

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Baker for Congress

Full Name, Mailing Address and Zip Code Larry Ekmun 12 McKee Drive Quincy, IL 62301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Fisher Business Supply Occupation	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$50.00 Aggregate Year-to-Date -> \$300.00
Full Name, Mailing Address and Zip Code James Epperly SO Box 139 Milan, IL 61264- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer State Farm Insurance Occupation	Date (month, day, year) 10/10/98	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Norman Faber 1720 S. Main Princeton, IL 61356 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Faber Motors Inc. Occupation Auto Dealer	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$50.00 Aggregate Year-to-Date -> \$281.00
Full Name, Mailing Address and Zip Code Edgar Fetter 30 Lincoln Hill, NW Quincy, IL 62301 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Retired	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$25.00 Aggregate Year-to-Date -> \$285.00
Full Name, Mailing Address and Zip Code Timothy Fleming 1915 N. Adams Road Macomb, IL 61455- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Citizens National Bank of Maco Occupation Banker	Date (month, day, year) 10/14/98	Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date -> \$300.00
Full Name, Mailing Address and Zip Code Robert Foulkes 826 30th Street Rock Island, IL 61201 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Retired	Date (month, day, year) 10/05/98	Amount of Each Receipt this Period \$50.00 Aggregate Year-to-Date -> \$400.00
Full Name, Mailing Address and Zip Code Gay Gaines 1446 North Ocean Boulevard Palm Beach, FL 33480- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Best efforts Occupation	Date (month, day, year) 10/07/98	Amount of Each Receipt this Period \$2000.00 Aggregate Year-to-Date -> \$2000.00

SUBTOTAL of Receipts This Page (optional)	\$2525.00
TOTAL This Period (last page this line number only)	