

JAN 31 1992  
CERTIFIED MAIL

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
OFFICE OF RECORDS & REGISTRATION  
1992 FEB -4 AM 9:50  
U.S. HOUSE OF REPRESENTATIVES

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
FRIENDS OF JIM MOODY

ADDRESS (number and street) ☐ Check if different than previously reported.  
P.O. BOX 93330

CITY, STATE and ZIP CODE  
MILWAUKEE, WI 53203

STATE/DISTRICT  
WI/05

2. FEC IDENTIFICATION NUMBER  
C00150813

3. IS THIS REPORT AN AMENDMENT?  
☐ YES ☒ NO

099317

- ☐ April 15 Quarterly Report
- ☐ July 15 Quarterly Report
- ☐ October 15 Quarterly Report
- ☒ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)

## 4. TYPE OF REPORT

- ☐ Twelfth day report preceding \_\_\_\_\_  
(Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- ☐ Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

☐ Termination Report

This report contains activity for

- ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

## SUMMARY

| 5. Covering Period   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 7/1/91 through 12/31/91  |                         |                                   |
| 6. Net Contributions (other than loans)  |                         |                                   |
| (a) Total Contributions (other than loans) (from Line 11(e))                                     | 472,019.58              | 682,693.58                        |
| (b) Total Contribution Refunds (from Line 20(d))   | -0-                     | -0-                               |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))                          | 472,019.58              | 682,693.58                        |
| 7. Net Operating Expenditures  |                         |                                   |
| (a) Total Operating Expenditures (from Line 17)  | 189,861.13              | 262,728.34                        |
| (b) Total Offsets to Operating Expenditures (from Line 14)                                       | 1,612.10                | 15,828.43                         |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a))                                    | 188,249.03              | 246,899.91                        |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)                                      | 872,888.57              |                                   |
| 9. Debts and Obligations Owed TO the Committee<br>(Itemize all on Schedule C and/or Schedule D)  |                         |                                   |
| 10. Debts and Obligations Owed BY the Committee<br>(Itemize all on Schedule C and/or Schedule D) | 185,000.00              |                                   |

For further information  
contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-376-3120

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer  
Robert H. Friebe

Signature of Treasurer

Date

1/31/92

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

FEC FORM 3  
(revised 4/87)

# DETAILED SUMMARY PAGE

## of Receipts and Disbursements

(Page 2, FEC FORM 3)

|  |  |  |  |
|--|--|--|--|
| Name of Committee (in full)<br><b>FRIENDS OF JIM MOODY #C00150813</b>                          |  | Report Covering the Period:<br>From: <b>7/1/91</b> To: <b>12/31/91</b> |  |
| <b>I. RECEIPTS</b>   |  | <b>COLUMN A</b><br>Total This Period                                   | <b>COLUMN B</b><br>Calendar Year-To-Date |
| <b>11. CONTRIBUTIONS (other than loans) FROM:</b>  |  |  |  |
| (a) Individuals/Persons Other Than Political Committees  |  |  |  |
| (i) Itemized (use Schedule A) . . . . .  |  | 240,040.00   |  |
| (ii) Unitemized . . . . .  |  | 85,904.58  |  |
| (iii) Total of contributions from individuals . . . . .  |  | 327,944.58   | 410,668.58                               |
| (b) Political Party Committees . . . . .   |  | 150.00   | 250.00                                   |
| (c) Other Political Committees (such as PACs) . . . . .  |  | 142,425.00   | 270,275.00                               |
| (d) The Candidate . . . . .  |  | 1,500.00   | 1,500.00                                 |
| (e) TOTAL CONTRIBUTIONS (other than loans )(add 11(a)(iii), (b), (c) and (d))                  |  | 472,019.58   | 682,693.58                               |
| <b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.</b> . . . . .                               |  | -0-  | -0-                                      |
| <b>13. LOANS:</b>  |  |  |  |
| (a) Made or Guaranteed by the Candidate . . . . .  |  | 185,000.00   | 370,000.00                               |
| (b) All Other Loans . . . . .  |  |  |  |
| (c) TOTAL LOANS (add 13(a) and (b)) . . . . .  |  | 185,000.00   | 370,000.00                               |
| <b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b> . . . . .                |  | 1,612.10   | 15,828.43                                |
| <b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b> . . . . .                                |  | 17,903.69  | 26,167.08                                |
| <b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b> . . . . .                          |  | 676,535.37   | 1,094,689.10                             |
| <b>II. DISBURSEMENTS</b>   |  |  |  |
| <b>17. OPERATING EXPENDITURES</b> . . . . .  |  | 189,861.13   | 262,728.34                               |
| <b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.</b> . . . . .                                 |  | -0-  | -0-                                      |
| <b>19. LOAN REPAYMENTS:</b>  |  |  |  |
| (a) Of Loans Made or Guaranteed by the Candidate . . . . .                                     |  | 185,000.00   | 185,000.00                               |
| (b) Of All Other Loans . . . . .   |  |  |  |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) . . . . .  |  | 185,000.00   | 185,000.00                               |
| <b>20. REFUNDS OF CONTRIBUTIONS TO:</b>  |  |  |  |
| (a) Individuals/Persons Other Than Political Committees . . . . .                              |  |  |  |
| (b) Political Party Committees . . . . .   |  |  |  |
| (c) Other Political Committees (such as PACs) . . . . .  |  |  |  |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) . . . . .                              |  | -0-  | -0-                                      |
| <b>21. OTHER DISBURSEMENTS</b> . . . . .   |  | 750.00   | 11,711.80                                |
| <b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21).</b> . . . . .                    |  | 375,611.13   | 459,440.14                               |
| <b>III. CASH SUMMARY</b>   |  |  |  |
| <b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b> . . . . .                             |  | \$ 571,964.33  |  |
| <b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b> . . . . .                                 |  | \$ 676,535.37  |  |
| <b>25. SUBTOTAL (add Line 23 and Line 24)</b> . . . . .  |  | \$ 1,248,499.70  |  |
| <b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).</b> . . . . .                           |  | \$ 375,611.13  |  |
| <b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).</b> . . . . . |  | \$ 872,888.57  |  |

