

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)(i)

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NAME OF COMMITTEE (In Full)
Rob Tully for Congress C00329789

A. Full Name, Mailing Address and ZIP Code Thomas Logan 217 28th Street Des Moines, IA 50312 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Hopkins & Huebner, PC	Date (month, day, year) 7/2/97	Amount of Each Receipt this Period \$500.00
	Occupation Attorney Aggregate Year-to-Date \$ 750	12/22/97 \$250.00	
B. Full Name, Mailing Address and ZIP Code Neven Mulholland 833 Northwood Avenue Ft. Dodge, IA 50501-7032 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Johnson, Erb, Bice, Kramer, Good & Mulholland PC	Date (month, day, year) 7/2/97	Amount of Each Receipt this Period \$500.00
	Occupation Attorney Aggregate Year-to-Date \$ 1000	11/10/97 \$500.00	
C. Full Name, Mailing Address and ZIP Code Michael Reilly 215 S. Main Street, Box 1016 Council Bluffs, IA 51502 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self	Date (month, day, year) 7/9/97	Amount of Each Receipt this Period \$1,000.00
	Occupation Attorney Aggregate Year-to-Date \$ 1000		
D. Full Name, Mailing Address and ZIP Code David Wiggins 1200 Valley West Drive West Des Moines, IA 50265 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Wiggins, Anderson & Conger PC	Date (month, day, year) 7/9/97	Amount of Each Receipt this Period \$1,000.00
	Occupation Attorney Aggregate Year-to-Date \$ 1000		
E. Full Name, Mailing Address and ZIP Code Patrick Carpenter The Plaza, 300 Walnut, Suite 270 Des Moines, IA 50309 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Carpenter Law Firm	Date (month, day, year) 7/9/97	Amount of Each Receipt this Period \$1,000.00
	Occupation Attorney Aggregate Year-to-Date \$ 1000		
F. Full Name, Mailing Address and ZIP Code Linda Moore 5362 NE 62nd Avenue Altoona, IA 50009 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year) 7/2/97	Amount of Each Receipt this Period \$1,000.00
	Occupation Homemaker Aggregate Year-to-Date \$ 1000		
G. Full Name, Mailing Address and ZIP Code Fredd Haas 4417 46th Street Des Moines, IA 50310 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Humphrey & Haas PC	Date (month, day, year) 7/2/97	Amount of Each Receipt this Period \$500.00
	Occupation Advertising Aggregate Year-to-Date \$ 500		
SUBTOTAL of Receipts This Page (optional)			\$6,250.00
TOTAL This Period (last page this line number only)			