S. Plymouth Ct., Chicago, IL 60605. Receipt For: [ ] Primary [X] General [ ] Other (specify):	Employer: Earl Neal & Assoc.; Occupation: Attorney; Aggregate Year-to-Date > $ 1,000.00	12-06-95	1,000.00
D. Demetrius E. Carney, 1312 S. Plymouth Ct., Chicago, IL 60605. Receipt For: [X] Primary [ ] General [ ] Other (specify):	Employer: Self-Employed; Occupation: Attorney; Aggregate Year-to-Date > $ 500.00	12-06-95	500.00
E. Kenneth Davis, 1125 Harvard Ter, Evanston, IL 60202. Receipt For: [ ] Primary [X] General [ ] Other (specify):	Employer: Brass Foundation; Occupation: Director-Prof. Services; Aggregate Year-to-Date > $ 250.00	12-06-95	250.00
F. Lisa H. Mason, 8940 S. Euclid, Chicago, IL 60617. Receipt For: [ ] Primary [X] General [ ] Other (specify):	Employer: Brass Foundation; Occupation: Administrator; Aggregate Year-to-Date > $ 250.00	12-06-95	250.00
G. Eldoris J. Mason, 8940 S. Euclid, Chicago, IL 60617. Receipt For: [ ] Primary [X] General [ ] Other (specify):	Employer: Brass Foundation; Occupation: Administrator; Aggregate Year-to-Date > $ 250.00	12-06-95	250.00

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

TOTAL This Period (last page this line number only) 3,500.00

4-0072

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(i)

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mercedes A. Laing 1825 N. Lincoln Plaza Chicago, IL 60614 Receipt For: [X] Primary [ ] General [ ] Other (specify):	McDermott Will Emory Attorney $ 250.00	12-06-95	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Rueben L. Hedlund 5700 Sears Tower Chicago, IL 60606 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Hedlund Hanley & John Attorney $ 1,000.00	12-06-95	1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Arnold Pagniucci 229 Cuyler Oak Park, IL 60302 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self-Employed Attorney $ 250.00	12-06-95	250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Daniel E. McLean 1337 W. Fullerton Chicago, IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Best Effort Request Made $ 1,000.00	12-06-95	1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joyce Jones 9915 S. Calumet Ave. Chicago, IL 60628 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Best Effort Request Made $ 500.00	12-06-95	500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Sheldon L. Solow 525 Hillside Dr. Highland Park, IL 60035 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Best Effort Request Made $ 250.00	12-06-95	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Eric T. McKissack 1763 N. Sedgewick Chicago, IL 60614 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Ariel Capital Investment Manager $ 250.00	12-06-95	250.00

SUBTOTAL of Receipts This Page (optional) 3,500.00

TOTAL This Period (last page this line number only)

4-00172

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(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)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James W. Atkinson 1320 N. State Pky. Chicago, IL 60610 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Ariel Capital Mana. Occupation: Controller Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
B. Full Name, Mailing Address and ZIP Code John W. Rogers 4800 S. Chicago Beach Dr. Chicago, IL 60615 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation: Judge Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
C. Full Name, Mailing Address and ZIP Code James E. Haran Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Best Effort Request Made Occupation Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
D. Full Name, Mailing Address and ZIP Code Randall C. Hampton 2440 Saint Andrews Dr. Olympia Fields, IL 60461 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Ariel Capital Mana. Occupation: Vice Chair-Investment Manager Aggregate Year-to-Date: $ 500.00	12-06-95	500.00
E. Full Name, Mailing Address and ZIP Code Alfred G. Ronan 225 W. Washington Suite 1700 Chicago, IL 60606 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Ronan Ltd. Occupation: President Aggregate Year-to-Date: $ 1,000.00	12-06-95	1,000.00
F. Full Name, Mailing Address and ZIP Code Allison S. Davis 161 E. Chicago Ave. Chicago, IL 60611 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Davis Miner, Barnhill & Gralla Occupation: Attorney Aggregate Year-to-Date: $ 1,000.00	12-06-95	1,000.00
G. Full Name, Mailing Address and ZIP Code Donald B. Zimelis 175 Manor Dr. Deerfield, IL 60015 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Best Effort Request Made Occupation Aggregate Year-to-Date: $	12-06-95	500.00

SUBTOTAL of Receipts This Page (optional) 4,500.00

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

4-00172

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(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)

A. Full Name, Mailing Address and ZIP Code Everett G. Rand 5508 S. State Street Chicago, IL 60621 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Rand & Rand Occupation Retail Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) 12-06-95	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Ossie Davis P.O. Box 1318 New Rochelle, NY 10802 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Self-Employed Occupation Actor/Author) Aggregate Year-to-Date > $ 500.00	Date (month, day, year) 12-06-95	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Harry Dedyo 1500 Broadway New York, NY 10036 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Essence Communications Occupation Publishing Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) 12-08-95	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Paula A. Sneed 158 Phelps Rd. Ridgewood, NJ 07450 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Kraft Foods Occupation Executive Aggregate Year-to-Date > $ 250.00	Date (month, day, year) 12-08-95	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Musawer Mansoor Ijaz Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Best Effort Request Made Occupation Aggregate Year-to-Date > $ 500.00	Date (month, day, year) 12-06-95	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and ZIP Code Percy E. Sutton 10 W. 135th St. New York, NY 10037 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Inner City Theatre Group, LL Occupation General Partner Aggregate Year-to-Date > $ 2,000.00	Date (month, day, year) 12-06-95	Amount of Each Receipt this Period 1,000.00 Refunded
G. Full Name, Mailing Address and ZIP Code David N. Dinkins 215 E. 68th St. New York, NY 10021 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Columbia University Occupation Professor Aggregate Year-to-Date > $ 500.00	Date (month, day, year) 12-06-95	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) 4,750.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Saundra W.Cornwell 9 Garden Place Brooklyn Heights, NY11201 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Best Effort Request Made Occupation Aggregate Year-to-Date > $ 1,000.00	07-01-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Blank Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code W.Don Cornwell 9 Garden Place Brooklyn Heights, NY11201 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Granite Broadcasting Corporation Occupation Television/Broadcasting Aggregate Year-to-Date > $ 2,000.00	Date (month, day, year) 07-01-95	Amount of Each Receipt this Period 1,000.00 Refunded
D. Full Name, Mailing Address and ZIP Code Blank Receipt For: [ ] Primary [ ] General [ ] 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 Thomas A. Davis 703 Kings Court Alexandria, VA 22302 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Davis & Harman Occupation Attorney Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) 07-29-95	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code blank Receipt For: [ ] Primary [ ] General [ ] 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 Bedy Ratner 8 S. Michigan, Ste.400 Chicago, IL 60603 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Women's Business Develop. Center Occupation Business Consultant Aggregate Year-to-Date > $ 700.00	Date (month, day, year) In-Kind Contribution Printing Fundraising Expenses	Amount of Each Receipt this Period 700.00

SUBTOTAL of Receipts This Page (optional) > 3,700.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(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): Carol Moseley Braun For U.S. Senate C00256610

Entry	Full Name, Mailing Address and ZIP Code	Receipt For	Name of Employer	Occupation	Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
A.	Rouben Terzian 750 N. Orleans Chicago, IL 60610	[X] Primary [ ] General [ ] Other (specify):	BMT & Assoc.	Toy Inventor	1,000.00	12-26-95	1,000.00
B.		[ ] Primary [ ] General [ ] Other (specify):					
C.	Willie Wilson 7850 South Cregier Chicago, IL 60649	[ ] Primary [X] General [ ] Other (specify):	STA Building	Real Estate	250.00	12-26-95	250.00
D.		[ ] Primary [ ] General [ ] Other (specify):					
E.		[ ] Primary [ ] General [ ] Other (specify):					
F.		[ ] Primary [ ] General [ ] Other (specify):					
G.		[ ] Primary [ ] General [ ] Other (specify):					

SUBTOTAL of Receipts This Page (optional) 1,250.00

TOTAL This Period (last page this line number only) 157,500.00

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 1 OF 12 | FOR LINE NUMBER 11(c)

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Allied Signal PAC FEC No. C00096156 1001 Penn.Ave NW Washington, DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date $ 1,000.00	07-18-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Transitional Hospitals Corp PAC FEC No. C00286609 6600 W. Charleston Las Vegas, NV 89102 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 1,000.00	Date (month, day, year) 07-18-95	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Central ILL Public PAC Service Company (CIPS) FEC No. C00118935 607 E. Adams Springfield, IL 62701 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 1,000.00	Date (month, day, year) 07-18-95	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Alabama Power Co. PAC FEC No. C00077305 P.O. Box 2641 Birmingham, AL 35291 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 500.00	Date (month, day, year) 07-18-95	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code Skadden Arps PAC FEC No. C00232629 1440 New York Ave.NW Washington, DC 20005 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 3,000.00	Date (month, day, year) 07-20-95	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Kech,Mahin & Cate PAC 1201 New York Ave.NW FEC NO. C00303578 Washington, DC 20005 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 500.00	Date (month, day, year) 08-04-95	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Farm Credit PAC FEC No C00193631 50 F Street NW Washington, DC 20001 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $ 500.00	Date (month, day, year) 08-08-95	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 2 OF 12 | FOR LINE NUMBER 11(a)

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): Carol Moseley Braun For U.S.Senate C00256610

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Boilermaker-Blacksmiths (LEAP) PAC Fund FEC No. C00005157 753 State Avenue Kansas City, Kansas 66101 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	08-08-95	1,000.00
	Aggregate Year-to-Date > $ 1,000.00		
B. Full Name, Mailing Address and ZIP Code General Electric PAC FEC No. C00024869 1299 Penn.Ave.,NW Washington, DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	08-14-95	1,000.00
	Aggregate Year-to-Date > $ 1,100.00		
C. Full Name, Mailing Address and ZIP Code Torchmark Corp. PAC FEC No. C00167460 2001 Third Ave. South Birmingham, AL Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	08-14-95	1,000.00
	Aggregate Year-to-Date > $ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Chevy Chase Bank PAC FEC No. C00283986 8401 Connecticut Ave. Chevy Chase, MD 20815 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	08-14-95	1,000.00
	Aggregate Year-to-Date > $ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Abbott Laboratories PAC-Better Govern. Fund FEC No. C 00040279 Route 137 @ Waukegan Rd. Abbott Park, IL 60064 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	08-21-95	1,000.00
	Aggregate Year-to-Date > $ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Barnett Bank PAC FEC No. C00094656 50 N. Laura Street Jacksonville, FL 32202 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	08-21-95	1,000.00
	Aggregate Year-to-Date > $ 2,000.00		
G. Full Name, Mailing Address and ZIP Code The Morgan Companies PAC FEC No. C00104299 60 Wall Street New York, NY 10260 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation	08-22-95	1,000.00
	Aggregate Year-to-Date > $ 1,000.00		

SUBTOTAL of Receipts This Page (optional)	7,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 3 OF 12 | FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code Hoffmann LaRoche Good Government Committee FEC No.00072769 340 Kingsland Street Nutley, NJ 07110 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) 08-28-95	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Southern Co. PAC FEC No. C00144774 64 Perimeter Center East Atlanta, GA 30346 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 250.00	Date (month, day, year) 08-28-95	Amount of Each Receipt this Period 250.00
C. Full Name, Mailing Address and ZIP Code Southern Nuclear Employees PAC FEC No. C00250407 P.O. Box 1295 Birmingham, AL 35201 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 250.00	Date (month, day, year) 08-28-95	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Citicorp Voluntary Political Fund FEC No. C00088088 1101 Penn. Ave.,NW Washington, DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 2,750.00	Date (month, day, year) 08-30-95	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Southern California Edison Company PAC FEC No. C00019653 2244 Walnut Grove Ave Rosemead, CA 91770 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 1,000.00	Date (month, day, year) 08-30-95	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Owens-Illinois, Inc. PAC Employee Good Citizenship Fund FEC No. C00034330 One SeaGate Toledo, Ohio 43666 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 2,000.00	Date (month, day, year) 09-05-95	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code First Chicago Corporation PAC FEC No. C00077347 One First Plaza Chicago, IL 60670 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 5,000.00	Date (month, day, year) 09-14-95	Amount of Each Receipt this Period 1,000.00