92014402648

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 68  
FOR LINE NUMBER 11 (a)

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)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Clowers, David</b><br><b>740 North Plankinton</b><br><b>Milwaukee, WI 53203</b>        | <b>Name of Employer</b><br><b>self</b>   | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>                 |  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Finerty, John D</b><br><b>1335 Woodlawn Cir</b><br><b>Elm Grove, WI 53122</b>          | <b>Name of Employer</b><br><b>Friebert, Finerty &amp; St. John</b>                                   | <b>Date (month, day, year)</b><br><b>12/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>                 |  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Garnham, David</b><br><b>1111 E Bywater La</b><br><b>Milwaukee, WI 53217</b>           | <b>Name of Employer</b><br><b>UW-Milw</b>  | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>11/26/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b><br><b>150.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Professor</b><br><b>Aggregate Year-to-Date &gt; \$ 400.00</b>                |  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Gilbert, Eugene G</b><br><b>622 E Lexington Blvd</b><br><b>Milwaukee, WI 53217</b>     | <b>Name of Employer</b><br><b>Prudential-Bache</b>   | <b>Date (month, day, year)</b><br><b>11/01/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>VP</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>                       |  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Lynch, William H</b><br><b>3240 N. Summit Avenue</b><br><b>Milwaukee, WI 53211</b>     | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/12/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Lawyer</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>                   |  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Viste, Kenneth M Jr</b><br><b>100 Stoney Beach Rd</b><br><b>Oshkosh, WI 54901 7243</b> | <b>Name of Employer</b><br><b>Lakeside Neurocare</b>   | <b>Date (month, day, year)</b><br><b>11/06/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>                |  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Biller, Joel W</b><br><b>4716 N Wilshire Rd</b><br><b>Milwaukee, WI 53211 1262</b>     | <b>Name of Employer</b><br><b>Manpower, Inc.</b>   | <b>Date (month, day, year)</b><br><b>11/26/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Vice President/Marketing</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b> |  |   |

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

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

92014402549

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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PAGE 2 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Stein, Gerald</b><br><b>2510 W Dean Rd</b><br><b>Milwaukee, WI 53217</b>                               | <b>Name of Employer</b><br><b>Zilber Ltd</b>   | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>     |  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Bragman, Clifford I</b><br><b>W60 N171 Cardinal Ave</b><br><b>Box 27</b><br><b>Cedarburg, WI 53012</b> | <b>Name of Employer</b><br><b>Aluminum Industries</b>                                    | <b>Date (month, day, year)</b><br><b>12/09/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>    |  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Schlosser, John C</b><br><b>9528 W Brookside Dr</b><br><b>Greenfield, WI 53228</b>                     | <b>Name of Employer</b><br><b>St Francis Savings</b>                                     | <b>Date (month, day, year)</b><br><b>11/19/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b><br><b>Executive</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>    |  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Crowley, Michael Jr</b><br><b>9731 N Lamplighter Ln, 32W</b><br><b>Megun, WI 53092</b>                 | <b>Name of Employer</b><br><b>Mutual Savings Bank</b>                                    | <b>Date (month, day, year)</b><br><b>11/08/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b><br><b>Banker</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>       |  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>St John, Thomas W</b><br><b>2608 E. Wood Place</b><br><b>Milwaukee, WI 53211</b>                       | <b>Name of Employer</b><br><b>Friebert Finerty &amp; St. John</b>                        | <b>Date (month, day, year)</b><br><b>11/25/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>     |  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Holahan, William L</b><br><b>2630 E Capitol Dr</b><br><b>Milwaukee, WI 53211</b>                       | <b>Name of Employer</b><br><b>UW-Milwaukee</b>   | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>12/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b><br><b>Professor</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>    |  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Connell, Ted</b><br><b>207 Watchung Rd</b><br><b>Westfield, NJ 07090</b>                               | <b>Name of Employer</b><br><b>Connell Co.</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b><br><b>Businessman</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b> |  |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402650



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |  |   |   |
|--|--|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Cage, Marjorie</b><br><b>PO Box 76</b><br><b>W717 Lee Rd</b><br><b>Rubicon, WI 53078</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Self</b><br><b>Occupation</b><br><b>Psychotherapist</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>             | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>McGaffey, Jere D</b><br><b>12852 N W Shoreland Dr</b><br><b>Mequon, WI 53092</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Name of Employer</b><br><b>Foley &amp; Lardner</b><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>      | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Schuminsky, Norman</b><br><b>2334 Cumberland Ct 102 N</b><br><b>Mequon, WI 53092</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br><b>MSF Corporation</b><br><b>Occupation</b><br><b>CEO</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>               | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Weitzman, Jane G</b><br><b>169 Taconic Rd</b><br><b>Greenwich, CT 06831</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Name of Employer</b><br><b>Stuart Weitzman</b><br><b>Occupation</b><br><b>Design Consultant</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Iaquinta, Sam Jr</b><br><b>9800 212th Avenue</b><br><b>Bristol, WI 53104</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Name of Employer</b><br><b>Endodontic Ass'n</b><br><b>Occupation</b><br><b>Endodontist</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>      | <b>Date (month, day, year)</b><br><b>11/26/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Kern, Ellis</b><br><b>375 Hudson St #7FL</b><br><b>New York, NY 10014 3658</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | <b>Name of Employer</b><br><b>Ivy Hill Corp</b><br><b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>           | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Wigmore, Barrie A</b><br><b>1 W 72nd St</b><br><b>New York, NY 10023</b><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Name of Employer</b><br><b>Goldman, Sachs &amp; Co</b><br><b>Occupation</b><br><b>Banker</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>   | <b>Date (month, day, year)</b><br><b>12/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402651

