

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code DAVID R. GROVES 219 OXFORD, P.O. BOX 841 EAST LANSING, MI 48826		Name of Employer COMERICA INC.	Date (month, day, year) 01/14/98	Amount of Each Receipt this Period 284.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 284.00	
B. Full Name, Mailing Address and ZIP Code JAMES A. SUTTON 24 GARD AVENUE BROOKVILLE, NY 10708		Name of Employer COMERICA INC.	Date (month, day, year) 01/14/98	Amount of Each Receipt this Period 270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 270.00	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		Occupation	Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts This Page (optional)				554.00
TOTAL This Period (last page this line number only)				554.00