

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)(9)

Contributions from Individuals

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NAME OF COMMITTEE (in Full) **Chris Chocola for Congress, Inc.** C00350926

| | | | |
|--|----------------------------------|--------------------------------------|--|
| A. Full Name, Mailing Address and ZIP Code Waring, H.D. 841 Oak St. Elkhart IN 46514 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Name of Employer Weed Plywood | Date (month, day, year) 6/19/2000 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Retired | Aggregate Year-to-Date > \$500.00 | |

| | | | |
|--|----------------------------------|--------------------------------------|--|
| B. Full Name, Mailing Address and ZIP Code Weed, David 55066 Colonial Ridge Dr. Bristol IN 46507 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Name of Employer Weed Plywood | Date (month, day, year) 6/27/2000 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation President | Aggregate Year-to-Date > \$650.00 | |

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|--|----------------------------------|--------------------------------------|--|
| C. Full Name, Mailing Address and ZIP Code Weed, David 55066 Colonial Ridge Dr. Bristol IN 46507 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$150.00 |
| | Name of Employer Weed Plywood | Date (month, day, year) 4/18/2000 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation President | Aggregate Year-to-Date > \$650.00 | |

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|--|----------------------------------|--------------------------------------|--|
| D. Full Name, Mailing Address and ZIP Code Welch, Jacquelin 22712 Weatherby Lane Elkhart IN 46514 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$200.00 |
| | Name of Employer Weed Plywood | Date (month, day, year) 5/30/2000 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Homemaker | Aggregate Year-to-Date > \$250.00 | |

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|--|----------------------------------|-------------------------------------|---|
| E. Full Name, Mailing Address and ZIP Code Welter, Angie 21560 C.R. 10 Elkhart IN 46514 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$450.00 In-Kind |
| | Name of Employer Weed Plywood | Date (month, day, year) 6/7/2000 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Homemaker | Aggregate Year-to-Date > \$450.00 | |

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|--|----------------------------------|--------------------------------------|--|
| F. Full Name, Mailing Address and ZIP Code Welter, Willy 21027 Riverbrook Lane Bristol IN 46507 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Name of Employer Weed Plywood | Date (month, day, year) 5/23/2000 | |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Retired | Aggregate Year-to-Date > \$500.00 | |

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|--|----------------------------------|--------------------------------------|--|
| G. Full Name, Mailing Address and ZIP Code Williams, David P.O. Box 1847 La Porte IN 46352 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$250.00 |
| | Name of Employer Weed Plywood | Date (month, day, year) 4/26/2000 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation | Aggregate Year-to-Date > \$250.00 | |

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|---|------------|
| SUBTOTAL of Receipts This Page (optional) | \$2,550.00 |
| TOTAL This Period (last page this line number only) | |