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 4 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |   |   |   |
|---|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Schnoll, Howard M</b><br><b>10254 N Westport Cir 15W</b><br><b>Mequon, WI 53092-</b>  | <b>Name of Employer</b><br><b>Seidman &amp; Seidman</b> | <b>Date (month, day, year)</b><br><b>12/13/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Managing Partner</b>            |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Balcer, David W</b><br><b>2648 N Frederick Ave</b><br><b>Milwaukee, WI 53211</b>      | <b>Name of Employer</b>                                 | <b>Date (month, day, year)</b><br><b>11/25/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Info requested</b>              |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Gremminger, Roger A</b><br><b>929 N Astor #1608</b><br><b>Milwaukee, WI 53202</b>     | <b>Name of Employer</b><br><b>St Joseph's Hospita</b>   | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Physician</b>                   |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Woodmansee, Webster</b><br><b>1500 E Brown Deer Rd</b><br><b>Milwaukee, WI 53217</b>  | <b>Name of Employer</b><br><b>Daily Reporter</b>        | <b>Date (month, day, year)</b><br><b>11/25/91</b> | <b>Amount of Each Receipt this Period</b><br><b>125.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Editor</b>                      |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Glicklich, Marvin</b><br><b>5220 N Lake Dr</b><br><b>Milwaukee, WI 53217</b>          | <b>Name of Employer</b><br><b>Ped. Surgical Assoc</b>   | <b>Date (month, day, year)</b><br><b>12/03/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Phyisican</b>                   |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Rajani, Karl G</b><br><b>4255 S 78th St</b><br><b>Greenfield, WI 53220</b>            | <b>Name of Employer</b><br><b>Genesis Health Care</b>   | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>President</b>                   |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Crawford, Alan R</b><br><b>2540 N 124th St</b><br><b>Wauwatosa, WI 53226</b>          | <b>Name of Employer</b><br><b>Crawford Investment</b>   | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Real Estate</b>                 |   |   |
|   | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>       |   |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402652

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE **5** OF **68**  
FOR LINE NUMBER  
**11 (a)**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |  |   |   |
|--|--|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Timberlake, Robert</b><br><b>2219 E Jarvis</b><br><b>Milwaukee, WI 53211</b>                               | <b>Name of Employer</b><br><b>Children's Hospital</b>  | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>VP</b>                         | <b>Aggregate Year-to-Date</b> > \$ <b>300.00</b>  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Lehman, Bruce A</b><br><b>2804 P Street N.W.</b><br><b>Washington, DC 20007</b>                            | <b>Name of Employer</b><br><b>Swidler &amp; Berlin</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Attorney</b>                   | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Rudin, Lewis</b><br><b>345 Park Avenue</b><br><b>New York, NY 10154</b>                                    | <b>Name of Employer</b><br><b>Rudin Management</b>     | <b>Date (month, day, year)</b><br><b>11/27/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Owner</b>                      | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Madrigano, Joseph F Sr</b><br><b>4919 Harrison Rd</b><br><b>Kenosha, WI 53142</b>                          | <b>Name of Employer</b><br>                            | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Retired</b>                    | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Sack, Paul</b><br><b>3820 Washington St</b><br><b>San Francisco, CA 94118</b>                              | <b>Name of Employer</b><br>                            | <b>Date (month, day, year)</b><br><b>12/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Real Estate</b>                | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Saites, George</b><br><b>11307 Lilac Lane</b><br><b>Mequon, WI 53092</b>                                   | <b>Name of Employer</b><br><b>Milwaukee Country C</b>  | <b>Date (month, day, year)</b><br><b>11/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>General Manager</b>            | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Schur, Leon M</b><br><b>173 W Suburban Dr</b><br><b>Fox Point, WI 53217</b>                                | <b>Name of Employer</b><br><b>UW-Milw</b>              | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Professor</b>                  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |

