

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the detailed summary page

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NAME OF COMMITTEE (In Full)
People for Ganske

<p>A. Full Name, Mailing Address and Zip Code F. E. Marsh P. O. Box 814 1800 Grand Ave. Council Bluffs, IA 51503-1737</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Retired</p> <p>Occupation Doctor</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 03/13/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code David Hansen 3001 Sylvania Dr. West Des Moines, IA 50265-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Doctor</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 01/13/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and Zip Code Robert Maddox 8623 NR 108th Ave Bondurant, IA 50035-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Allied Construction Services</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 03/31/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Thomas Carlstrom 2520 Park Ave. Des Moines, IA 50321-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Doctor</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 01/13/2000</p>	<p>Amount of Each Receipt this Period \$900.00</p>
<p>E. Full Name, Mailing Address and Zip Code Thomas Carlstrom 2520 Park Ave. Des Moines, IA 50321-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Self</p> <p>Occupation Doctor</p> <p>Aggregate Year-to-Date -> \$1100.00</p>	<p>Date (month, day, year) 01/13/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Dean Mitchell 813 - 50th st West Des Moines, IA 50265-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 03/03/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and Zip Code John Merriman 13850 Lakeshore Dr Des Moines, IA 50325-8834</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> other (specify)</p>	<p>Name of Employer Retired</p> <p>Occupation lawyer</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 03/03/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1650.00</p>
<p>TOTAL This Period (last page this line number only)</p>	