

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	18 / 34
			FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)
Rob Tully for Congress

Full Name, Mailing Address, and ZIP Code Thomas Schlapich 13808 Buena Vista Drive Urbandale IA 50323 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 250.00	
	Occupation Attorney	Aggregate Year-to-Date > \$ 800.00		
	Full Name, Mailing Address, and ZIP Code Randy Stefani 10550 Clark St. Des Moines IA 50325 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :			Name of Employer Ahlers Law Office
Occupation Attorney		Aggregate Year-to-Date > \$ 375.00		
Full Name, Mailing Address, and ZIP Code Matthew Novak 822 Augusta Drive SE Cedar Rapids IA 52403 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Pickens, Barnes & Abernathy	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 250.00
Occupation Attorney		Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code Steven C. Reed 9920 Hammonree Drive Urbandale IA 50322 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Self	Date (month, day, year) 06/30/1998	
Occupation Attorney		Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Harlan Holm, Jr. 808 S. Elen St. Cedar Falls IA 50613 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Bell Kirk Holm & Nardini PC	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 750.00
Occupation Attorney		Aggregate Year-to-Date > \$ 800.00		
Full Name, Mailing Address, and ZIP Code Linda Holm 808 S. Elen St. Cedar Falls IA 50815-2361 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Cedar Falls School District	Date (month, day, year) 06/30/1998	
Occupation Teacher		Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Gary S. Rubin 5428 Woodland Avenue Des Moines IA 50312 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Name of Employer Gaylord Container Corp.	Date (month, day, year) 06/30/1998	Amount of Each Receipt this Period 100.00
Occupation		Aggregate Year-to-Date > \$ 300.00		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				