

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>16 / 44</b>
				FOR LINE NUMBER <b>11A1</b>	
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<b>NAME OF COMMITTEE (In Full)</b> <b>Minge for Congress</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> David A Aaker  18 Eastwood Dr  Orinda CA 94563-		<b>Name of Employer</b> Univ. Of California  <b>Occupation</b> Professor		<b>Date (month, day, year)</b> 11/06/2000  <b>Amount of Each Receipt this Period</b> 750.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > \$ 750.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Kay Aaker  18 Eastwood Dr  Orinda CA 94563-		<b>Name of Employer</b> Orinda Union School Dist  <b>Occupation</b> Teacher		<b>Date (month, day, year)</b> 11/06/2000  <b>Amount of Each Receipt this Period</b> 750.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > \$ 750.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Robert M Bass  201 Main St Ste 2700  Fort Worth TX 76102-		<b>Name of Employer</b> Keystone Inc  <b>Occupation</b> Investor		<b>Date (month, day, year)</b> 11/06/2000  <b>Amount of Each Receipt this Period</b> 1000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > \$ 1000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mark D Belden  1450 Meadow Lane  Chaska MN 55318-		<b>Name of Employer</b> Gustafson LLC  <b>Occupation</b> Operations Manager		<b>Date (month, day, year)</b> 11/04/2000  <b>Amount of Each Receipt this Period</b> 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > \$ 250.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Kent D Bergh  259 W County Rd F  Saint Paul MN 55126-2331		<b>Name of Employer</b> North Memorial Clinic  <b>Occupation</b> Physician		<b>Date (month, day, year)</b> 10/28/2000  <b>Amount of Each Receipt this Period</b> 300.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > \$ 400.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas G Birkey  725 N 1st St  Montevideo MN 56265-		<b>Name of Employer</b> Montevideo Clinic  <b>Occupation</b> Physician-MD		<b>Date (month, day, year)</b> 11/02/2000  <b>Amount of Each Receipt this Period</b> 50.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > \$ 565.84			
<b>Full Name, Mailing Address, and ZIP Code</b> Florence Borman  706 S 11th St  Montevideo MN 56265-2239		<b>Name of Employer</b> None  <b>Occupation</b> Retired		<b>Date (month, day, year)</b> 11/02/2000  <b>Amount of Each Receipt this Period</b> 50.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		<b>Aggregate Year-to-Date</b> > \$ 250.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					