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

TOTAL This Period (last page this line number only) 4,750.00

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name; Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Detroit Edison PAC FEC No. C00081547 2000 Second Avenue Detroit, MI 48226 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	09-26-95	1,000.00
	Aggregate Year-to-Date $		1,000.00
B. Full Name, Mailing Address and ZIP Code National Medical PAC FEC No. C00168856 1012 Tenth Street NW WAshington, DC 20001 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer / Occupation	Date (month, day, year) 09-26-95	Amount of Each Receipt this Period 5,000.00
	Aggregate Year-to-Date $		5,000.00
C. Full Name, Mailing Address and ZIP Code Turner Broadcasting PAC FEC No. C00157925 One CNN Center Box 105366 Atlanta, GA 30348 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer / Occupation	Date (month, day, year) 09-27-95	Amount of Each Receipt this Period 1,000.00
	Aggregate Year-to-Date $		1,000.00
D. Full Name, Mailing Address and ZIP Code GATX Good Government FEC No. C 00118703 500 W. Monroe Chicago, IL 60661 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	Date (month, day, year) 09-29-95	Amount of Each Receipt this Period 1,000.00
	Aggregate Year-to-Date $		1,000.00
E. Full Name, Mailing Address and ZIP Code Kirkpatrick & Lockhart PAC FEC No. C00199786 535 Smithfield Street Pittsburgh, PA 15222 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer / Occupation	Date (month, day, year) 10-27-95	Amount of Each Receipt this Period 500.00
	Aggregate Year-to-Date $		500.00
F. Full Name, Mailing Address and ZIP Code Bristol-Myers Squibb Company PAC FEC No. C00035675 345 Park Ave. New York, NY 10154 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	Date (month, day, year) 10-28-95	Amount of Each Receipt this Period 1,000.00
	Aggregate Year-to-Date $		1,000.00
G. Full Name, Mailing Address and ZIP Code SEARLE PAC (Monsanto) P.O. Box 786 FEC No. C00042069 Skokie, IL 60076 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	Date (month, day, year) 10-28-95	Amount of Each Receipt this Period 1,000.00
	Aggregate Year-to-Date $		1,000.00

SUBTOTAL of Receipts This Page (optional) 10,500.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Ernst & Young PAC FEC No. C00227744 1225 Connecticut Ave Washington, DC 20036 Receipt For: X Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 2,500.00	10-30-95	1,000.00
B. Charter Bank PAC FEC No. C00235788 114 W. Broadway Sparta, IL 62286 Receipt For: ☐ Primary X General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 500.00	10-30-95	500.00
C. Mid-America Federal PAC FEC No. C00209841 55th & Holmes Clareondon Hlls, IL 60514 Receipt For: ☐ Primary X General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 200.00	10-30-95	200.00
D. Liberty Federal Savings PAC FEC No. C00225482 5700 N. Lincoln Ave. Chicago, IL 60659 Receipt For: ☐ Primary X General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 200.00	10-30-95	200.00
E. CNA Citizens For Good Government FEC No. C00078287 CNA Plaza Chicago, IL 60685 Receipt For: ☐ Primary X General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 3,500.00	11-01-95	2,500.00
F. The Southwest Peanut PAC FEC No. C00163154 412 First St. SE Washington, DC 20003 Receipt For: ☐ Primary X General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 1,000.00	11-14-95	1,000.00
G. Georgia Peanut Producers Assn. PAC (GAPNTPAC) FEC No. C00231597 1408 Third Ave. Albany, GA 31701 Receipt For: X Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date $ 1,000.00	11-14-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 6,400.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Peanut PAC of Alabama FEC No. C00211037 P.O. Box 1706 Dothan, AL 36302 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	11-14-95	1,000.00
	Aggregate Year-to-Date > $		1,000.00
B. Full Name, Mailing Address and ZIP Code National Venture Capital Association PAC (NVCA) FEC No. C00150367 1050 17th Street NW Washington, DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer / Occupation	11-14-95	2,000.00
	Aggregate Year-to-Date > $		2,000.00
C. Full Name, Mailing Address and ZIP Code Sugar Cane Growers Cooperative of Florida PAC FEC No. C00254656 P.O. Box 666 Belle Glade, FL 33430 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation	11-14-95	1,000.00
	Aggregate Year-to-Date > $		1,000.00
D. Full Name, Mailing Address and ZIP Code American Sugarbeeet Growers Assn. PAC FEC No. C00167684 1156 15th Street NW Washington, DC 20005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation	11-18-95	1,000.00
	Aggregate Year-to-Date > $		1,000.00
E. Full Name, Mailing Address and ZIP Code FLO-SUN PAC FEC No. C 00296624 555 13th Street NW Washington, DC 20004 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation	11-18-95	1,000.00
	Aggregate Year-to-Date > $		2,000.00
F. Full Name, Mailing Address and ZIP Code Metropolitan Life Insurance PAC FEC No. C00040923 One Madison Ave New York, NY 10010 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer / Occupation	11-19-95	500.00
	Aggregate Year-to-Date > $		500.00
G. Full Name, Mailing Address and ZIP Code Bank American Corp. PAC FEC No. C0013117 P.O. Box 37000 San Francisco, CA 94137 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation	11-20-95	3,000.00
	Aggregate Year-to-Date > $		5,500.00

SUBTOTAL of Receipts This Page (optional) 9,500.00

TOTAL This Period (last page this line number only)

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
First Chicago Corporation PAC FEC No. C00077347 One First Plaza Chicago, IL 60670		11-19-95	1,500.00
Receipt For: ☐ Other (specify): ☒ Primary ☐ General			
	Aggregate Year-to-Date $	5,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
First Chicago Corporation PAC FEC No. C00077347 One First Plaza Chicago, IL 60670		11-19-95	1,500.00
Receipt For: ☐ Other (specify): ☒ Primary ☐ General			
	Aggregate Year-to-Date $	5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Southern Minn. Sugar Coop. PAC FEC No. C00166348 Renville, MN 56284		11-24-95	1,000.00
Receipt For: ☐ Other (specify): ☒ Primary ☐ General			
	Aggregate Year-to-Date $	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
American Sugar Cane League PAC FEC No. C00031414 P.O. Drawer 938 Thibodaux, LA 70302		11-28-95	1,000.00
Receipt For: ☐ Other (specify): ☒ Primary ☐ General			
	Aggregate Year-to-Date $	1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: ☐ Other (specify): ☐ Primary ☐ General			
	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: ☐ Other (specify): ☐ Primary ☐ General			
	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: ☐ Other (specify): ☐ Primary ☐ General			
	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only) 5,000.00

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 8 OF 12 | FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
NAPUS PAC NATIONAL ASSOC. OF POSTMASTERS OF U.S. FEC No. C00100404 8 Herbert Street Alexandria, VA 22305		11-30-95	500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Brooke Holdings, Inc. PAC FEC No. C00254953 5901 Executive Dr. Lansing, MI 48911		12-06-95	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Citizens for Bernardini 55 E. Monroe Street Chicago, Illinois 60601		12-06-95	500.00 Refunded
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MCN/Michigan Consolidated Gas PAC FEC No. C00159418 500 Griswold St. Detroit, MI 48226		12-06-95	500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
House Democratic Political Action Fund P.O. Box 14101 Lansing, MI 48901		12-06-95	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
AFGE PAC AMERICAN FEDERATION OF GOVERNMENT EMPLOY. FEC No. C00009936 80 F Street, N.W. Washington, D.C. 20001		12-06-95	250.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lawyers for Better Government-Illinois FEC No. C 00217984 One IBM Plaza Chicago, IL 60601		12-06-95	1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,750.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Ernst & Young PAC FEC No. C00227744 1225 Connecticut Avenue Washington, DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 2,500.00	12-06-95	1,500.00
B. Coopers & Lybrand PAC FEC No. C00107235 1800 M Street N.W. Washington, DC 20036 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 2,500.00	12-06-95	2,500.00
C. Owens-Corning Better Government Fund PAC FEC No.C00200089 Fiberglass Tower Toledo, Ohio 43659 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 1,000.00	12-06-95	1,000.00
D. ASAPAC AMERICAN SOC. OF ANESTHESIOLOGISTS FEC No. c00255752 520 N. Northwest Highway Park Ridge, IL 60068 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 2,500.00	12-06-95	2,500.00
E. Kirkland & Ellis PAC FEC No. C00212142 200 E. Randolph Dr. #500 Chicago, IL 60601 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 2,500.00	12-06-95	2,500.00
F. Arthur Anderson PAC FEC No. C00221168 1666 K Street N.W. Washington, DC 20006 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 4,000.00	12-06-95	2,000.00
G. Commodity Futures Political Fund FEC No. C000076299 30 S. Wacker Dr. Chicago, IL 60606 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $ 5,000.00	12-06-95	5,000.00

SUBTOTAL of Receipts This Page (optional) 17,000.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF
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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code Signalmen's Political League (Brotherhood of Railroad Signalmen) FEC No. C 00011262 P.O. Box U Prospect, IL 60056	Occupation	12-06-95	500.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify): X	Aggregate Year-to-Date > $ 500.00		
B. Full Name, Mailing Address and ZIP Code AICPA Legislation Comm. FEC No. C00077321 222 S. Riverside Plaza Chicago, IL 60606	Name of Employer: American Institute of CPAs	12-06-95	1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000.00		
C. Full Name, Mailing Address and ZIP Code Arthur Anderson PAC C00221168 1666 K. Street, N.W. Washington, DC 20006	Name of Employer	12-06-95	2,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 4,000.00		
D. Full Name, Mailing Address and ZIP Code DeVry PAC FEC No. C00198606 One Tower Lane Oakbrook Terrace, IL 60181	Name of Employer	12-06-95	250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 250.00		
E. Full Name, Mailing Address and ZIP Code Fruit of the Loom Good Government Comm. FEC No. 5000 Sears Tower Chicago, IL 60606	Name of Employer	12-06-95	1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 1,000.00		
F. Full Name, Mailing Address and ZIP Code Burson-Marsteller PAC FEC No. C00201863 1850 M St. N.W. Washington, DC 20036	Name of Employer	12-06-95	500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 500.00		
G. Full Name, Mailing Address and ZIP Code Bureau of Wholesale Sales Representative PAC FEC No. C00107400 1801 Peachtree St. NW Suite 200 Atlanta, GA 30309	Name of Employer	12-06-95	250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $ 250.00		

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

FEC Form 3 (6-95)

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. HS Political Fund FEC No. C00105338 70 W. Madison Chicago, IL 60602 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date $ 500.00	12-06-95	500.00
B. ICI Americas PAC FEC No. C00185660 Concord Pike & Murphy Wilmington, DE. 19897 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date $ 500.00	12-29-95	500.00
C. General Electric Co.PAC FEC No. C00024869 1229 Pennsylvania Ave.NW Washington, DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Earmarked Cont. of James Shepard Occupation: General Manager Nuclear Aggregate Year-to-Date $	12-29-95	200.00 Memorandum Only Earmarked Contr.
D. Deloitte & Touche FEC No. C00211318 Federal PAC 1001 Pennsylvania Ave.NW Washington, DC 20004 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date $ 2,000.00	12-29-95	2,000.00
E. Guardian Ind.Corp. PAC FEC No C00289285 Northville, Michigan49883 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date $ 200.00		200.00
F. 8th Ward Regular Democratic Organization 8539 S. Cottage Grove Chicago, IL 60619 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date $ 1,000.00	Funds within Accept. Limits 12-29-95	1,000.00
G. Friends of Edward M. Burke 2650 W. 51st Street Chicago, Il 60632 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date $ 1,000.00	Funds within Accept. Limits. 12-29-95	1,000.00

SUBTOTAL of Receipts This Page (optional) 5,200.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 12 OF 12 | FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code FMC Corporation Good Government Program FEC No. C00033704 200 East Randolph Dr. Chicago, IL 60601 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation Aggregate Year-to-Date > $ 1000.00	07-01-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Blank Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Blank Receipt For: [ ] Primary [ ] General [ ] 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 Blank Receipt For: [ ] Primary [ ] General [ ] 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 Blank Receipt For: [ ] Primary [ ] General [ ] 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 Blank Receipt For: [ ] Primary [ ] General [ ] 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 Blank Receipt For: [ ] Primary [ ] General [ ] 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)	1,000.00
TOTAL This Period (last page this line number only)	82,100.00

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Names In The News One Bush Street San Francisco, CA 94104 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation	07-17-95	265.18
	Aggregate Year-to-Date > $		15,157.50
B. Full Name, Mailing Address and ZIP Code Names In The News One Bush Street San Francisco, CA 94104 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	07-17-95	476.98
	Aggregate Year-to-Date > $		15,157.50
C. Full Name, Mailing Address and ZIP Code Names In The News One Bush Street San Francisco, CA 94104 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	07-17-95	1,558.48
	Aggregate Year-to-Date > $		15,157.50
D. Full Name, Mailing Address and ZIP Code Names In The News One Bush Street San Francisco, CA 94104 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	08-24-95	367.78
	Aggregate Year-to-Date > $		15,157.50
E. Full Name, Mailing Address and ZIP Code Names In The News One Bush Street San Francisco, CA 94104 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	08-24-95	342.53
	Aggregate Year-to-Date > $		15,157.50
F. Full Name, Mailing Address and ZIP Code Names In The News One Bush Street San Francisco, CA 94104 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	09-08-95	526.24
	Aggregate Year-to-Date > $		15,157.50
G. Full Name, Mailing Address and ZIP Code Names In The News One Bush Street San Francisco, CA 94104 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer / Occupation	09-26-95	280.72
	Aggregate Year-to-Date > $		15,157.50

