

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	10 / 52
			FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)
Rob Tully for Congress

Full Name, Mailing Address, and ZIP Code Stanley Richards 215 Keo PO Box 1536 Des Moines IA 50306	Name of Employer General Growth Company	Date (month, day, year) 08/17/1998	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 400.00	
Full Name, Mailing Address, and ZIP Code Tilo Trevino PO Box 1880 Ft. Dodge IA 50501	Name of Employer Trevino Law Firm	Date (month, day, year) 08/17/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Baker, Silberberg & Keener, LLP 2850 Ocean Park Blvd., Suite 300 Santa Monica CA 90405	Name of Employer	Date (month, day, year) 08/17/1998	Amount of Each Receipt this Period 500.00 See attribution below
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Robert Baker 2850 Ocean Park Blvd., Suite 300 Santa Monica CA 90405	Name of Employer Baker, Silberberg & Keener	Date (month, day, year) 08/17/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 0.00	
Full Name, Mailing Address, and ZIP Code Zachary Alexander 411 Round Hill Road St. Davids PA 19087-4737	Name of Employer Stradley, Ronon, Stevens & Young	Date (month, day, year) 08/18/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Caroline Welsh 2929 Elm St. Dubuque IA 52001-1916	Name of Employer	Date (month, day, year) 08/18/1998	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Retired	Aggregate Year-to-Date > \$ 210.00	
Full Name, Mailing Address, and ZIP Code C. J. May, III PO Box 1428 Dubuque IA 52004-1428	Name of Employer Self	Date (month, day, year) 08/19/1998	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 1760.00	
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			