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

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

92014402653

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |   |
|--|--|--|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Radisavcevic, Zoran</b><br><b>11455 W Forest Home Ave</b><br><b>Franklin, WI 53132</b>                                   |  | <b>Name of Employer</b><br><b>Self</b>             | <b>Date (month, day, year)</b><br><b>11/13/91</b> | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    |  | <b>Occupation</b><br><b>Machinist</b>              | <b>Aggregate Year-to-Date</b> > \$ <b>800.00</b>  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Dincman, Yalcin</b><br><b>28200 Fairmount Blvd</b><br><b>Pepper Pike, OH 44124</b>                                       |  | <b>Name of Employer</b><br><b>Self</b>             | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>25.00</b>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    |  | <b>Occupation</b><br><b>Physician</b>              | <b>Aggregate Year-to-Date</b> > \$ <b>275.00</b>  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Hiatt, Arnold S</b><br><b>45 Autumn Rd</b><br><b>Weston, MA 02193</b>  |  | <b>Name of Employer</b><br><b>Stride Rite Corp</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>1,000</b> <b>500</b> |  | <b>Occupation</b><br><b>Chairman</b>               | <b>Aggregate Year-to-Date</b> > \$ <b>1500.00</b> |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Belonger, Allen J</b><br><b>2805 Santa Barbara Dr</b><br><b>Brookfield, WI 53005</b>                                     |  | <b>Name of Employer</b>                            | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    |  | <b>Occupation</b><br><b>Info requested</b>         | <b>Aggregate Year-to-Date</b> > \$ <b>450.00</b>  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Bergland, Richard M</b><br><b>Ridge Rd</b><br><b>Tuxedo Park, NY 10987</b>   |  | <b>Name of Employer</b><br><b>Beth Israel</b>      | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>1,000</b> <b>500</b> |  | <b>Occupation</b><br><b>Physician</b>              | <b>Aggregate Year-to-Date</b> > \$ <b>1500.00</b> |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Jovanovic, Dusan</b><br><b>7006 Donna Dr</b><br><b>Middleton, WI 53562</b>   |  | <b>Name of Employer</b>                            | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>300.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    |  | <b>Occupation</b><br><b>Info requested</b>         | <b>Aggregate Year-to-Date</b> > \$ <b>325.00</b>  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Stokovich, Dorothy</b><br><b>370 S St Mary's Rd</b><br><b>Libertyville, IL 60048</b>                                     |  | <b>Name of Employer</b>                            | <b>Date (month, day, year)</b><br><b>09/28/91</b> | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    |  | <b>Occupation</b><br><b>Retired</b>                | <b>Aggregate Year-to-Date</b> > \$ <b>600.00</b>  |   |

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

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

9201402554

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |  |   |  |
|---|--|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Lemann, Jack</b><br><b>1655 Mountain Ave</b><br><b>Wauwatosa, WI 53213</b>            | <b>Name of Employer</b><br><b>Medical College of WI</b>  | <b>Date (month, day, year)</b><br><b>11/05/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>          |   |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Keyes, James H</b><br><b>610 N Honey Creek Pkwy</b><br><b>Wauwatosa, WI 53213</b>     | <b>Name of Employer</b><br><b>Johnson Controls</b>   | <b>Date (month, day, year)</b><br><b>12/03/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>          |   |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Aster, Richard H</b><br><b>3443 N Shepard Ave</b><br><b>Milwaukee, WI 53211</b>       | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>11/25/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 400.00</b>          |   |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Peltz, Sally R</b><br><b>1469 E Lilac Ln</b><br><b>Milwaukee, WI 53217</b>            | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>150.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Community Activist</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b> |   |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Cooney, Paul E</b><br><b>8 Rice Ct</b><br><b>Rockville, MD 20850</b>                  | <b>Name of Employer</b><br><b>Foley &amp; Lardner</b>  | <b>Date (month, day, year)</b><br><b>12/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>          |   |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Tarnoff, Michael I</b><br><b>2408 N Terrace Ave</b><br><b>Milwaukee, WI 53211</b>     | <b>Name of Employer</b><br><b>Warshafsky Law Office</b>  | <b>Date (month, day, year)</b><br><b>11/21/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>           |   |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Levy, Gerald J</b><br><b>1451 E Goodrich Ln</b><br><b>Milwaukee, WI 53217</b>         | <b>Name of Employer</b><br><b>Guaranty Bank</b>  | <b>Date (month, day, year)</b><br><b>11/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>CEO/President</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>      |   |  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9201440255

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**11 (a)**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Bursac, George</b><br><b>25 Pal St</b><br><b>Plainview, NY 11803</b>                                       | <b>Name of Employer</b><br><b>Hirschmann Corp</b>  | <b>Date (month, day, year)</b><br><b>09/28/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Engineer</b>               |  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Begovic, Marcella Z</b><br><b>316 W 84th St 6E</b><br><b>New York, NY 10024</b>                            | <b>Name of Employer</b><br>                        | <b>Date (month, day, year)</b><br><b>09/28/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Homemaker</b>              |  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Catanzaro, Andrew J</b><br><b>5757 W Oklahoma Ave</b><br><b>Milwaukee, WI 53219</b>                        | <b>Name of Employer</b><br><b>Self</b>             | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b><br><b>50.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Physician</b>              |  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Calamari, Frank</b><br><b>134 Hoover Pl</b><br><b>Centerport, NY 11721</b>                                 | <b>Name of Employer</b><br><b>Calvary Hospital</b> | <b>Date (month, day, year)</b><br><b>09/28/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Exec Director</b>          |  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>DeNio, Paul</b><br><b>PO Box 41183</b><br><b>Sacramento, CA 95841</b>                                      | <b>Name of Employer</b><br>                        | <b>Date (month, day, year)</b><br><b>09/28/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Info requested</b>         |  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Djuric, Miroljub</b><br><b>5652 Old Carriage La</b><br><b>West Bloomfield, MI 48322</b>                    | <b>Name of Employer</b><br>                        | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Retired</b>                |  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Maric, Biljana</b><br><b>1960 Coe's Post Run</b><br><b>Westlake, OH 44145</b>                              | <b>Name of Employer</b><br>                        | <b>Date (month, day, year)</b><br><b>12/17/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Homemaker</b>              |  |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>   |  |  |   |