SUBTOTAL of Receipts This Page (optional) 3,817.91

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

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SCHEDULE A — ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 2 OF 12 | FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S.Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Names In The News One Bush Street San Francisco, CA 94104		10-28-95	1,704.94
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		15,157.50
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Names In The News One Bush Street San Francisco, CA 94104		11-24-95	561.22
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		15,157.50
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Blank			
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional)	2,266.16
TOTAL This Period (last page this line number only)	6,084.07

FE059

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Jane Scott Brown 4306 Westover Place Washington, DC 20043	Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07-12-95	6,000.00
B.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement: Treasurer Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07-12-95	7,000.00
D.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement: Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	07-12-95	384.00
F.	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Carroll Travel Agency 201 Mass. Ave. NE Washington, DC 20002	Purpose of Disbursement: Staff Travel (Air) Disbursement for [ ] Primary [X] General [ ] Other (specify)	07-12-95	591.00
H.	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. A.B.Data 8050 N. Port Washington Milwaukee, Wisconsin 53217	Purpose of Disbursement: Fundraising Expenses Direct Mail Campaign Disbursement for [ ] Primary [X] General [ ] Other (specify)	07-12-95	236.00

SUBTOTAL of Disbursements This Page (optional) 14,211.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Windy City Times 470 W. Montana Chicago, IL 60614	Political Advertisement Expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	07-12-95	380.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Susan Torricelli 1300 Connecticut Ave. Washington, DC 20036	Purpose of Disbursement Fundraising Fee and Expenses. Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 07-12-95	Amount of Each Disbursement This Period 6,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 07-12-95	Amount of Each Disbursement This Period 1,591.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 07-12-95	Amount of Each Disbursement This Period 1,250.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee and Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 07-12-95	Amount of Each Disbursement This Period 600.00

SUBTOTAL of Disbursements This Page (optional) 9,821.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Fundraising Fee and Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-16-95	2,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Susan Torricelli 1300 Connecticut Ave. Washington, DC 20036	Fundraising Fee and Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-16-95	3,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code U.S.Senate Restaurant First and C Streets N.E. Washington, DC 20510	Banquent Expenses Disbursement for [X] Primary [ ] General [ ] Other (specify)	08-16-95	1,064.21
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Steve Brown 222 W. Adams Chicago, IL 60606	Media Services & Press Disbursement for: [X] Primary [ ] General [ ] Other (specify)	08-16-95	500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code U.S.Post Office Illinois State Building LaSalle @ Randolph Chicago, IL 60606	Office Stamps Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-16-95	100.00

SUBTOTAL of Disbursements This Page (optional) 6,664.21

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Independent Voters of Illinois-IPO 202 S.State Street Chicago, IL 60604	Political Advertisement Expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	08-16-95	600.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Democratic Conference Luncheon c/o:Ann Atkins 462 Dirksen Senate Bldg. Washington, DC 20510	Purpose of Disbursement Banquent Expenses Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 08-16-95	Amount of Each Disbursement This Period 248.23
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Treasurer Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 08-16-95	Amount of Each Disbursement This Period 3,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Democratic Party of Oak Park 306 Madison Street Oak Park, IL	Purpose of Disbursement Political Advertisement Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 08-16-95	Amount of Each Disbursement This Period 100.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 08-30-95	Amount of Each Disbursement This Period 2,000.00

SUBTOTAL of Disbursements This Page (optional) 6,448.23

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Susan Torricelli 1300 Connecticut Ave. Washington, DC 20036	Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	and 08-30-95	3,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 08-30-95	Amount of Each Disbursement This Period 682.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Treasurer Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 08-30-95	Amount of Each Disbursement This Period 2,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Augusta Fordham 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Travel Advance Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 08-30-95	Amount of Each Disbursement This Period 250.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code ATT P.O. Box 27-866 Kansas City, MO 64184	Purpose of Disbursement Telecommunication Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 08-30-95	Amount of Each Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional) 7,432.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ameritech P.O. Box 2500 Bedford Park, IL 60499	Telecommunication Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	08-30-95	1,038.50
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
C. Full Name, Mailing Address and ZIP Code A.B.Data 8050 N. Port Washington Milwaukee, Wisconsin 53217	Purpose of Disbursement Fundraising Expenses Direct Mail Campaign Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	09-15-95	5,650.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
E. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-15-95	2,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code Susan Torricelli 1300 Connecticut Ave. Washington, DC 20036	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-15-95	3,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-20-95	682.00

SUBTOTAL of Disbursements This Page (optional) 12,370.50

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Temporary Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	09-20-95 09-20-95	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Treasurer Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-20-95	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Motorola Cellular Service P.O. Box 95774 Chicago, IL 60694	Purpose of Disbursement Telecommunication Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-20-95	Amount of Each Disbursement This Period 115.24
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code KMA Resources One East Superior Chicago, IL 60611	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-20-95	Amount of Each Disbursement This Period 5,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Susan Torricelli 1300 Connecticut Ave. Washington, DC 20036	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-20-95	Amount of Each Disbursement This Period 3,000.00

SUBTOTAL of Disbursements This Page (optional) 9,365.24

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code Kezio Properties 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Office Lease Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-20-95	Amount of Each Disbursement This Period 1,400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code MCI Telecommunications 1133 19th St.NW Washington, DC 20036	Purpose of Disbursement Telecommunication Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-20-95	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Steve Brown 222 W. Adams Chicago, IL 60606	Purpose of Disbursement Media Services & Press Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-20-95	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-29-95	Amount of Each Disbursement This Period 2,108.06
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement Temporary Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 09-29-95	Amount of Each Disbursement This Period 750.00

SUBTOTAL of Disbursements This Page (optional)	5,758.06
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	09-29-95 09-29-95	150.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code KMA Resources One East Superior Chicago, IL 60611	Purpose of Disbursement Fundraising Fee and Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 09-29-95	Amount of Each Disbursement This Period 2,500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Treasurer Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 09-29-95	Amount of Each Disbursement This Period 2,261.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Susan Torricelli 1300 Connecticut Ave. Washington, DC 20036	Purpose of Disbursement Fundraising Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 09-29-95	Amount of Each Disbursement This Period 116.27
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Regal Business Machines 1140 Washington Blvd Chicago, IL 60607	Purpose of Disbursement Office Supplies Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10-12-95	Amount of Each Disbursement This Period 198.04

SUBTOTAL of Disbursements This Page (optional) 5,225.31

TOTAL This Period (last page this line number only)

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10-12-95	150.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10-12-95	Amount of Each Disbursement This Period 150.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code KMA Resources One East Superior Chicago, IL 60611	Purpose of Disbursement Fundraising Fee and Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10-28-95	Amount of Each Disbursement This Period 7,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code U.S.Post Office Illinois State Building LaSalle @ Randolph Chicago, IL 60606	Purpose of Disbursement Office Stamps Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10-28-95	Amount of Each Disbursement This Period 100.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code U.S.Senate Restaurant First and C Streets N.E. Washington, DC 20510	Purpose of Disbursement Banquent Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 10-28-95	Amount of Each Disbursement This Period 995.10

SUBTOTAL of Disbursements This Page (optional) 8,895.10

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Consolidated Maryland Printers 4042 North Nashville Ave Chicago, IL 60634	Fundraising Expense Printing Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10-30-95	4,236.40
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Signed Sealed and Delivered 109 Crosson Elk Grove Vill, IL 60007	Purpose of Disbursement Fundraising Expense Printing Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-01-95	Amount of Each Disbursement This Period 4,120.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Debbie Mazor 1825 N. Lincoln Chicago, IL 60614	Purpose of Disbursement Fundraising Expense Graphic Art Printing Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-01-95	Amount of Each Disbursement This Period 350.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-01-95	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Treasurer Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-01-95	Amount of Each Disbursement This Period 3,000.00

SUBTOTAL of Disbursements This Page (optional) 12,706.40

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-01-95	750.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-01-95	Amount of Each Disbursement This Period 750.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Treasurer Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-07-95	Amount of Each Disbursement This Period 3,293,00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee and Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-07-95	Amount of Each Disbursement This Period 2,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Caffe Baci 231 S. LaSalle Street Chicago, IL 60601	Purpose of Disbursement Banquent Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-07-95	Amount of Each Disbursement This Period 3,000.00

SUBTOTAL of Disbursements This Page (optional) 9,793.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for ☐ Primary ☐ General ☐ Other (specify)		
C. Full Name, Mailing Address and ZIP Code U.S.Post Office Illinois State Building LaSalle @ Randolph Chicago, IL 60606	Purpose of Disbursement Office Stamps Expense	Date (month, day, year) 11-07-95	Amount of Each Disbursement This Period 130.00
	Disbursement for: ☐ Primary ☒ General ☐ Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement Temporary Services	Date (month, day, year) 11-10-95	Amount of Each Disbursement This Period 750.00
	Disbursement for: ☐ Primary ☒ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services	Date (month, day, year) 11-10-95	Amount of Each Disbursement This Period 750.00
	Disbursement for: ☐ Primary ☒ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee and Expenses	Date (month, day, year) 11-15-95	Amount of Each Disbursement This Period 3,000.00
	Disbursement for ☐ Primary ☒ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 4,630.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Treasurer Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-10-95	5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Coaxum & Hewitt 820 W. Superior Cleveland, OH 44113	Purpose of Disbursement Legal Fees Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-15-95	Amount of Each Disbursement This Period 3,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Ameritech P.O. Box 2500 Bedford Park, IL 60499	Purpose of Disbursement Telecommunication Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-15-95	Amount of Each Disbursement This Period 831.45
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Advance Business System 401 N. Franklin St. Chicago, IL 60610	Purpose of Disbursement Equipment Rental Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-15-95	Amount of Each Disbursement This Period 300.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Susan Torricelli 1300 Connecticut Ave. Washington, DC 20036	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-15-95	Amount of Each Disbursement This Period 59.58

SUBTOTAL of Disbursements This Page (optional) 9,191.03

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full) Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Jane Scott Brown 4306 Westover Place Washington, DC 20043	Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-17-95	3,000.00
B. Full Name, Mailing Address and ZIP Code Kezio Properties 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Office Lease Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-20-95	Amount of Each Disbursement This Period 4,200.00
C. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679	Purpose of Disbursement Travel Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-20-95	Amount of Each Disbursement This Period 277.80
D. Full Name, Mailing Address and ZIP Code United Airlines O'Hare Airport Chicago, IL 60638	Purpose of Disbursement Travel Expenses Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 11-20-95	Amount of Each Disbursement This Period 277.80 Memorandum
E. Full Name, Mailing Address and ZIP Code Caffe Baci 231 S. LaSalle Street Chicago, IL 60601	Purpose of Disbursement Banquent Expense Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 3,000.00
F. Full Name, Mailing Address and ZIP Code U.S.Post Office Illinois State Building LaSalle @ Randolph Chicago, IL 60606	Purpose of Disbursement Office Stamps Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 100.00
G. Full Name, Mailing Address and ZIP Code Marcus Johnson Band 10113 S Rhoades Chicago, IL 60628	Purpose of Disbursement Fundraising Expense Band Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 350.00
H. Full Name, Mailing Address and ZIP Code Kezio Properties 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Office Lease Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 800.00
I. Full Name, Mailing Address and ZIP Code United Parcel Service P.O. Box 650580 Dallas, TX 75265-0580	Purpose of Disbursement Delivery Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 1,038.00

SUBTOTAL of Disbursements This Page (optional) 12,765.80

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Warehouse Direct Order From Horder 1601 W. Algonquin Rd Mt.Prospect, IL 60056 60006	Office Supplies Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-28-95	994.14
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Harvitz Printing Incorp. 6801 State Road Philadelphia, PA 19135	Purpose of Disbursement Fundrasing Expens (Printing) Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 983.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code United Airlines O'Hare Airport Chicago, IL 60638	Purpose of Disbursement Travel Expenses Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 955.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Rockford Labor News 1418 Broadway Rockford, IL 61104	Purpose of Disbursement Political Advertisement Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 75.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Augusta Fordham 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-28-95	Amount of Each Disbursement This Period 250.00

SUBTOTAL of Disbursements This Page (optional) 3,257.14

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-30-95	1,590.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	11-30-95	180.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Continental Arilines 21 E. Monroe Street Chicago, IL 60601	Travel Expenses Disbursement for [ ] Primary [X] General [ ] Other (specify)	11-30-95	285.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Consolidated Maryland Printers 4042 North Nashville Ave Chicago, IL 60634	Purpose of Disbursement Fundraising Expense Printing Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 11-30-95	Amount of Each Disbursement This Period 224.44
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code KMA Resources One East Superior Chicago, IL 60611	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-05-95	Amount of Each Disbursement This Period 5,000.00

