

**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)  
Tom Reberg For Congress - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William G. Way 7713 Oakmont Place Raleigh NC 27615	Wake Radiology	10/7/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Physician		
	Aggregate Year-to-Date >	\$	\$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William L. Williams 1320 Kershaw Drive Raleigh NC 27609		10/7/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired		
	Aggregate Year-to-Date >	\$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. J. Alphin 11105 Farnwood Dr. Raleigh NC 27613		10/7/98	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Real Estate		
	Aggregate Year-to-Date >	\$	\$410.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R.A. Hilliard 6840 Greystone Dr. Raleigh NC 27615	RMA	10/9/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Investments		
	Aggregate Year-to-Date >	\$	\$285.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Ira Lee 501 Marlowe Rd. Raleigh NC 27609		10/3/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:		
	Aggregate Year-to-Date >	\$	\$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John V. Zeok 1601 Quaker Ridge Point Raleigh NC 27615	Carolina Cardiovas	10/3/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Cardiothoracic Surgeon		
	Aggregate Year-to-Date >	\$	\$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John LePere 6408 Gainesborough Dr. Raleigh NC 27612		10/7/98	\$300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:		
	Aggregate Year-to-Date >	\$	\$435.00

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....