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

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

99014402556

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Segota, Tatjana</b><br><b>420 E 58th St #4C</b><br><b>New York, NY 10022</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Name of Employer</b><br><br><b>Occupation</b><br><i>Info requested</i><br><b>Aggregate Year-to-Date</b> > \$ 250.00                       | <b>Date (month, day, year)</b><br><b>09/28/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                    |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Soderberg, Harold J</b><br><b>1218 Summit Ave</b><br><b>Minneapolis, MN 55403</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date</b> > \$ 500.00                             | <b>Date (month, day, year)</b><br><b>09/28/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Tupanjac, Branko</b><br><b>5312 W Pratt Ave</b><br><b>Skokie, IL 60077</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                       | <b>Name of Employer</b><br><b>Tupanjac Management</b><br><br><b>Occupation</b><br><b>Owner</b><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b>   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Sinclair, Jean G</b><br><b>13185 Lee Ct</b><br><b>Elm Grove, WI 53122</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Homemaker</b><br><b>Aggregate Year-to-Date</b> > \$ 250.00                            | <b>Date (month, day, year)</b><br><b>09/28/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                    |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Vucicevic, Dusan</b><br><b>32 Hamilton Ave</b><br><b>Oak Brook, IL 60521</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date</b> > \$ 300.00              | <b>Date (month, day, year)</b><br><b>10/08/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>300.00</b>                    |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Denechaud Boggs, Barbara</b><br><b>6 E Kirke St</b><br><b>Chevy Chase, MD 20815</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Homemaker</b><br><b>Aggregate Year-to-Date</b> > \$ 1000.00                           | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Panic, Milan</b><br><b>3300 Hyland Ave</b><br><b>Costa Mesa, CA 92626</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 1,000 | <b>Name of Employer</b><br><b>ICN Pharmaceutical</b><br><br><b>Occupation</b><br><b>CEO</b><br><b>Aggregate Year-to-Date</b> > \$ 2000.00    | <b>Date (month, day, year)</b><br><b>10/14/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b><br><b>1000.00</b> |

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

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

9201402557

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |   |
|---|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Valenti, Jack</b><br><b>1600 Eye St NW</b><br><b>Washington, DC 20006</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                     | <b>Name of Employer</b><br><b>Motion Picture Assoc.</b><br><br><b>Occupation</b><br><b>President/CEO</b><br><b>Aggregate Year-to-Date \$ 500.00</b> | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Welinsky, Howard S</b><br><b>6375 Green Vally Cr</b><br><b>Culver City, CA 90230</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>info requested</b><br><b>Aggregate Year-to-Date \$ 500.00</b>                            | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Berlin, Jerome C</b><br><b>5425 S 92nd St</b><br><b>Miami, FL 33156</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                       | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date \$ 1000.00</b>                                 | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Beinstein, Arnold R</b><br><b>2480 Presidential Way</b><br><b>Apt 904</b><br><b>West Palm Beach, FL 33401</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Todhunter, Int'l</b><br><br><b>Occupation</b><br><b>Exec</b><br><b>Aggregate Year-to-Date \$ 1000.00</b>              | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Medic, George</b><br><b>20026 Hiawatha St</b><br><b>Chatsworth, CA 91311</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>Retired</b><br><b>Aggregate Year-to-Date \$ 250.00</b>                                   | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Tutulugdzija, Rade S</b><br><b>9784 Doreen Dr</b><br><b>Cypress, CA 90630</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>info requested</b><br><b>Aggregate Year-to-Date \$ 250.00</b>                            | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Pantich, Danka</b><br><b>1419 Pine Heights Way</b><br><b>San Marcos, CA 92069</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>1,000 30</b>  | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>Civil Engineer</b><br><b>Aggregate Year-to-Date \$ 1030.00</b>                           | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402558



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

**A. Full Name, Mailing Address and ZIP Code**

Schutten, Ljubinka  
2151 S Sante Fe  
Vista, CA 92083

Name of Employer

Date (month,  
day, year)  
10/31/91

Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Homemaker

Aggregate Year-to-Date > \$ 500.00

**B. Full Name, Mailing Address and ZIP Code**

Keesal, Samuel A Jr  
PO Box 1730  
Long Beach, CA 90801

Name of Employer

Keesal, Young & Logan

Date (month,  
day, year)  
11/04/91

Amount of Each  
Receipt this Period  
1000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date > \$ 1000.00

**C. Full Name, Mailing Address and ZIP Code**

Dreyfuss, Richard  
500 S Buena Vista St  
Burbank, CA 91521

Name of Employer

Date (month,  
day, year)  
11/04/91

Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Actor

Aggregate Year-to-Date > \$ 500.00

**D. Full Name, Mailing Address and ZIP Code**

Nathanson, Marc  
10866 Wilshire Blvd #500  
Los Angeles, CA 90024

Name of Employer

Falcon TV

Date (month,  
day, year)  
11/04/91

Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

CEO

Aggregate Year-to-Date > \$ 500.00

**E. Full Name, Mailing Address and ZIP Code**

Johnson, James A  
3900 Wisconsin Ave NW  
Washington, DC 20016

Name of Employer

FannieMae

Date (month,  
day, year)  
11/04/91

Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Chairman

Aggregate Year-to-Date > \$ 500.00

**F. Full Name, Mailing Address and ZIP Code**

Wasserman, Edith  
911 N Foothill Rd  
Beverly Hills, CA 90210

Name of Employer

Date (month,  
day, year)  
11/04/91

Amount of Each  
Receipt this Period  
1000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Homemaker

Aggregate Year-to-Date > \$ 1000.00

**G. Full Name, Mailing Address and ZIP Code**

Rapoport, Ronald  
107 N Trace  
Williamsburg, VA 23185

Name of Employer

Date (month,  
day, year)  
11/04/91

Amount of Each  
Receipt this Period  
1000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Info requested

Aggregate Year-to-Date > \$ 1000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402559