SUBTOTAL of Disbursements This Page (optional) 7,279.44

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full) Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Dot Ward Photography P.O.Box 2311 Homewood, IL 60430	Fundraising Expense Photos Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-05-95	445.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code U.S.Post Office Illinois State Building LaSalle @ Randolph Chicago, IL 60606	Purpose of Disbursement Office Stamps Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-05-95	Amount of Each Disbursement This Period 100.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Ameritech P.O. Box 2500 Bedford Park, IL 60499	Purpose of Disbursement Telecommunication Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-05-95	Amount of Each Disbursement This Period 1,869.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Motorola Cellular Service P.O. Box 95774 Chicago, IL 60694	Purpose of Disbursement Telecommunication Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-05-95	Amount of Each Disbursement This Period 37.70
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Continental Airlines 21 E. Monroe Street Chicago, IL 60601	Purpose of Disbursement Travel Expenses Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-08-95	Amount of Each Disbursement This Period 631.50

SUBTOTAL of Disbursements This Page (optional) 3,083.20

TOTAL This Period (last page this line number only)

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
15	MCI Telecommunications 1133 19th St.NW Washington, DC 20036	Telecommunication Expense	[ ] Primary [X] General [ ] Other (specify)	12-08-95	2,000.00
16	B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	[ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
17	C. Full Name, Mailing Address and ZIP Code Lorenzo Little 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Travel Expenses	[X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 160.00
18	D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	[ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
19	E. Full Name, Mailing Address and ZIP Code U.S. Post Office Adams Street Office Chicago, IL 60606	Purpose of Disbursement Office Stamps Expense	[ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 480.00
20	F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	[ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
21	G. Full Name, Mailing Address and ZIP Code KMA Resources One East Superior Chicago, IL 60611	Purpose of Disbursement Fundraising Fee and Expenses	[ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 5,120.50
22	H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	[ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
23	I. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services	[ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 1,200.00

SUBTOTAL of Disbursements This Page (optional) 8,960.50

TOTAL This Period (last page this line number only)

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-13-95	672.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 4,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code KMA Resources One East Superior Chicago, IL 60611	Purpose of Disbursement Fundraising Fee Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 159.43
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679	Purpose of Disbursement Travel Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 901.00
H. Full Name, Mailing Address and ZIP Code United Airlines O'Hare Airport Chicago, IL 60638	Purpose of Disbursement Travel Expenses Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 901.00 Memo.Entry
I. Full Name, Mailing Address and ZIP Code The Feed Store 516 E. Adams Street Springfield, IL 62701	Purpose of Disbursement Banquent Expenses Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 12-13-95	Amount of Each Disbursement This Period 130.53

SUBTOTAL of Disbursements This Page (optional) 5,862.96

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Arrow Messenger Service 1322 West Walton Chicago, IL 60622	Delivery Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-15-95	121.43
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Roses Roses 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Fundraising Expense; Flowers Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-15-95	Amount of Each Disbursement This Period 298.19
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-21-95	Amount of Each Disbursement This Period 450.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement Temporary Services Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-21-95	Amount of Each Disbursement This Period 144.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Jill Zwick 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Travel Expenses Disbursement for [ ] Primary [X] General [ ] Other (spec	Date (month, day, year) 12-21-95	Amount of Each Disbursement This Period 913.83

SUBTOTAL of Disbursements This Page (optional) 1,927.45

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full) Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Williams James 201 N. Wells Chicago, IL 60606	Travel Expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-21-95	224.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Edith Wilson 2804 Farm Road Alexandria, VA 22302	Travel Expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-21-95	1,806.24
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Travel Expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-21-95	1,835.19
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code U.S.Senate Restaurant First and C Streets N.E. Washington, DC 20510	Banquent Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-21-95	1,500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Radison Lincolnwood 4500 West Touchy Ave Lincolnwood, IL 60646	Banquent Expense Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-21-95	3,284.23

SUBTOTAL of Disbursements This Page (optional)	8,649.66
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Earl Hopewell 201 N. Wells Chicago, IL 60606	Treasurer Service Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-21-95	7,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Lorenzo Little 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Travel Expenses Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 12-21-95	Amount of Each Disbursement This Period 214.81
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Coaxum & Hewitt 820 W. Superior Street Cleveland, OH 44113	Purpose of Disbursement Legal Fees Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-21-95	Amount of Each Disbursement This Period 5,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Oldaker, Ryan & Leonard 818 Conn. Ave Washington, DC 20002	Purpose of Disbursement Legal Fees Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-31-95	Amount of Each Disbursement This Period 5,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Wildman, Harrold, Allen & Dixon 225 W. Wacker Drive Chicago, IL 60601	Purpose of Disbursement Legal Fees Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-31-95	Amount of Each Disbursement This Period 10,000.00

SUBTOTAL of Disbursements This Page (optional) 27,214.81

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Coaxum & Hewitt 820 W. Superior Street Cleveland, OH 44113	Legal Fees Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-22-95	2,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Kezio Properties 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Office Lease Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-22-95	Amount of Each Disbursement This Period 5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Earl Hopewell 201 N. Wells Chicago, IL 60606	Purpose of Disbursement Treasurer Service Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-31-95	Amount of Each Disbursement This Period 7,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Ronnie Jenkins 5918 W. Augusta Blvd. Chicago, IL 60651	Purpose of Disbursement Temporary Services Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-29-95	Amount of Each Disbursement This Period 450.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Malcolm Thompson 10214 S. Walden Pkwy Chicago, IL 60643	Purpose of Disbursement Temporary Services Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-29-95	Amount of Each Disbursement This Period 200.00

SUBTOTAL of Disbursements This Page (optional) 14,650.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code David L Andrukitis House Printing Office Rayburn Building WA-45 Washington, DC 20515	Fundraising Expense Printing Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-29-95	177.50
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code U.S.Senate Gift Store Office of the Secretary Washington, DC 20510	Purpose of Disbursement Miscellaneous Expense Stationary Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 12-29-95	Amount of Each Disbursement This Period 2,172.40
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] 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 [ ] Primary [ ] General [ ] Other (specify)	Date (month, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Jane Scott Brown 4306 Westover Place Washington, DC 20043	Purpose of Disbursement Fundraising Fee Expenses Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, and year) 12-31-95	Amount of Each Disbursement This Period 15,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Campaign Finance Consultants 236 Mass Ave NE Washington, DC 20002	Purpose of Disbursement Fundraising Fee Expenses Disbursement for [ ] Primary [X] General [ ] Other (specify)	Date (month, and year) 12-31-95	Amount of Each Disbursement This Period 9,242.54

SUBTOTAL of Disbursements This Page (optional) 26,592.44

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full) Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code Hedy Ratner 8 South Michigan, Ste.400 Chicago, IL 60603	Purpose of Disbursement In Kind Contribution Printing Fundraising Expenses Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12-06-95	Amount of Each Disbursement This Period 700.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code American National Bank 33 N. LaSalle Street Chicago,IL 60670	Purpose of Disbursement Misc.Service Fees Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 12-31-95	Amount of Each Disbursement This Period 45.78
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	745.78
TOTAL This Period (last page this line number only)	243,500.26

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

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NAME OF COMMITTEE (in Full) Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Elinor A. Seevak 56 Duffield Drive South Orange, NJ 070709	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-14-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Marianne C. Spraggins 444 Central Park West New York, NY 10025	Purpose of Disbursement Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 700.00
D. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Prentiss Taylor 1660 N.LaSalle Street Chicago, IL 60614	Purpose of Disbursement Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Vicky Joseph 365 S. Hudson Avenue Los Angeles, CA 90020	Purpose of Disbursement Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code George Joseph 4484 Wilshire Boulevard Los Angeles, CA 90010	Purpose of Disbursement Contribution Refund Disbursement for ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 1,000.00

SUBTOTAL of Disbursements This Page (optional) 4,700.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
9	George Jones 423 E. 60th Street Chicago, IL 60637	Contribution Refund Disbursement for: Primary [ ] General [X] Other (specify)	12-14-95	300.00
	B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	Blank	Disbursement for: Primary [ ] General [ ] Other (specify)		
	C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	George Palivos 505 North Lake Shore Drive Chicago, IL 60611	Contribution Refund Disbursement for: Primary [ ] General [X] Other (specify)	12-14-95	200.00
	D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	Blank	Disbursement for: Primary [ ] General [ ] Other (specify)		
	E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	Robert Stein 4111 Argyie Terrance Washington, DC 20011	Contribution Refund Disbursement for: Primary [ ] General [X] Other (specify)	12-14-95	812.50
	F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	Blank	Disbursement for: Primary [ ] General [ ] Other (specify)		
	G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	Antonia Grumbach 320 Central Park West New York, NY 10025	Contribution Refund Disbursement for: Primary [X] General [ ] Other (specify)	12-14-95	462.80
	H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	Blank	Disbursement for: Primary [ ] General [ ] Other (specify)		
	I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
	Marvin I. Herman 1413 Tower Road Winnetka, IL 60093	Contribution Refund Disbursement for: Primary [X] General [ ] Other (specify)	12-14-95	250.00

SUBTOTAL of Disbursements This Page (optional) 2,025.30

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Louis Kanda 8601 Split Oak Circle Bethesda, MD 20817	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	250.00
B. Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Marcy Twardak 7244 W. Pratt Chicago, IL 60631	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00
D. Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Maryann Bader 2475 Richard Court Mountainview, CA 94003-	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	189.75
F. Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Cynthia Harris Box 95 Lenny's Lane Hampton, CT 06427	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	287.00
H. Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Sidney Port 1040 N.Lakeshore Drive, Unit 21A Chicago, IL 60611	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	700.00

SUBTOTAL of Disbursements This Page (optional) 2,426.75

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

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NAME OF COMMITTEE (In Full): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Lawrence Suffredin 2431 Pioneer Road Evanston, IL 60201	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	500.00
B. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Marjorie Susman 1325 North Astor Street Chicago, IL 60610	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	750.00
D. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Marilyn Teeters 566 North Lincoln Hinsdale, IL 60521	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	500.00
F. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Yoko Vehara 5026 Little Walnut Road, Apt A Silver City, NM 88061	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00
H. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Edgar Vilchur P.O.Box 306 Woodstock, NY 12498	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00

SUBTOTAL of Disbursements This Page (optional) 3,750.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 30(a)

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NAME OF COMMITTEE (in Full)

Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rosemary Vilchur P.O.Box 306 Woodstock, NY 12498	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Blank	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Marc Weiss 684 Broadway, Apt 6E New York, NY 10012	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Blank	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Blank Mary Ann Stein 4111 Argyle Terrace NW Washington, DC 20043	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	848.65
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Blank	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frank Pearl 1627 Eye Street, N.W. Washington, DC 20006	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Blank	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cezar Froelich 711 Oak Street Winnetka, IL 60093	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	250.00

SUBTOTAL of Disbursements This Page (optional) 4,098.65

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 20(a)

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NAME OF COMMITTEE (in Full): Carol Moseley Braun For U.S. Senate C00256610

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Micheal Segal 100 E. Bellevue Place Chicago,IL 60611	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	2,000.00
B. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Joan Palevsky 623 S. Beverly Gleen Los Angeles, CA 90024	Purpose of Disbursement Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Claybon Jones 9915 South Calumet Chicago, IL 60628	Purpose of Disbursement Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code J. Weldon Granger P.O. Box 4340 Houston, TX 77210	Purpose of Disbursement Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 1,000.00
H. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Celia Gilbert 15 Gray Gardens West Chicago, IL 60657	Purpose of Disbursement Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Disbursements This Page (optional) 4,500.00

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

4-98172

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 9

FOR LINE NUMBER 20(a)

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): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Floyd Coard 6222 Wilshire Blvd. Los Angeles	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code W.Don Cornwell 9 Garden Place Brooklyn Heights, NY11201	Contribution Refund Disbursement for: [X] Primary [ ] General [ ] Other (specify)	12-14-95	1,000.00 Reissued
D. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Jane Dixon 2100 Sierra Sage Lane Reno, NV 89505	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	500.00
F. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Robert J. Bingle 634 S. Washington Hinsdale, IL 60521	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	1,000.00
H. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Martina Ardiff 238 Conant Street Denvers, MA 01923	Contribution Refund Disbursement for: [ ] Primary [X] General [ ] Other (specify)	12-14-95	500.00

SUBTOTAL of Disbursements This Page (optional): 4,000.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 8 OF 19
	FOR LINE NUMBER 20(a)

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) Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Percy Sutton 10 W. 135th Street New York, NY 10037	Refund of 12-6-95 1 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	12-31-95	1,000.00
B. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement: Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Penny Pritzker & Bryan Trabert Fund 200 W. Madison Chicago, IL 60606	Purpose of Disbursement: Refund of 12-6-95 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 12-31-95	Amount of Each Disbursement This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement: Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code Nicholas S. Gouletas 505 N. Lakeshore Drive Chicago, IL 60611	Purpose of Disbursement: Refund of 12-6-95 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 12-31-95	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement: Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code Jacqueline Avant 1140 Maytor Place Beverly Hills, CA 90210	Purpose of Disbursement: Contribution Refund Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 12-14-95	Amount of Each Disbursement This Period 500.00
H. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement: Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code Blank	Purpose of Disbursement: Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	3,500.00
TOTAL This Period (last page this line number only)	

