

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 66 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CONNEALY 04

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|--|---|---|
| A. Full Name (Last, First, Middle Initial) Bernard Glaser Mailing Address PO Box 94902 City Lincoln State NE Zip Code 68509 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2004 Transaction ID: SA11A1.5401 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Self Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Attorney Election Cycle-to-Date ▼ 250.00 | |

| | | |
|---|---|---|
| B. Full Name (Last, First, Middle Initial) Larry Gregerson Mailing Address 3475 CR C City Herman State NE Zip Code 68029 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2004 Transaction ID: SA11A1.5341 Amount of Each Receipt this Period 100.00 Cash <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Self Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Farmer/Cattle Feeder Election Cycle-to-Date ▼ 300.00 | |

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Jim Grossman Mailing Address 6734 Mill Creek City Shawnee State KS Zip Code 66217 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2004 Transaction ID: SA11A1.5573 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer treasurer's best efforts Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 250.00 | |

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|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 600.00 |
| TOTAL This Period (last page this line number only) | |