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |   |
|---|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Rapoport, Patricia</b><br><b>107 N Trace</b><br><b>Williamsburg, VA 23185</b>         | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Homemaker</b>  | <b>Date (month, day, year)</b><br><b>11/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>   |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Jenk, Christine M</b><br><b>2716 N Stowell Ave</b><br><b>Milwaukee, WI 53211</b>      | <b>Name of Employer</b><br><b>Eppstein, Keller &amp;</b><br><br><b>Occupation</b><br><b>Architect</b>           | <b>Date (month, day, year)</b><br><b>11/05/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Czarapata, Loren J</b><br><b>7604 W View Dr</b><br><b>Wind Lake, WI 53185</b>         | <b>Name of Employer</b><br><b>Runzheimer Int'l</b><br><br><b>Occupation</b><br><b>VP Sales &amp; Consulting</b> | <b>Date (month, day, year)</b><br><b>11/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Taylor, Donald</b><br><b>7850 N Club Cir</b><br><b>Milwaukee, WI 53217</b>            | <b>Name of Employer</b><br><b>Anatar Investments</b><br><br><b>Occupation</b><br><b>Managing Director</b>       | <b>Date (month, day, year)</b><br><b>11/08/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Beech, Gary D</b><br><b>1701 W Glen Oaks La</b><br><b>Mequon, WI 53092</b>            | <b>Name of Employer</b><br><b>CH2M Hill</b><br><br><b>Occupation</b><br><b>Civil Engineer</b>                   | <b>Date (month, day, year)</b><br><b>11/07/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Cakiraga, Zerine</b><br><b>47 MacDonald Dr</b><br><b>Nashua, NH 03062</b>             | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Info requested</b>                                       | <b>Date (month, day, year)</b><br><b>11/07/91</b> | <b>Amount of Each Receipt this Period</b><br><b>50.00</b>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Ayasli, Yalcin</b><br><b>5 Ingleside Rd</b><br><b>Lexington, MA 01801</b>             | <b>Name of Employer</b><br><b>Hittite Corp.</b><br><br><b>Occupation</b><br><b>CEO</b>                          | <b>Date (month, day, year)</b><br><b>11/07/91</b> | <b>Amount of Each Receipt this Period</b><br><b>300.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>300.00</b>  |   |   |

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

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99014402660

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |   |
|--|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Hanson, Leila Fraser</b><br><b>235 Elm Grove Rd #E</b><br><b>Brookfield, WI 53005</b>                      | <b>Name of Employer</b><br><b>AvanTech Resource Center</b>                                      | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Occupation</b><br><b>executive</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>           |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Greenberg, Martin</b><br><b>1139 E Knapp St</b><br><b>Milwaukee, WI 53202</b>                              | <b>Name of Employer</b><br><b>Greenberg, Martin</b>   | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>            |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Hakimoglu, Geraldine</b><br><b>431 Righters Mill Rd</b><br><b>Penn Valley, PA 19072</b>                    | <b>Name of Employer</b><br><b>Aydin Corp.</b>   | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 6000 4000 | <b>Occupation</b><br><b>Executive</b><br><b>Aggregate Year-to-Date &gt; \$ 2000.00</b>          |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Haubrich, Paul A</b><br><b>3028 N Stowell Ave</b><br><b>Milwaukee, WI 53211</b>                            | <b>Name of Employer</b><br>   | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Occupation</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>                               |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Lappin, R Todd</b><br><b>950 W Dean Rd</b><br><b>Milwaukee, WI 53217-</b>                                  | <b>Name of Employer</b><br><b>Lappin Electric Co</b>  | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>          |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Lear, Norman</b><br><b>9720 Wilshire Blvd 3rd Fl</b><br><b>Beverly Hills, CA 90212</b>                     | <b>Name of Employer</b><br><b>Act III Communicati</b>   | <b>Date (month, day, year)</b><br><b>11/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Occupation</b><br><b>Producer/Media Exec</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b> |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>MacLeod, James S</b><br><b>4605 N Lake Dr</b><br><b>Whitefish Bay, WI 53211</b>                            | <b>Name of Employer</b><br><b>MGIC</b>  | <b>Date (month, day, year)</b><br><b>11/15/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Occupation</b><br><b>Senior VP</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>           |   |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9201402361

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 14 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |   |
|--|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Ivancevich, Tomica</b><br><b>1417 Lee Blvd</b><br><b>Berkeley, IL 60163</b>  | <b>Name of Employer</b><br><br>                       | <b>Date (month, day, year)</b><br><b>11/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    | <b>Occupation</b><br><b>Retired</b>                   |   |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>     |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Ivancevich, Radmila</b><br><b>1417 Lee Blvd</b><br><b>Berkeley, IL 60163</b>   | <b>Name of Employer</b><br><br>                       | <b>Date (month, day, year)</b><br><b>11/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    | <b>Occupation</b><br><b>Homemaker</b>                 |   |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>     |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Ivancevich, Gruio</b><br><b>1417 Lee Blvd</b><br><b>Berkeley, IL 60163</b>   | <b>Name of Employer</b><br><b>Self</b>                | <b>Date (month, day, year)</b><br><b>11/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>1,000</b> <b>500</b> | <b>Occupation</b><br><b>Accountant</b>                |   |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>1500.00</b>     |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Egan, William</b><br><b>One PO Square, Ste 3800</b><br><b>Boston, MA 02109</b>   | <b>Name of Employer</b><br><b>Burr, Egan, Deleage</b> | <b>Date (month, day, year)</b><br><b>11/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    | <b>Occupation</b><br><br>                             |   |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>     |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Castleman, Deborah R</b><br><b>14629 Hilltree Rd</b><br><b>Santa Monica, CA 90402</b>                                    | <b>Name of Employer</b><br><b>Rand Co.</b>            | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    | <b>Occupation</b><br><b>Engineer</b>                  |   |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>      |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Albright, Madeleine</b><br><b>1318 34th St NW</b><br><b>Washington, DC 20007</b>   | <b>Name of Employer</b><br><b>Center Nat'l Policy</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    | <b>Occupation</b><br><b>President</b>                 |   |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>      |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Kaiser, John A</b><br><b>406 Gilbert Ave</b><br><b>Eau Claire, WI 54701</b>  | <b>Name of Employer</b><br><br>                       | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    | <b>Occupation</b><br><b>Info requested</b>            |   |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>      |   |   |