4-00172

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 9 OF 9

FOR LINE NUMBER 20(a)

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)

Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Blank	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and ZIP Code Blank	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
C. Full Name, Mailing Address and ZIP Code Clarence Avant 1140 Maytor Place Beverly Hills, CA 90210	Refund of 5-17 cont. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-31-95	1,500.00
D. Full Name, Mailing Address and ZIP Code Blank	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code Robert L. Johnson 2915 Audubon Terrace NW Washington, DC 20008	Refund of 5-17 Cont. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-31-95	500.00
F. Full Name, Mailing Address and ZIP Code Blank	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code Corrine C. Boggs 623 Bourgon Street New Orleans, LA 70130	Refund of 1-30 Cont. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-31-95	500.00
H. Full Name, Mailing Address and ZIP Code Blank	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code Kneeland Youngblood 16239 Amberwood Rd Dallas, TX 75248	Refund of 3-1 Cont. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-31-95	500.00

SUBTOTAL of Disbursements This Page (optional) 3,000.00

TOTAL This Period (last page this line number only) 32,000.70

4-00172

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 20(c)

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): Carol Moseley Braun For U.S. Senate C00256610

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Goldman Sachs PAC 1101 Penn Ave.NW Washington, D.C. 20004	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-14-95	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code Citizens for Bernardini 55 W. Monroe Chicago, IL 60601	Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	12-31-95	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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 ☐ Primary ☐ General ☐ 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 ☐ Primary ☐ General ☐ 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 ☐ Primary ☐ General ☐ 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 ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,500.00
TOTAL This Period (last page this line number only)	1,500.00

4-90/72

C 00 25 66 10 FEC 9.0

Notes to Debts and Obligations
(Schedule D-Line 10)

Note 1. **Sheads and Associates.**
The Committee understands the obligation to this vendor has been reduced through the rental of the Committee's direct mailing list, by the activities of the Committee's former direct mail consultant. The Committee has requested an accounting of all direct mail rental activities from the direct mail consultant and Sheads and Associates. To date, such accounting has not been provided.

Note 2. **Kezio Properties.**
The Committee's lease agreement expired January 31, 1992. This vendor and the Committee have undertaken discussions. This vendor has asserted that the Committee owed to it $ 40,000.00 While the Committee continues to dispute this amount. The Committee paid to the vendor $ 11,100.00 during the period.

The Committee continues to request that this vendor reflect the fair market rental value per square foot rather than a lump-sum monthly amount. The adjustment has not been made and forwarded to the Committee, to date.

Note 3. **Bonsai Engineering Consultants.**
The Committee disputes the amount totalling $41,805.00. The Committee has filed a formal complaint against the vendor and its principal which challenges the claim, and the Committee will request damages in excess of the amount of the claim.

Note 4. **Losser and Associates.**
The Committee understands that any obligation to this vendor may been reduced through the rental of the Committee's direct mailing list, by the activities of the this former direct mail consultant. The Committee has requested an accounting of all direct mail rental activities from this direct mail consultant and Sheads and Associates. To date, such accounting has not been provided.

Note 5. **Dorsey Norman & Associates.**
The Committee disputes the validity of this claim submitted to the Committee subsequent to the general election for an amount of $8,099.00. The Committee further asserts that all activity by this vendor was consummated on a "pay-as-executed" basis.

SCHEDULE D
(Revised 3/88)

DEBTS AND OBLIGATIONS

(PRE -ELECTION DEBT)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor AT&T 227 West Monroe Street Chicago, IL 60605	4,646.87	-0-	-0-	4,646.87
--Nature of Debt (Purpose): Telecommunication Expense and resolution of balance due.				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bo Calloway D/B/A Porta Com Communications 531 South Dearborn Chicago, IL 60605	5,977.00			5,977.00
--Nature of Debt (Purpose): Telecommunication Expense.				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Brooks Furniture Rental P.O.Box 95224 Chicago, IL 60694	2,131.58			2,131.58
--Nature of Debt (Purpose): Office Furniture Rental and applied deposit.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Brownlee Transportation 1001 W. 115th Street Chicago, IL 60643-1999	1,270.69			1,270.69
--Nature of Debt (Purpose): Staff Transportation.				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bukhara Restaurant 2 East Ontario Street Chicago, IL 60611	1,759.68			1,759.68
--Nature of Debt (Purpose): Fundraising Expense				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Carolyn Kazdin 1840 Biltmore Washington, DC 20009	2,650.70			2,650.70
--Nature of Debt (Purpose): Political Consultant.				

1) SUBTOTALS This Period This Page (optional)	18,436.52
2) TOTAL This Period (last page 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 B
(Revised 3/88)

DEBTS AND OBLIGATIONS
(PRE-ELECTION DEBT)

Name of Committee (in Full)
Carol Moseley-Braun for U.S. Senate C00254619

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Citizens For Welch 4100 West 183rd Street County Club Hil, IL 60478 Nature of Debt (Purpose): Office Leasing Fee	500.00			500.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Curran For State Representativ P.O.Box 10252 Springfield, IL 62791-0252 Nature of Debt (Purpose): Miscellaneous Supplies	200.00			200.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Data Integrity Resources P.O. Box 244 Hyattsville, MD 20781 Nature of Debt (Purpose): Fundraising Fee (Consultants).	2,844.44			2,844.44
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Digby's Detective & Security 2630 South Wabash Ave. Chicago, IL 60616 Nature of Debt (Purpose): Security Services.	2,069.32			2,069.32
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Earl Hopewell Hopewell & Company Three First National Plz. Chicago, IL 60601 Nature of Debt (Purpose): Travel Reimbursement to Washington (Direct Mail Line)	52.19			52.19
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Earl Hopewell Hopewell & Company Three First National Plz. Chicago, IL 60601 Nature of Debt (Purpose): Campaign Compliance Officer (Thompson)	8,220.00			8,220.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	95,885.95
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

SCHEDULE B
(Revised 3/88)

DEBTS AND OBLIGATIONS
(PRE --ELECTION DEBT)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Earl Hopewell, Treasurer 281 N. Wells Chicago, IL 60606	17,500.00			17,500.00
--Nature of Debt (Purpose): November/December 1992				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor East Lake Management 1250 North LaSalle Street Chicago, IL 60610	13,202.63			13,202.63
--Nature of Debt (Purpose): Subsistence for Staff.				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Exquisite Catering 7302 South Cottage Grove Chicago, IL 60628	4,105.39			4,105.39
--Nature of Debt (Purpose): Fundraising Catering Services.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Federal Express Corporation Department A P.O.Box 1140 Memphis, TN 38101-1140	1,945.00			1,945.00
--Nature of Debt (Purpose): Delivery Expense				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Gerald Austin Austin & Sheinkopf 7700 Rivers Edge Drive Columbus, OH 43235	1,596.79			1,596.79
--Nature of Debt (Purpose): Travel Expenses and Subsistence				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Government Information Service 625 South Second Street Springfield, IL 62704	325.00			325.00
--Nature of Debt (Purpose): Word Processing Software and Database Management for Fieldoffice				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	38,674.81
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
(PRE-ELECTION DEBT)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Hatcher,Coaxum,Hewitt,Grimes The 820 Building, Suite 600 820 West Superior Avenue Cleveland, OH 44113-1800	23,076.30	-0-	-0-	23,076.30
--Nature of Debt (Purpose): F.E.C. Legal Fees and Consultation				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Hopewell & Company Three First National Plz. Chicago, IL 60602	1,793.00			1,793.00
--Nature of Debt (Purpose): Reimbursement for software (election machine)				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Jim Lane 99 Park Avenue New York, NY 10016	6,437.08			6,437.08
--Nature of Debt (Purpose): Consulting Fee for Interval and Subsistence Reimbursement.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Juju Lien 201 N. Wells Street Chicago, IL 60606	901.96			901.96
--Nature of Debt (Purpose): Subsistence and Travel Expenses				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mail Boxes, Etc. USA 60 E. Chestnut Street Chicago, IL 60611	631.50			631.50
--Nature of Debt (Purpose): Direct Mail Processing Fees				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Harkar Productions 858 West Armitage Avenue Chicago, IL 60614	4,000.00			4,000.00
--Nature of Debt (Purpose): Campaign Materials (Signage).				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	36,839.84
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
(PRE--ELECTION DEBT)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank --Nature of Debt (Purpose):--				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor North Shore Banquents 2519 West Devon Chicago, IL 60659 --Nature of Debt (Purpose):-- Fundraising Fees for Catering.	1,313.85			1,313.85
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Plaza One Hotel 3rd Avenue @ 17th Street Rock Island, IL 61201 --Nature of Debt (Purpose):-- Fundraising Banquent Expense.	1,178.38			1,178.38
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pratt Jones Tobin & Hylla, Professional Corp.,Route 1 P.O.Box 179 East Alton, IL 62024 --Nature of Debt (Purpose):-- Staff Travel (Air)	5,147.50			5,147.50
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Progress Printing 3324 S. Halsted Chicago, IL 60608 --Nature of Debt (Purpose):-- Campaign Meterials (Printing Lit.).	2,000.00			2,000.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Radisson Hotel Lincolnwood 4500 Touhy Lincolnwood, IL 60646 --Nature of Debt (Purpose):-- Fundraising Expense.	1,284.23	2,000.00	3,284.23	-0-

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	9,639.73
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

SCHEDULE B
(Revised 3/80)

DEBTS AND OBLIGATIONS

(PRE--ELECTION DEBT)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank				
--Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor St. Nicholas 400 East Jefferson Springfield, IL 62701	2,873.66			2,873.66
--Nature of Debt (Purpose): Fundraising Banquent Expense.				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Standing Room Only 322 West Armitage Chicago, IL 60614	1,716.02			1,716.02
--Nature of Debt (Purpose): Fundraising Banquent Expense.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Steve Cobble 201 N. Wells Street Chicago, IL 60606	3,046.00			3,046.00
--Nature of Debt (Purpose): Travel (Subsistence)				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Citizen Newspaper Group 412 East 87th Street Chicago, IL 60619	1,642.32			1,642.32
--Nature of Debt (Purpose): Media Communications.				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Grill On Fulton 456 Fulton Peoria, IL 61602	1,050.00			1,050.00
--Nature of Debt (Purpose): Fundraising Expense (Banquent)				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	10,328.00
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
(RRE -ELECTION DEBT)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Lakin Law Firm Professional Corp.,P.O.Box 27 251 Old St.Louis Road Wood River, IL 62095-0027	8,868.00			8,868.00
--Nature of Debt (Purpose): Staff Travel (Air)				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Tynan Marketing, Inc. 101 West Grand Ave, Ste.5 Chicago, IL 60610	4,353.29			4,353.29
--Nature of Debt (Purpose): Campaign Materials (Stickers).				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Washington, Pittman & Mckeever CPAs 819 South Wabash Avenue Suite 600, IL 60605	9,000.00			9,000.00
--Nature of Debt (Purpose): Professional Services (Legal).				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:Austin & Sheinkopf 7700 River Edge Drive Columbus, OH 43245	0.00			0.00
--Nature of Debt (Purpose): Disputed claim under terminated contract. Vendor has not documented claim amount.				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:Bonsai Engineering 117 West Harrison Street Chicago, IL 60605	13,166.91			13,166.91
--Nature of Debt (Purpose): Computer Servicing,Programing,Consulting and Maintenance.See "NOTE 4" following.				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:JEDCO,Inc. 2313 Hoffman Drive Effingham, IL 62401	0.00			0.00
--Nature of Debt (Purpose): Campaign Signage--Paid by state party.				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	35,388.20
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)	

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank				
--Nature of Debt (Purpose): Office				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank				
--Nature of Debt (Purpose): --				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:MCI Telecommunicati P.O.Box 777-w6390 Philadelphia, PA 19175	32,301.64 3,301.64	-0-	3,000	29,301.64
--Nature of Debt (Purpose): Broadcast Service Fees.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:Sheads and Associat 190 Smallwood Village Ct Waldorf, MD 20602	11,247.13			11,247.13
--Nature of Debt (Purpose): Processing Fee (Direct Mailing Program). SEE "NOTE 2" following.				

1) SUBTOTALS This Period This Page (optional)	40,548.77
2) TOTAL This Period (last page 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)	

Pre-Election TOTAL ALL PAGES: 203,741.82

SCHEDULE D
(Revised 3/88)

DEBTS AND OBLIGATIONS
(Post-Election Debt)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Podesta & Associates 1001 G Street NW Washington, DC 20001		10,000.00		10,000.00
Nature of Debt (Purpose): Media and Press Communication Services				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Axelrad & Associates Suite 404 730 N. Franklin Street Chicago, IL 60610				
Nature of Debt (Purpose): Media Consulting Offset of amount owed to Committee. Final accounting in progress.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Campaign Finance Consultants 422 C Street Washington, DC 20002	9,242.54		9,242.54	-0-
Nature of Debt (Purpose): Fundraising Fee and Expenses.				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Coxum & Hewitt 820 W. Superior Street Cleveland, OH 44118	46,591.78		10,000	36,591.78
Nature of Debt (Purpose): Professional Services (Legal).				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Contribution Refunds	29,137.48	31,800.70	33,500.70	26,893.98
Nature of Debt (Purpose): Contribution Refunds.See pages 1-45 Schedule D "Refunds."				

