

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)
Natural Law Party of the United States of America

Full Name, Mailing Address and Zip Code Walter Pearce 4161 Kiehl Road Friday Harbor, WA 98250- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Contractor Aggregate Year-to-Date ->	Date (month, day, year) 05/12/99	Amount of Each Receipt this Period \$25.00
Full Name, Mailing Address and Zip Code Walter Pearce 4161 Kiehl Road Friday Harbor, WA 98250- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Occupation Contractor Aggregate Year-to-Date ->	Date (month, day, year) 06/14/99	Amount of Each Receipt this Period \$25.00
Full Name, Mailing Address and Zip Code Andrea G. Pflaumer 6 Summit Lane Berkeley, CA 94708- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Summit Medical Center Occupation Teacher Aggregate Year-to-Date ->	Date (month, day, year) 05/10/99	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Andrea G. Pflaumer 6 Summit Lane Berkeley, CA 94708- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Summit Medical Center Occupation Teacher Aggregate Year-to-Date ->	Date (month, day, year) 06/21/99	Amount of Each Receipt this Period \$120.00
Full Name, Mailing Address and Zip Code Michael W. Pflaumer 6 Summit Lane Berkeley, CA 94708- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Pacific Microsonics Inc. Occupation Engineer Aggregate Year-to-Date ->	Date (month, day, year) 05/17/99	Amount of Each Receipt this Period \$20000.00
Full Name, Mailing Address and Zip Code Barry Pitt 2122 Hill Street Ann Arbor, MI 48104- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mullays Occupation Retailer Aggregate Year-to-Date ->	Date (month, day, year) 05/27/99	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Lucile M. Portwood 1815 Hamilton Rd. Okemos, MI 48864-1812 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Aggregate Year-to-Date ->	Date (month, day, year) 03/10/99	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional) \$21920.00

TOTAL This Period (last page this line number only)