

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

*Contributions From Individuals*

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NAME OF COMMITTEE (In Full)

*Drake for Congress*

A. Full Name, Mailing Address and ZIP Code DALE SPARBER 631 OHT AVE. GRARD, PA. 16417	Name of Employer DALE SPARBER Occupation INVESTMENT MANAGER Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/7/98	Amount of Each Receipt This Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/7/98	Amount of Each Receipt This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code ROSEMARIE DRISCOLL 30 QUINNEN PPK AVE NEW LONDON, CT 06320	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/7/98	Amount of Each Receipt This Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/7/98	Amount of Each Receipt This Period 1,000.00
C. Full Name, Mailing Address and ZIP Code WAYNE BOICH 17 S. HIGH ST. COLUMBUS, OH 43215	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/7/98	Amount of Each Receipt This Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 10/7/98	Amount of Each Receipt This Period 1,000.00
D. Full Name, Mailing Address and ZIP Code RAY D. CAMPBELL 10070 BURBANK RD. BURBANK, OH 44624	Name of Employer Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 10/11/98	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 10/11/98	Amount of Each Receipt This Period 250.00
E. Full Name, Mailing Address and ZIP Code PATRICIA ORFIELD 462 LEDGER RD. MEDINA, OH 44056	Name of Employer Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 10/11/98	Amount of Each Receipt This Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 10/11/98	Amount of Each Receipt This Period 250.00
F. Full Name, Mailing Address and ZIP Code SANDRA SMITH 6151 RYAN RD. MEDINA, OH 44056	Name of Employer Occupation Aggregate Year-to-Date > \$ 300	Date (month, day, year) 10/11/98	Amount of Each Receipt This Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 300	Date (month, day, year) 10/11/98	Amount of Each Receipt This Period 300.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)

3300

TOTAL This Period (last page this line number only)

3300