1) SUBTOTALS This Period This Page (optional)	73,485.76
2) TOTAL This Period (last page 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 B
(Revised 3/88)

DEBTS AND OBLIGATIONS
(POST-ELECTION DEBT)

Name of Committee (in full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Crystal Courier Services,Inc. P.O.Box 66 Deerfield, IL 60015 Nature of Debt (Purpose): Delivery Services				265.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Earl Hopewell, Treasurer 201 N. Wells Chicago, IL 60606 Nature of Debt (Purpose): Consulting Fee For Periods.	128,507.46	42,389.19	42,389.19	128,507.46
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor HQ Printers 200 North LaSalle Street cago, IL 60601 Nature of Debt (Purpose): Copying Services	218.62	-0-	-0-	218.62

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	128,726.08
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 — DEBTS AND OBLIGATIONS — Page 3 of 7 for
(Revised 3/80) (POST--ELECTION DEBT) LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Jane Scott Brown 4306 Westover Place,N.W. Washington, DC 20016 Nature of ~~Debt~~ (Purpose): Fundraising Fee and Expenses	-0-	54,708.06	13,000.00 41,708.06	
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Oldaker,Ryan & Leonard 818 Connecticut N.W. Washington, DC 20006 Nature of Debt (Purpose): Professional Services (Legal).	55,999.81		5,000	50,999.81
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pitney Bowes 225 West Washington Chicago, IL 60606 Nature of Debt (Purpose): Equipment Leasing and cancellation adjustment.	2,129.30			2,129.30
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Stephanie Holtz 7137 S.Darlington Tulsa, OK 74136 Nature of Debt (Purpose): Reimbursement of Moving Expenses	577.88			577.88

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	66,706.99
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 B
(Revised 3/80)

DEBTS AND OBLIGATIONS
(POST-ELECTION DEBT)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank --Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Tom Serafin & Associates 650 N. Dearborn Chicago, IL 60610 --Nature of Debt (Purpose): Consulting Fee.	2,873.66			2,873.66
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank --Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank --Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Wildman,Harrold,Allen & Dixon 225 West Wacker Drive Chicago, IL 60606-1229 --Nature of Debt (Purpose): Professional Services (Legal).	23,315.32		10,000.00	13,315.32
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Beverly Prather 201 N. Wells Chicago, IL 60606 --Nature of Debt (Purpose): Bonus-Consulting Fee	1,000.00			1,000.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	17,188.98
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 3/88)

DEBTS AND OBLIGATIONS

(POST--ELECTION DEBT)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Carolyn Bay 201 N. Wells Chicago, IL 60606	1,600.00			1,600.00
Nature of Debt (Purpose): Bonus-Consulting Fee				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-David Eichenbaum 201 N. Wells Chicago, IL 60606	2,000.00			2,000.00
Nature of Debt (Purpose): Bonus-Consulting Fee				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Heather Booth 201 N. Wells Chicago, IL 60606	4,355.45			4,355.45
Nature of Debt (Purpose): Bonus-Consulting Fee and Travel Expenses				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Janice Bell 201 N. Wells Chicago, IL 60606	1,600.00			1,600.00
Nature of Debt (Purpose): Bonus-Consulting Fee				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blank				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTAL This Period (last page this line only)				9,55[illegible].45
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 3/88)

DEBTS AND OBLIGATIONS
(POST-ELECTIONDEBT)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Larry Shapiro 201 N. Wells Chicago, IL 60606	2,000.00			2,000.00
Nature of Debt (Purpose): Bonus-Consulting Fee				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Ralph Goodpasteur 201 N. Wells Chicago, Il 60606	1,200.00			1,200.00
Nature of Debt (Purpose): Consulting Fee For Interval				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Sharon Cusick 18040 Soleri Drive Country Club, Il 60478	870.56			870.56
Nature of Debt (Purpose): Consulting Fee & Office Supplies Reimbursement				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Steve Cobble 201 N. Wells Chicago, IL 60606	2,500.00			2,500.00
Nature of Debt (Purpose): Bonus-Consulting Fee				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor X.Staff-Velma Wilson 201 N. Wells Chicago, IL 60606	2,000.00			2,000.00
Nature of Debt (Purpose): Bonus-Consulting Fee				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:Bonsia Engineering 117 W.Harrison Street Chicago, IL 60605	0.00			0.00
Nature of Debt (Purpose): Computer Servicing,Programing,Consulting.See "NOTE 4" following.				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	8,070.56
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)	

DEBTS AND OBLIGATIONS
(Post-Election Debt)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:D. Norman & Assoc. 332 South Michigan Chicago, Il 60604	8,099.00	-0-		8,099.00
Nature of Debt (Purpose): Dispute over inclusion of fees. Committee has fully paid.See "NOTE *" following.				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:KEF Media Assoc. 213 W. Institute, Ste.405 Chicago, IL 60610	1,540.00			1,540.00
Nature of Debt (Purpose): Press Conference Cancellation Fee.S				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Z.Disputed:Kezio Properties 201 N. Wells Chicago, IL 60606	39,680.00	11,400	11,400	39,680.00
Nature of Debt (Purpose): Office Lease-Post Election Terms Not Final.See "NOTE * following.				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor ZZ.Loan From Candidate See Schedule C 201 N. Wells Chicago, IL 60606	6,029.53			6,029.53
Nature of Debt (Purpose): Loan From Candidate Per Schedule C.				

1) SUBTOTALS This Period This Page (optional) .....
2) TOTAL This Period (last page this line only) 55,348.53
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) .....

Post-Electi TOTAL ALL PAGES: 359,582.35

SCHEDULE D

(Revised 3/88)

DEBTS AND OBLIGATIONS

Page 1 of ___ for LINE NUMBER 10

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor 181 W. 79th Street 181 W. 79th St. Chicago, IL 60628 Nature of Debt (Purpose): Contribution Refund	150.00			150.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor 282 Beacon St. Account 282 Beacon St. Boston, MA 02115 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor 51st Street Building Account 365 East 51st St. Chicago, IL 60615 Nature of Debt (Purpose): Contribution Refund	35.00			35.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor 5325 South Hyde Park Building 5325 South Hyde Park Chicago, IL 60615 Nature of Debt (Purpose): Contribution Refund	150.00			150.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor 760 Associates 36 Lansing Road West Newton, MA 02165 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor 901 & 905 Laflin St. Acct. C/O Mid-City National Bank Chicago, IL 60607 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
1) SUBTOTALS This Period This Page (optional)				635.00
2) TOTAL This Period (last page 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

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor A & B Machinery, Inc. 4551 W. Fulton St. Chicago, IL 60624	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor A & G Exterminating & Janitori 3827 West Harrison Street Chicago, IL 60624	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor A & I Trust 1521 Ohio Ave. Modesto, CA 95351	30.00			30.00
--Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor A.F. of M. Tempo, P.C.C. 1501 Broadway New York, NY 10036	300.00			300.00
--Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Aleksander Jakobowski MD. S.C. 523 W. Galena Blvd. Aurora, IL 60506	35.00			35.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Aleksander Jakobowski MD. S.C. 523 W. Galena Blvd. Aurora, IL 60506	105.00			105.00
--Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	670.00
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 — DEBTS AND OBLIGATIONS — Page 3 of _ for LINE NUMBER 16
(Revised 3/80)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Alida R. Messinger Acct. #2 C/O Chase Manhattan Bank Rockfeller Plaza @ 49th New York, NY 10020	1,000.00			1,000.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Alixandra Feinberg & Assoc. 1430 William St. River Forest, IL 60305	100.00			100.00
--Nature of Debt (Purpose): Excess Contribution				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Alpha Eta Chapter 5312 S. Cornell Chicago, IL 60615	50.00			50.00
--Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Antonia Brumbach (Grumbach) 320 Central Park West New York, NY 10025	293.50	169.30	462.80	-0-
--Nature of Debt (Purpose): Excess Contribution				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	1,150.00
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)	

96020054

SCHEDULE D
(Revised 3/88)

DEBTS AND OBLIGATIONS

Page 4 of _ for
LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor B.J. Bauer Bldg. Account 2004 W. Addison Chicago, IL 60618 --Nature of Debt (Purpose): Contribution Refund	75.00			75.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bank Associates 8600 Catalpa Ave. Chicago, IL 60656 --Nature of Debt (Purpose): Contribution Refund	250.00			250.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Barbara T. Curtis Antiques 5900 S. Grant St. Hinsdale, IL 60521 --Nature of Debt (Purpose): Contribution Refund	50.00			50.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Barney's Meat Market 1648 E. 55th St. Chicago, IL 60615 --Nature of Debt (Purpose): Contribution Refund	50.00			50.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	425.00
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

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Barry T. McNamara	100.00			100.00
--Nature of Debt (Purpose): Excess Contribution				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bedford Stuyvesant Early 275 Marcus Garvey Blvd. Brooklyn, NY 11221	70.00			70.00
--Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Benassi and Benassi, P.C. Ste. 1112 First Ntl Bank Peoria, IL 61602	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bernard A. Shindler, D.C.	350.00			350.00
--Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Betty B. Hall, SC 18A Old Milford Rd. Brookline, NH 03033	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	720.00
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 B
(Revised 3/89)

DEBTS AND OBLIGATIONS

Page 6 of ___ -or
LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Big Red G Quickprint Center 1806 Lake St. Melrose Park, IL 60160	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Big Rock Account 20781 Big Rock Drive Malibu, CA 90265	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Blacks in Politics C/O Old Second Natl. Bank 37 South River St. Aurora, IL 60507	40.00			40.00
--Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bonnie Bernstein-Baum 319 Wesley Ave. Evanston, IL 60202	450.00			450.00
--Nature of Debt (Purpose): Excess Contribution				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Boyden 180 N. Stetson Chicago, IL 60601	75.00			75.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	765.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (Last Page only)	

96020517

SCHEDULE B
(Revised 3/80)

DEBTS AND OBLIGATIONS

Name of Committee (in Full)

Carol Moseley-Braun for U.S. Senate C00256610

Full Name, Mailing Address and Zip Code of Debtor or Creditor	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose): Excess Contribution				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bruce Stein 201 E. 63rd St. New York, NY 10028 --Nature of Debt (Purpose): Excess Contribution	100.00			100.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor BZB International 9911 Old Fort Rd. Ft. Washington, MD 20744 --Nature of Debt (Purpose): Contribution Refund	25.00			25.00

1) SUBTOTALS This Period This Page (optional) ....

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 125.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only) ....

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SCHEDULE B
(Revised 3/88)

DEBTS AND OBLIGATIONS

Page 8 of ___ for
LINE NUMBER 19

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor C.S.T. - L.A.T. Special Acct. 63-65 East 79th St. Chicago, IL 60619 Nature of Debt (Purpose): Contribution Refund	50.00			50.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Carroll College Helena, MT 59625 Nature of Debt (Purpose): Contribution Refund	10.00			10.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Century 21 Vetta Brome, Inc. 9805 Astoria Blvd. East Elmhurst, NY 11369 Nature of Debt (Purpose): Contribution Refund	35.00			35.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	95.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

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SCHEDULE B
(Revised 3/80)

DEBTS AND OBLIGATIONS

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Chang-Bok-Lee, M.D. 30 N. Michigan Ave. Chicago, IL 60602	40.00			40.00
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Chesterfield Design, Inc. 12614 S. Harlem Ave. Palos Heights, IL 60463	20.00			20.00
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor CHGO. Vietnam Vet. & Fam Asst. 1966 E. 73rd St. Chicago, IL 60649	50.00			50.00
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Chiropractic Health Services 17131 S. Harlem Ave. Tinley Park, IL 60477	100.00			100.00
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Christina M. Tchen 5444 N. Magnolia Ave. Chicago, IL 60640	100.00			100.00
Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	310.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

96020220

SCHEDULE B
(Revised 3/80)

DEBTS AND OBLIGATIONS

Page 10 of ___ for
LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Citizens For Fourteen 1127 Adams N. Chicago, IL 60064	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Clay's Steel Furniture P.O. Box 304 Aurora, IL 60507	70.00			70.00
--Nature of Debt (Purpose): Excess Contribution				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Cornfield & Feldman 343 S. Dearborn Chicago, IL 60604	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor CWAMS 1516 Harding St. Rockford, IL 61110	70.00			70.00
--Nature of Debt (Purpose): Excess Contribution				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	340.00
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)	

96020050221

SCHEDULE B
(Revised 3/88)