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

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

99014402362

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

A. Full Name, Mailing Address and ZIP Code

**Koenig, Debra Sadow  
7475 N River Rd  
River Hills, WI 53217**

Name of Employer

**Godfrey & Kahn**

Date (month,  
day, year)

**11/12/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Attorney**

Aggregate Year-to-Date > \$ **250.00**

B. Full Name, Mailing Address and ZIP Code

**Runzheimer, Rex A  
6641 Whitnall Edge  
Franklin, WI 53132**

Name of Employer

**Runzheimer**

Date (month,  
day, year)

**11/12/91**

Amount of Each  
Receipt this Period

**1000.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Dir of Marketing**

Aggregate Year-to-Date > \$ **1000.00**

C. Full Name, Mailing Address and ZIP Code

**Peiffer, Thomas  
2934 Willard La  
Waukesha, WI 53188**

Name of Employer

**Runzheimer**

Date (month,  
day, year)

**11/12/91**

Amount of Each  
Receipt this Period

**500.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Exec VP**

Aggregate Year-to-Date > \$ **500.00**

D. Full Name, Mailing Address and ZIP Code

**Cotchett, Joseph W  
SF Airport Office Ctr  
840 Malcolm Rd  
Burlingame, CA 94010**

Name of Employer

**Runzheimer**

Date (month,  
day, year)

**11/12/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Attorney**

Aggregate Year-to-Date > \$ **250.00**

E. Full Name, Mailing Address and ZIP Code

**Packer, Peter D  
531 W Court St  
Elkhorn, WI 53121**

Name of Employer

**Runzheimer**

Date (month,  
day, year)

**11/12/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**VP-Communications**

Aggregate Year-to-Date > \$ **250.00**

F. Full Name, Mailing Address and ZIP Code

**Kropidlowski, Donald D  
709 River Bend Ct  
Plover, WI 54467**

Name of Employer

**American Equity Ban**

Date (month,  
day, year)

**11/12/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**President**

Aggregate Year-to-Date > \$ **250.00**

G. Full Name, Mailing Address and ZIP Code

**Austin, Leland Jr  
910 14th Ave  
Grafton, WI 53024**

Name of Employer

**United Health, Inc**

Date (month,  
day, year)

**11/12/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Exec VP**

Aggregate Year-to-Date > \$ **250.00**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9201440263

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |   |  |   |
|--|---|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Kresovic, Borislav</b><br><b>8870 S 51st St</b><br><b>Franklin, WI 53132</b>                                   | <b>Name of Employer</b><br><b>Cameo Care Ctr</b>      | <b>Date (month, day, year)</b><br><b>12/11/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Occupation</b><br><b>Administrator</b>             | <b>Aggregate Year-to-Date</b> > \$ <b>600.00</b>                     |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Serdar, Cuneyt M</b><br><b>1001 Antelope Pl</b><br><b>Newbury Park, CA 91320</b>                               | <b>Name of Employer</b><br><b>AMGEN Corp.</b>         | <b>Date (month, day, year)</b><br><b>12/17/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>300.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Occupation</b><br><b>Manager</b>                   | <b>Aggregate Year-to-Date</b> > \$ <b>400.00</b>                     |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Savage, Bozo</b><br><b>985 Alfred St</b><br><b>Brookfield, WI 53005</b>  | <b>Name of Employer</b><br><b>Precision Gears</b>     | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>400.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Occupation</b><br><b>Shop Supervisor</b>           | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>                    |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Smith, Guy W</b><br><b>Unicare Health Facilities</b><br><b>105 W Michigan St</b><br><b>Milwaukee, WI 53202</b> | <b>Name of Employer</b><br><b>Unicare Health Faci</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Occupation</b><br><b>President</b>                 | <b>Aggregate Year-to-Date</b> > \$ <b>850.00</b>                     |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Jekich, Sonja</b><br><b>812 S Glendale Ave #42</b><br><b>Glendale, CA 91205</b>                                | <b>Name of Employer</b><br><b>Self</b>                | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>15.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Occupation</b><br><b>Professor</b>                 | <b>Aggregate Year-to-Date</b> > \$ <b>515.00</b>                     |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Erdem, Erhan</b><br><b>23 Burton Farm Dr</b><br><b>Andover, MA 01810</b>                                       | <b>Name of Employer</b><br><b>Self</b>                | <b>Date (month, day, year)</b><br><b>11/22/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>200.00</b><br><b>100.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Occupation</b><br><b>Physician</b>                 | <b>Aggregate Year-to-Date</b> > \$ <b>425.00</b>                     |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Kantarelli, Nuri</b><br><b>3 Punchard Ave</b><br><b>Andover, MA 01810</b>                                      | <b>Name of Employer</b><br><b>Info requested</b>      | <b>Date (month, day, year)</b><br><b>11/07/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Occupation</b><br><b>Info requested</b>            | <b>Aggregate Year-to-Date</b> > \$ <b>314.00</b>                     |   |

