

**SCHEDULE A (FEC Form 3 )**  
**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 / 73  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends for Baron Hill

Full Name (Last, First, Middle Initial) <b>A. Ronald C. McCallister</b>		Date of Receipt M / D / Y 10 / 05 / 2004
Mailing Address 8007 Emerald Green Way		Transaction ID: C10612
City Louisville	State KY	Zip Code 40291-5777
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Cheryl P. Melancon</b>		Date of Receipt M / D / Y 10 / 12 / 2004
Mailing Address 8950 East 82nd Street		Transaction ID: C10782
City Indianapolis	State IN	Zip Code 46256
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Hoosier Company	Occupation Information Requested	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Gerry L. Michl</b>		Date of Receipt M / D / Y 10 / 02 / 2004
Mailing Address 201 East Street		Transaction ID: C10642
City Madison	State IN	Zip Code 47250
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Registered Nurse	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary    X General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>300.00</b>
TOTAL This Period (last page this line number only) .....	