DEBTS AND OBLIGATIONS

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Daniel Sawyer 423 West Red Bridge Rd. Kansas City, MO 64114 --Nature of Debt (Purpose): Excess Contribution	100.00			100.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Dawn Steel, Charles Roven 10866 Wilshire Blvd. Los Angeles, CA 90024 --Nature of Debt (Purpose): Contribution Refund	1,000.00			1,000.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Delta Sigma Theta Sorority P.O. Box 6712 East Lansing, MI 48826 --Nature of Debt (Purpose): Contribution Refund	5.00			5.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	1,105.00
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)	

9 9 0 2 2 2 2 5 0 0 2 2

SCHEDULE D (Revised 3/80)

DEBTS AND OBLIGATIONS

Page 12 of ___ for LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Delta Sigma Theta Sorority C/O Dominion Bank Roanoke, VA 24040 --Nature of Debt (Purpose): Contribution Refund	100.00			100.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Development Resources Inc. 439 North Wells St. Chicago, IL 60610 --Nature of Debt (Purpose): Contribution Refund	150.00			150.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor E. H. O'Daniel R14 West Carmi, IL 62821 --Nature of Debt (Purpose): Contribution Refund	200.00			200.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	450.00
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)	

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SCHEDULE D — DEBTS AND OBLIGATIONS — Page 13 of ___ for LINE NUMBER 10

(Revised 3/80)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Elizabeth City Alumnae Chapter Delta Sigma Theta, Inc. Elizabeth City, NC 27909	25.00			25.00
--Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Emmanuel A. Afuwape, M.D., Ltd 2102 State St., Box 2677 E. St. Louis, IL 62205	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Eugenie Havemeyer 10 Gracie Square New York, NY 10028	68.50			68.50
--Nature of Debt (Purpose): Excess Contribution				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	193.50
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

Page 14 of __ for
LINE NUMBER 16

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Female Health Care Assoc., Ltd 1725 W. Harrison St. Chicago, IL 60612	200.00			200.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Fern P. Nelson, M.D. S.C. 1445 E. 54th St. Chicago, IL 60615	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Floyd Coard 6222 Wilshire Blvd. Los Angeles, CA 90048	1,000.00		1,000.00	-0-
--Nature of Debt (Purpose): Excess Contribution				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Fourth Presbyterian Church 126 East Chestnut St. Chicago, IL 60611	50.00			50.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Frederick D. Harris 5 Severance Circle Cleveland Hts., OH 44118	500.00			500.00
--Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	850.00
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

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor George E. Johnson 8522 S. Lafayette Chicago, IL 60620 Nature of Debt (Purpose): Excess Contribution	1,000.00			1,000.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor George Jones 423 E. 60th St. Chicago, IL 60637 Nature of Debt (Purpose): Excess Contribution	700.00	(400.00)	300.00	-0-
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor George L. Walker D.D.S. P.C. 1623 E. 55th St. Chicago, IL 60615 Nature of Debt (Purpose): Contribution Refund	50.00			50.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Gorham United Methodist Church 5600 S. Indiana Ave. Chicago, IL 60615 Nature of Debt (Purpose): Contribution Refund	488.68			488.68
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Grace Mary Stern 291 Marshman St. Highland Park, IL 60035 Nature of Debt (Purpose): Contribution Refund	35.00			35.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Guerra Enterprises 300 N. State St. Chicago, IL 60610 Nature of Debt (Purpose): Contribution Refund	70.00			70.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page 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)	1643.68

SCHEDULE D — DEBTS AND OBLIGATIONS — Page 16 of ___ for LINE NUMBER 10

(Revised 3/80)

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Haggerty, Koenig & Hill 100 N. LaSalle St. Chicago, IL 60602	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Harold Cox 6 Main Street Carmi, IL 62821	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Healthcare Associates 2606 B East Dempster Des Plaines, IL 60016	75.00			75.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	275.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

SCHEDULE D — DEBTS AND OBLIGATIONS — Page 17 of for
(Revised 3/80) — LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Helen Brown ,	15.00			15.00
Nature of Debt (Purpose): Excess Contribution				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Heritage Club Foundation Inc. P.O. Box 4292 Wheaton, IL 60189	35.00			35.00
Nature of Debt (Purpose): Excess Contribution				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Isobel H. Neal 3240 N. Lake Shore Dr. Chicago, IL 60657	75.00			75.00
Nature of Debt (Purpose): Excess Contribution				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor J. Robert Horton P.C. C/O Chase Manhattan Bank 1 Chase Manhattan Plaza New York, NY 10081	300.00			300.00
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Jack T. Martin 1810 N. Delany Road Gurnee, IL 60031	35.00			35.00
Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	460.00
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

Page 8 of for
LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor James C. Arrington 2025 North Lincoln Ave. Chicago, IL 60614 Nature of Debt (Purpose): Contribution Refund	50.00			50.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Jerome S. Lanet Ltd. 600 S. Federal Chicago, IL 60605 Nature of Debt (Purpose): Contribution Refund	50.00			50.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	100.00
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 B (Revised 3/80) — DEBTS AND OBLIGATIONS — Page 19 of __ for LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Jo G Moore 1222 Chestnut Wilmette, IL 60091 --Nature of Debt (Purpose): Excess Contribution	125.00			125.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	125.00
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

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LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Joyce E. Moran 852 South Park Terrace Chicago, IL 60605	20.00			20.00
Nature of Debt (Purpose): Excess Contribution				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kamberos & Pappas, Ltd. Three 1st National Plaza Chicago, IL 60602	125.00			125.00
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kangaroo Connection 1113 W. Webster Ave. Chicago, IL 60614	15.00			15.00
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Karen Osborne 311 Bonita Ave. Piedmont, CA 94611	200.00			200.00
Nature of Debt (Purpose): Excess Contribution				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	360.00
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)	

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SCHEDULE B
(Revised 3/88)

DEBTS AND OBLIGATIONS

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LINE NUMBER 10

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kathleen Delaney 935 Park Ave. New York, NY 10028 Nature of Debt (Purpose): Excess Contribution	41.10			41.10
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kemise Herring, Ph.D. 122 S. Michigan Chicago, IL 60603 Nature of Debt (Purpose): Contribution Refund	17.00			17.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Khurana Mathew, M.D. 4455 S. Kedzie Chicago, IL 60632 Nature of Debt (Purpose): Contribution Refund	25.00			25.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor King Rhodes 8909 Forest Lane Dallas, TX 75243 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Knights Creek Nursery Route 5, Box 84A Menomonie, WI 54751 Nature of Debt (Purpose): Contribution Refund	50.00			50.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	233.10
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

SCHEDULE B
(Revised 3/80)

DEBTS AND OBLIGATIONS

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LINE NUMBER 10

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Knox Dental Center 1930 E. 95th St. Chicago, IL 60617	70.00			70.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kristen Johanson 415 W. 55th St. New York, NY 10019	13.70			13.70
--Nature of Debt (Purpose): Excess Contribution				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Kwik Kleen Car Wash 3149 Door Street Toledo, OH 43607	50.00			50.00
--Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor La Grande Trunk, Inc. 705 Calumet Avenue Valparaiso, IN 46383	15.00			15.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ladies Auxiliary of Crescent Funeral Directors & Embalmers Natl. Bank of Commerce New Orleans, LA	100.00			100.00
--Nature of Debt (Purpose): Excess Contribution				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	248.70
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

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SCHEDULE B
(Revised 3/88)

DEBTS AND OBLIGATIONS

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LINE NUMBER 10

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Lake View Realty 2844 West Addison Chicago, IL 60618 Nature of Debt (Purpose): Contribution Refund	75.00			75.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Langston F. Reed, D.D.S. 3326 LaSalle New Orleans, LA 70115 Nature of Debt (Purpose): Excess Contribution	100.00			100.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor LaSalle National Trust P.O. Box 729 Chicago, IL 60690 Nature of Debt (Purpose): Excess Contribution	500.00			500.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Lawton Alumnae Chapter P.O. Box 2601 Lawton, OK 73502 Nature of Debt (Purpose): Contribution Refund	25.00			25.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Linda Pease 27 W. 181 Virginia Winfield, IL Nature of Debt (Purpose): Contribution Refund	50.00			50.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	750.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Linhem's of Oak Park 146 N. Oak Park Ave. Oak Park, IL 60301	35.00			35.00
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Local 253 Special 75 Varick Street New York, NY 10032	100.00			100.00
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Lola's Ltd. 750 N. Rush Chicago, IL 60611	100.00			100.00
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Loretto Motherhoose Convent C/O Farmers National Bank Lebanon, KY 40033	5.00			5.00
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Los Alamos Sales Company P.O. Box 795 Los Alamos, NM 87544	20.00			20.00
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mabel D. Haden, P.C. 3711 Macomb St. Washington, DC 20016	100.00			100.00
Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	360.00
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 B
(Revised 3/80)

DEBTS AND OBLIGATIONS

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LINE NUMBER 11

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mack E. McCain, M.D., P.C. P.O. Box 8357 St. Louis, MO 63132 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page 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)	100.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS

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LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Marilyn Miglin, Inc. 112 East Oak St. Chicago, IL 60611	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Harjorie Lindblum 507 Cedar St. Winnetka, IL 60093	75.00			75.00
--Nature of Debt (Purpose): Excess Contribution				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Marshall J. Moltz P.C. 77 West Washington St. Chicago, IL 60602	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	275.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS

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LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Martin & Shadid 2207A Broadway Pekin, IL 61554 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mary A. Froelich 19 Meadowood Lane Northfield, IL 60093 Nature of Debt (Purpose): Contribution Refund	250.00		250.00	-0-
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Milledge A. Hart III 1600 Two Turtle Creek Dallas, TX 75219 Nature of Debt (Purpose): Contribution Refund	2,000.00			2,000.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	2,100.00
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

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Milton Furgatch 5325 Hyde Park Blvd. Chicago, IL 60615 Nature of Debt (Purpose): Excess Contribution	50.00			50.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Mixed Company 956 Apparel Center Chicago, IL 60654 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Moore Creative Marketing 173 Hicks St. Brooklyn Hts., NY 11201 Nature of Debt (Purpose): Contribution Refund	35.00			35.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	185.00
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

Name of Committee (in Full)

Carol Moseley-Braun for U.S. Senate C00256610

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nam Kim [illegible] [illegible], IL Nature of Debt (Purpose):	50.00			50.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Naomi Leff & Assoc. 12 West 27 Street New York, NY 10001 Nature of Debt (Purpose): Contribution Refund	50.00			50.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor National Technologies 5415 N. Sheridan Rd. Chicago, IL 60640 Nature of Debt (Purpose): [illegible]	70.00			70.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor National Technologies, Ltd. 5415 N. Sheridan Rd. Chicago, IL 60640 Nature of Debt (Purpose): Contribution Refund	75.00			75.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	245 00
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

Page 30 of for
LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor New Valley Community Org. 2249 W. Roosevelt Rd. Chicago, IL 60612 --Nature of Debt (Purpose): Contribution Refund	100.00			100.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nyambi Ebie, Ltd. 2811-A S. Michigan Ave. Chicago, IL 60616 --Nature of Debt (Purpose): Contribution Refund	200.00			200.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Olion Communications, Inc. 180 North La Salle Chicago, IL 60601 --Nature of Debt (Purpose): Contribution Refund	150.00			150.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Olson Studio 1955 W. Horse Ave. Chicago, IL 60626 --Nature of Debt (Purpose): Contribution Refund	10.00			10.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Omni Credit Services, Inc. 333 Bishops Way Brookfield, WI 53005 --Nature of Debt (Purpose): Contribution Refund	150.00			150.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page 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)	610.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Paul Lehman 1126 S. Michigan Ave. Chicago, IL 60202	100.00			100.00
--Nature of Debt (Purpose): Excess Contribution				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pen & Ink Publications, Ltd. 307 S. Milwaukee Ave. Wheeling, IL 60090	10.00			10.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Peoria Fire Fighters C/O First of America Bank Peoria, IL 61631	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional) ....
2) TOTAL This Period (last page this line only) ....
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 210.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only) ....

