

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11(a) (1)

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NAME OF COMMITTEE (In Full)

A. Full Name, Mailing Address and Zip Code R. Peterson 1158 5th Avenue New York, NY 10029 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer St. Olaf College Occupation Professor Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 09-14-1999 Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Phyllis Pierce 530 Ashland Avenue Buffalo, NY 14222 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Self Occupation Healthcare Consultant Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 09-13-1999 Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Grover L. Porter 344 West 2nd, #101 San Bernardino, CA 92401- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 09-23-1999 Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Lucile Portwood PO Box 76 Okemos, MI 48805 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 09-13-1999 Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Sharon Pregerson 1150 Charm Acres Place Pacific Palisades, CA 90272- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 09-21-1999 Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Leslie Reid Price 611 Elm Avenue Swarthmore, PA 19081-1119 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 09-07-1999 Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Barbara Reagan 5455 W Sierra Dr. Apt. 1004 Dallas, TX 75231 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 09-14-1999 Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3250.00

TOTAL This Period (last page this line number only)