

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**

Karpan for Wyoming

COO316851

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN CLEVELAND PO BOX 7463 JACKSON WY 83002			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INFORMATION REQUESTED	10/03/96	
	Aggregate Year-to-Date > \$	250.00	250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
VICCI COLGAN 212 W. 7TH AVE. CHEYENNE WY 82001	STATE OF WYOMING		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY	10/03/96	
	Aggregate Year-to-Date > \$	250.00	250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LYNN SIMONS BOX 185 CHEYENNE 82003	U.S. GOVT.		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REGIONAL SEC. DEPT. OF EDUCATION	10/03/96	
	Aggregate Year-to-Date > \$	1,000.00	500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HERBERT KOHL 825 N. JEFFERSON ST. MILWAUKEE WI 53202			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation U.S. SENATOR OF WISCONSIN	10/04/96	
	Aggregate Year-to-Date > \$	500.00	500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
OLGA QUEALY P.O. BOX 391 KEMMERER WY 83101			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RETIRED	10/04/96	
	Aggregate Year-to-Date > \$	500.00	500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PRESS STEPHENS P.O. BOX 432 DUBOIS WY 82513	SELF-EMPLOYED		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OUTFITTER	10/05/96	
	Aggregate Year-to-Date > \$	250.00	250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ELIZABETH BAGLEY 1539 29TH ST. N.W. WASHINGTON DC 20007			
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation AMBASSADOR TO PORTUGAL	10/06/96	
	Aggregate Year-to-Date > \$	500.00	500.00
<b>SUBTOTAL</b> of Receipts This Page (optional).....			2,750.00
<b>TOTAL</b> This Period (last page this line number only).....			

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