9 3 0 0 5 0 2 4 2

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS

Page 32 of for
LINE NUMBER 16

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor PGB Ltd. 807 Brae Burn Line Rockford, IL 61107	50.00			50.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Phoenix Talent Ltd. 332 South Michigan Ave. Chicago, IL 60604	50.00			50.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Pierson & Arch. P.C. 1228 - 17th St., N.W. Washington, DC 20036	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	200.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS

Name of Committee (in Full)

Carol Moseley-Braun for U.S. Senate C00256610

Full Name, Mailing Address and Zip Code of Debtor or Creditor	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Plumbers and Pipe Fitter 1228 - 3rd Ave. Rock Island, IL 61201 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
B. Plumbing Council of Chgo Land 1400 W. Washington St. Chicago, IL 60607 Nature of Debt (Purpose): Contribution Refund	150.00			150.00
C. Nature of Debt (Purpose):				
D. Quality Croutons, Inc. 825 W. 37th Place Chicago, IL 60609 Nature of Debt (Purpose): Contribution Refund	125.00			125.00
E. Queen City Cleaners 8214 S. King Dr. Chicago, IL 60619 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
F. R. H. Frank C/O First Chicago Bank Chicago, IL 60670 Nature of Debt (Purpose): Contribution Refund	1,000.00			1,000.00

1) SUBTOTALS This Period This Page (optional)
2) TOTAL This Period (last page 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) 1,475.00

SCHEDULE B — DEBTS AND OBLIGATIONS — Page 34 of for
(Revised 3/80) — LINE NUMBER 16

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Rafah Shabazz C/O The First National Bank Monterey-Winamac Monterey, IN 46960	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Range Funeral Home, Ltd. 202 S. Eastern Ave. Joliet, IL 60433	30.00			30.00
--Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Red's New Generation Inc. 6926 S. Stony Island Chicago, IL 60649	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Resource Associates Int. 6 North Michigan Chicago, IL 60602	50.00			50.00
--Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Richard Price 684 Broadway New York, NY 10012	1,000.00			1,000.00
--Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Rita O. Pucci, M.D., S.C. 2266 N. Lincoln Chicago, IL 60614	100.00			100.00
--Nature of Debt (Purpose): Contribution Refund				
1) SUBTOTALS This Period This Page (optional)				
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				1,380.00
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

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Robert D. Richardson, P.C. 215 N. Jefferson Davis New Orleans, LA 70119 --Nature of Debt (Purpose): Contribution Refund	250.00			250.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	250.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

9 6 0 2 0 0 5 0 2 4 6

SCHEDULE B
(Revised 3/80)

DEBTS AND OBLIGATIONS

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ruth Barwick Marital Trust 550 Frontage Rd. Northfield, IL 60093 --Nature of Debt (Purpose): Contribution Refund	300.00			300.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sandra K. Burns, Ltd. 348 Lathrop Avenue River Forest, IL 60305 --Nature of Debt (Purpose): Contribution Refund	100.00			100.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor So. Sub. Assoc. For Education C/O Pathway Financial Matteson, IL 60443 --Nature of Debt (Purpose): Contribution Refund	5.00			5.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Solomon Foley State Farm Insurance Co. 125 Phelps Ave. Rockford, IL 61125 --Nature of Debt (Purpose): Contribution Refund	50.00			50.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	455.00
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 B
(Revised 3/88)

DEBTS AND OBLIGATIONS

LINE NUMBER 10

Name of Committee (In Full)

Carol Moseley-Braun for U.S. Senate C00256610

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Stan Howard Jr. 2190 S. Wolf Rd. DesPlaines, IL 60018 Nature of Debt (Purpose): Contribution Refund	1,000.00			1,000.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Steve Gilford 2728 Harrison St. Evanston, IL 60201 Nature of Debt (Purpose): Excess Contribution	200.00			200.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Susan Getzendanner 1410 N. LaSalle Chicago, IL 60610 Nature of Debt (Purpose): Excess Contribution	250.00			250.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING ~~LOANS from Schedule C~~ (last page only)	1,450.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

SCHEDULE B
(Revised 3/88)

DEBTS AND OBLIGATIONS

LINE NUMBER 10

Name of Committee (in Full)

Carol Moseley-Braun for U.S. Senate C00256610

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor T. Warren Investments P.O. Box 9269 Woodlands, TX 77387 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Tele/Graphic Communications 7 East 14th St. New York, NY 10003 Nature of Debt (Purpose): Contribution Refund	200.00			200.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Tempo 802 330 W. 42nd St. New York, NY 10036 Nature of Debt (Purpose): Contribution Refund	50.00			50.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Terrence E. Leonard 36 W. Randolph St. Chicago, IL 60601 Nature of Debt (Purpose): Contribution Refund	100.00			100.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	450.00
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

Page 40 of ·or
LINE NUMBER 10

Name of Committee (In Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Foster Group, Inc. 122 S. Michigan Chicago, IL 60603 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Miya 410 - 8th St. N.W. Washington, DC 20004 Nature of Debt (Purpose): Contribution Refund	15.00			15.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Nurse Anesthesia Refresher 2055 Catalina Lane Springfield, IL 62702 Nature of Debt (Purpose): Contribution Refund	50.00			50.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Second Baptist Church 436 S. 13th Ave. Maywood, IL 60153 Nature of Debt (Purpose): Contribution Refund	200.00			200.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor The Vital Force Newspaper P.O. Box 7784 Rockford, IL 61126 Nature of Debt (Purpose): Contribution Refund	100.00			100.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	465.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last Page only)	

SCHEDULE B
(Revised 3/80)

DEBTS AND OBLIGATIONS

Page 41 of for
LINE NUMBER 10

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Carol Moseley-Braun for U.S. Senate C00256610				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Tomoser Mgmt. Co.				
--Nature of Debt (Purpose): Contribution Refund	25.00			25.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
--Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor U.S. Treasury				
--Nature of Debt (Purpose): Contribution Refund	50.00			50.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor U.S. Treasury C/O Riverdale Bank 13700 S. Indiana Riverdale, IL 60627				
--Nature of Debt (Purpose): Contribution Refund	1,000.00			1,000.00
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor U.S. Treasury for Check # 1861 P.O. Box 8250 Belleville, IL 62222				
--Nature of Debt (Purpose): Contribution Refund	1,000.00			1,000.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	2,875.00
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

LINE NUMBER 10

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Veritas Therapeutic Comm. 68 West 106th St. New York, NY 10025 --Nature of Debt (Purpose): Contribution Refund	35.00			35.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Wagner Office Systems 2800-2 South 6th St. Springfield, IL 62703 --Nature of Debt (Purpose): Contribution Refund	50.00			50.00
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor --Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor WHB Hair Care Products P.O. Box 12483 Chicago, IL 60612 --Nature of Debt (Purpose): Contribution Refund	25.00			25.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	110.00
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 — Page 43 of for — LINE NUMBER 16

Name of Committee (in Full) Carol Moseley-Braun for U.S. Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Women & Children First 5253 N. Clark St. Chicago, IL 60640 --Nature of Debt (Purpose): Contribution Refund	30.00			30.00
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Women & Children First 5233 N. Clark St. Chicago, IL 60640 --Nature of Debt (Purpose): Contribution Refund	40.00			40.00
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Women & Children First 5233 N. Clark St. Chicago, IL 60640 --Nature of Debt (Purpose): Contribution Refund	150.00			150.00
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Women's Group 5210 Fannin Houston, TX 77004 --Nature of Debt (Purpose): Excess Contribution	50.00			50.00

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	270.00
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)	

TOTAL ALL PAGES:

SCHEDULE D (Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full): Carol Moseley Braun For U.S.Senate C00256610

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Elinor A. Seevak 56 Duffield Drive South Orange, NJ 070709	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Marianne C. Spraggins 444 Central Park West New York, NY 10025	0	700.00	700.00	0
Nature of Debt (Purpose): CONTRIBUTION REFUND				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Prentiss Taylor 1660 N.LaSalle Street Chicago, IL 60614	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Vicky Joseph 365 S. Hudson Avenue Los Angeles, CA 90020	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor George Joseph 4484 Wilshire Boulevard Los Angeles, CA 90010	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor George Jones 423 E. 60th Street Chicago, IL 60637	0	300.00	300.00	0
Nature of Debt (Purpose): Contribution Refund				
TOTALS This Period This Page (optional)				0
ALS This Period (last page in this line only)				
AL OUTSTANDING LOANS from Schedule C (last page only)				
2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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SCHEDULE D (Revised 3/90)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 45 of ___ for LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (in Full) Carol Moseley Braun For U.S.Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor George Palivos 505 North Lake Shore Drive Chicago, IL 60611	0	200.00	200.00	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Robert Stein 4111 Argyie Terrance Washington, DC 20011	0	812.50	812.50	0
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Antonia Grumbach 320 Central Park West New York, NY 10025	0	462.80	462.80	0
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Marvin I. Herman 1413 Tower Road Winnetka, IL 60093	0	250.00	250.00	0
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Louis Kanda 8601 Split Oak Circle Bethesda, MD 20817	0	250.00	250.00	0
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Marcy Twardak 7244 W. Pratt Chicago, IL 60631	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	0
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)	

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)
Carol Moseley Braun
For U.S. Senate C00256610

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Maryann Bader 2475 Richard Court Mountainview, CA 94003-	0	189.75	189.75	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cynthia Harris Box 95 Lenny's Lane Hampton, CT 06427	0	287.00	287.00	0
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Sidney Port 1040 N.Lakeshore Drive, Unit 21A Chicago, IL 60611	0	700.00	700.00	0
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Lawrence Suffredin 2431 Pioneer Road Evanston, IL 60201	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Marjorie Susman 1325 North Astor Street Chicago, IL 60610	0	750.00	750.00	0
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Marilyn Teeters 566 North Lincoln Hinsdale, IL 60521	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
1) SUBTOTALS This Period This Page (optional)				0
TOTALS This Period (last page in this line only)				
TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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SCHEDULE D (Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 47 of 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
Carol Moseley Braun For U.S.Senate C00256610				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Yoko Vehara 5026 Little Walnut Road, Apt A Silver City, NM 88061	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Edgar Vilchur P.O.Box 306 Woodstock, NY 12498	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Rosemary Vilchur P.O.Box 306 Woodstock, NY 12498	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Marc Weiss 684 Broadway, Apt 6E New York, NY 10012	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Mary Ann Stein 4111 Argyle Terrace NW Washington, DC 20043	0	848.65	848.65	0
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Frank Pearl 1627 Eye Street, N.W. Washington, DC 20006	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	0
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)	

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 48 of for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (in Full)
Carol Moseley Braun
For U.S.Senate C00256610

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Cezar Froelich 711 Oak Street Winnetka, IL 60093	0	250.00	250.00	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Micheal Segal 100 E. Bellevue Place Chicago,IL 60611	0	2,000.00	2,000.00	0
Nature of Debt (Purpose): Contribution Refund.				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Joan Palevsky 623 S. Beverly Gleen Los Angeles, CA 90024	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund.				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Claybon Jones 9915 South Calumet Chicago, IL 60628	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor J. Weldon Granger P.O. Box 4340 Houston, TX 77210	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Celia Gilbert 15 Gray Gardens West Chicago, IL 60657	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
SUBTOTALS This Period This Page (optional)				
TOTALS This Period (last page in this line only)				0
TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

FEC 459

SCHEDULE D (Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 49 of ___ for LINE NUMBER 16
(Use separate schedules for each numbered line)

Name of Committee (in Full) Carol Moseley Braun For U.S.Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Floyd Coard 6222 Wilshire Blvd. Los Angeles	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor W.Don Cornwell 9 Garden Place Brooklyn Heights, NY11201	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Jane Dixon 2100 Sierra Sage Lane Reno, NV 89505	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Robert J. Bingle 634 S. Washington Hinsdale, IL 60521	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Martina Ardiff 238 Conant Street Denvers, MA 01923	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Percy Sutton 10 W. 135th Street New York, NY 10037	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
1) SUBTOTALS This Period This Page (optional)				0
TOTALS This Period (last page in this line only)				
TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

FEC 459

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 50 of ___ for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (in Full) Carol Moseley Braun For U.S.Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Penny Pritzker & Bryan Trabert Fund 200 W. Madison Chicago, IL 60606	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Nicholas S. Gouletas 505 N. Lakeshore Drive Chicago, IL 60611	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Jacqueline Avant 1140 Maytor Place Beverly Hills, CA 90210	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Clarence Avant 1140 Maytor Place Beverly Hills, CA 90210	0	1,500.00	1,500.00	0
Nature of Debt (Purpose): Contribution Refund				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Robert L. Johnson 2915 Audubon Terrace NW Washington, DC 20008	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Corrine C. Boggs 623 Bourgon Street New Orleans, LA 70130	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				

1) SUBTOTALS This Period This Page (optional)	
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)	

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SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 51 of ___ for LINE NUMBER 15
(Use separate schedules for each numbered line)

Name of Committee (in Full) Carol Moseley Braun For U.S.Senate C00256610	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Kneeland Youngblood 16239 Amberwood Rd Dallas, TX 75248	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Goldman Sachs PAC 1101 Penn Ave.NW Washington, D.C. 20004	0	1,000.00	1,000.00	0
Nature of Debt (Purpose): Contribution Refund				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Citizens for Bernardini 55 W. Monroe Chicago, IL 60601	0	500.00	500.00	0
Nature of Debt (Purpose): Contribution Refund				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	0
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)	

FESA059

KELLY D. JOHNSTON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT
HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

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THE PRECEDING DOCUMENT WAS:

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Date of Receipt

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Date of Receipt

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Date of Receipt

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Postmarked

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____**POSTMARK ILLEGIBLE**

____**OTHER (Specify):**_____

_____
Postmark and/or Date of Receipt

RD — Feb 5, 1996
Preparer **Date Prepared**

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