

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)(1)

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NAME OF COMMITTEE (In Full)

Sam Ewing for Congress Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Victoria P. Glennon 10521 E1700 North Rd Pontiac, IL 61764 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	10-16-00	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack Snyder 202 N. Prospect Rd. Bloomington, IL 61704 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Snyder Corporation	10-16-00	\$100.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary D. Woodard 104 W. Washington Chisman, IL 61924 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired	10-16-00	\$100.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger + Mary Huddleston P.O. Box 739 Mahomet, IL 61853 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Huddleston Homes	10-16-00	\$100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jack + Alberta Carr 912 BROADWAY Normal, IL 61761 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10-16-00	\$50.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John + Donna Weaver R.R. #2 Box 144 Clinton, IL 61727 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10-16-00	\$25.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Sinn 208 Walnut St. Milford, IL 60953 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10-16-00	\$25.00

Aggregate Year-to-Date \$

Aggregate Year-to-Date \$ 700

Aggregate Year-to-Date \$ 506

Aggregate Year-to-Date \$ 600

Aggregate Year-to-Date \$ 6

Aggregate Year-to-Date \$

Aggregate Year-to-Date \$

SUBTOTAL of Receipts This Page (optional)

650

TOTAL This Period (last page this line number only)