

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

Nebraska Republican Federal Campaign Committee

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHILLIP THIELEN 4209 N. 134TH ST OMAHA, NE 68164-5083		10/08/199	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation	Aggregate Year-to-Date ->	\$200.00
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Tenderup 1018 N 13E ST PO BOX 126 SEWARD, NE 68434-1221	Seward Motor Freight	11/29/199	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Owner	Aggregate Year-to-Date ->	\$200.00
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle Codd 2105 3RD AVENUE S SIOUX CITY, NE 68776-	Stinger Albertson Co	12/28/199	\$100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation RealEst.Brok/Appraiser	Aggregate Year-to-Date ->	\$200.00
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Tolson 5004 S 110TH ST OMAHA, NE 68137-2373	City of Omaha NE	12/27/199	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Fireman	Aggregate Year-to-Date ->	\$300.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick Tripp PO BOX 324 BLAIR, NE 68008-0324	BrownTripp, Attorneys	12/30/199	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Attorney	Aggregate Year-to-Date ->	\$250.00
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Van Vleet PO BOX 199 SIDNEY, NE 69162-0199		07/12/199	\$150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Manufacturer's Rep.	Aggregate Year-to-Date ->	\$150.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Van Vleet PO BOX 199 SIDNEY, NE 69162-0199		12/27/199	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Manufacturer's Rep.	Aggregate Year-to-Date ->	\$400.00

SUBTOTAL of Receipts This Page (optional)

\$1200.00

TOTAL This Period (last page this line number only)