

**SCHEDULE A**

**ITEMIZED RECEIPTS**  
(Contributions from Individuals)

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

PAGE 1 OF 1  
FOR LINE NUMBER 11(a)1

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NAME OF COMMITTEE (in Full)  
**AMERIPAC: The Fund for a Greater America**

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Michael S. Berman 2801 New Mexico Ave. NW, #817 Washington, DC 20007</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>The Duberstein Group</b></p> <p>Occupation <b>Consultant</b></p> <p>Aggregate Year-to-Date <math>\\$ 1,000.00</math></p>	<p>Date (month, day, year) 4-24-97</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Steven M. Champlin 323 A Street, SE Washington, DC 20003</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <b>The Duberstein Group</b></p> <p>Occupation <b>Consultant</b></p> <p>Aggregate Year-to-Date <math>\\$ 1,000.00</math></p>	<p>Date (month, day, year) 4-24-97</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date <math>\\$</math></p>	<p>Date (Month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date <math>\\$</math></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date <math>\\$</math></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date <math>\\$</math></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date <math>\\$</math></p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

**\$2,000.00**

1997-01-01 11:00 AM