

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **11a**

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NAME OF COMMITTEE (in Full)

Dickey for Congress Campaign Committee

A. Full Name, Mailing Address and ZIP Code Rayburn Dorey 321 2nd St. Bearden, AR 71720	Name of Employer Dorey Piling Occupation Owner	Date (month, day, year) 05-24-94	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 250.00			
B. Full Name, Mailing Address and ZIP Code William Dunklin 2 Elm Woods Pine Bluff, AR 71603	Name of Employer Dunklin Real Estate Occupation President	Date (month, day, year) 06-07-94	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 450.00			
C. Full Name, Mailing Address and ZIP Code Kenneth R. Duzan 443 W. Oak St. El Dorado, AR 71730	Name of Employer Self Occupation Physician	Date (month, day, year) 05-20-94	Amount of Each Receipt this Period 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 380.00			
D. Full Name, Mailing Address and ZIP Code Kenneth R. Duzan 443 W. Oak St. El Dorado, AR 71730	Name of Employer Self Occupation Physician	Date (month, day, year) 06-11-94	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 380.00			
E. Full Name, Mailing Address and ZIP Code Wayne Elliott 443 W45Oak St. El Dorado, AR 71730	Name of Employer Self Occupation Physician	Date (month, day, year) 05-18-94	Amount of Each Receipt this Period 35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 475.00			
F. Full Name, Mailing Address and ZIP Code Wayne Elliott 443 W. Oak St. El Dorado, AR 71730	Name of Employer Self Occupation Physician	Date (month, day, year) 06-11-94	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 475.00			
G. Full Name, Mailing Address and ZIP Code Harry Erwin 900 Shackelford Rd. #515 Little Rock, AR 72211	Name of Employer Self Occupation Public Accountant	Date (month, day, year) 06-24-94	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 250.00			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)