

SCHEDULE A
ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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

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 FOR LINE NUMBER
11(B)(1)

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NAME OF COMMITTEE (in full)

Stabenow for Senate C00344473

A. Full Name, Mailing Address and ZIP Code Samuel McKnight 1863 Vinetta Blvd Royal Oak, MI 48073	Name of Employer Klimist McKnight	Date (month, day, year) 8/22/00	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$500.00
B. Full Name, Mailing Address and ZIP Code Kristina Kiehl 2275 Summit Dr. Hillsborough, CA 94010	Name of Employer Self-employed	Date (month, day, year) 8/23/00	Amount of Each Receipt This Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Feminist	Aggregate Year-to-Date > \$	\$1,000.00
C. Full Name, Mailing Address and ZIP Code Jane Och 11 Dolma Rd Scarsdale, NY 10583	Name of Employer	Date (month, day, year) 4/17/00	Amount of Each Receipt This Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$	\$300.00
D. Full Name, Mailing Address and ZIP Code Lucile M Portwood 1816 Hamilton PO Box 76 Okemos, MI 48805-0431	Name of Employer	Date (month, day, year) 5/22/00	Amount of Each Receipt This Period \$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$800.00
E. Full Name, Mailing Address and ZIP Code Lucile M Portwood 1815 Hamilton PO Box 76 Okemos, MI 48805-0431	Name of Employer	Date (month, day, year) 5/8/00	Amount of Each Receipt This Period \$400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$800.00
F. Full Name, Mailing Address and ZIP Code Leon S Cohan 17 Eastbury Ct Ann Arbor, MI 48105	Name of Employer Barris Scott Denn & Draker	Date (month, day, year) 6/12/00	Amount of Each Receipt This Period \$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,150.00
G. Full Name, Mailing Address and ZIP Code Leon S Cohan 17 Eastbury Ct Ann Arbor, MI 48105	Name of Employer Barris Scott Denn & Draker	Date (month, day, year) 5/1/00	Amount of Each Receipt This Period \$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$1,150.00

SUBTOTAL of Receipts This Page (optional)

\$2,600.00

TOTAL This Period (last page this line number only)