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

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

92014402664

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |   |
|--|---|---|---|
| <p><b>A. Full Name, Mailing Address and ZIP Code</b><br/> <b>Webber, Michael</b><br/> <b>Oakmont Investment Co</b><br/> <b>1609 Westwood Blvd 2nd FL</b><br/> <b>Los Angeles, CA 90024</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer<br/> <b>Oakmont Investment</b></p> <p>Occupation<br/> <b>Executive</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>    | <p>Date (month, day, year)<br/> <b>11/12/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>B. Full Name, Mailing Address and ZIP Code</b><br/> <b>Edelman, Martin W</b><br/> <b>355 South End Ave</b><br/> <b>New York, NY 10280</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>  | <p>Name of Employer<br/> <b>Edelman &amp; Edelman</b></p> <p>Occupation<br/> <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>1000.00</b></p> | <p>Date (month, day, year)<br/> <b>11/14/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>1000.00</b></p> |
| <p><b>C. Full Name, Mailing Address and ZIP Code</b><br/> <b>Mellowes, John A</b><br/> <b>10500 N Pt Washington Rd</b><br/> <b>13 W</b><br/> <b>Megun, WI 53092</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                        | <p>Name of Employer<br/> <b>Charter Mfg Co, Inc</b></p> <p>Occupation<br/> <b>President</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>   | <p>Date (month, day, year)<br/> <b>11/13/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>D. Full Name, Mailing Address and ZIP Code</b><br/> <b>Dinauer, Thomas A</b><br/> <b>1415 Miramar Dr</b><br/> <b>Mukwonago, WI 53149</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>   | <p>Name of Employer<br/> <b>United Health</b></p> <p>Occupation<br/> <b>VP</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>                | <p>Date (month, day, year)<br/> <b>11/15/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>E. Full Name, Mailing Address and ZIP Code</b><br/> <b>Kaplan, Shari A</b><br/> <b>11541 N LaGuna Dr</b><br/> <b>Megun, WI 53092 3119</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>  | <p>Name of Employer<br/> <b>United Health</b></p> <p>Occupation<br/> <b>Exec VP</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>           | <p>Date (month, day, year)<br/> <b>11/15/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>F. Full Name, Mailing Address and ZIP Code</b><br/> <b>Foster, Kenneth C</b><br/> <b>N6 W30775 Cherokee Trail</b><br/> <b>Waukesha, WI 53188</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                                     | <p>Name of Employer<br/> <b>MGIC</b></p> <p>Occupation<br/> <b>Senior VP</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>                  | <p>Date (month, day, year)<br/> <b>11/15/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>G. Full Name, Mailing Address and ZIP Code</b><br/> <b>James, Bernard</b><br/> <b>465 W Fairy Chasm Rd</b><br/> <b>Milwaukee, WI 53217</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>   | <p>Name of Employer<br/> <b>UW-Milwaukee</b></p> <p>Occupation<br/> <b>Professor</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>500.00</b></p>          | <p>Date (month, day, year)<br/> <b>11/15/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>500.00</b></p>  |

SUBTOTAL of Receipts This Page (optional)

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92014102563

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |  |   |  |
|---|--|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Weiss, Robert M</b><br><b>9601 N Juniper Cir</b><br><b>Mequon, WI 53092 6215</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | <b>Name of Employer</b><br><b>Weiss &amp; Berzowski</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date \$ 250.00    | <b>Date (month, day, year)</b><br><b>11/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Wolf, Timothy V</b><br><b>428 Beirut Ave</b><br><b>Pacific Palisades, CA 90272</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br><b>Walt Disney</b><br><br><b>Occupation</b><br><b>VP-Controller</b><br>Aggregate Year-to-Date \$ 250.00         | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Shapiro, Joseph</b><br><b>2700 Neilson Way #822</b><br><b>Santa Monica, CA 90405</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Name of Employer</b><br><b>Walt Disney</b><br><br><b>Occupation</b><br><b>Sr VP</b><br>Aggregate Year-to-Date \$ 500.00                 | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Frank, Richard</b><br><b>11677 Valleycrest Rd</b><br><b>Studio City, CA 91604</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Name of Employer</b><br><b>Walt Disney</b><br><br><b>Occupation</b><br><b>President</b><br>Aggregate Year-to-Date \$ 500.00             | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Jacobs, Harry A Jr</b><br><b>Matthiessen Park</b><br><b>Irvington on Hudson, NY 10533</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Prudential Securities</b><br><br><b>Occupation</b><br><b>Sr Director</b><br>Aggregate Year-to-Date \$ 250.00 | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Kochar, Arvind K</b><br><b>18630 Le Chateau Dr</b><br><b>Brookfield, WI 53005</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Physician</b><br>Aggregate Year-to-Date \$ 500.00                    | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Zeiger, Martin</b><br><b>100 Banks Ave</b><br><b>Rockville Centre, NY 11570</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | <b>Name of Employer</b><br><b>Rugby-Darby Grp</b><br><br><b>Occupation</b><br><b>Exec VP</b><br>Aggregate Year-to-Date \$ 500.00           | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |

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

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

92011402366



## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |   |   |
|---|--|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code<br/>Hoffman, Peter M<br/>8800 Sunset Blvd<br/>Los Angeles, CA 90069</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                            | <p>Name of Employer</p> <p>Occupation<br/><u>Info requested</u></p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                     | <p>Date (month, day, year)<br/>11/18/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p>  |
| <p>B. Full Name, Mailing Address and ZIP Code<br/>Horn, Alan F<br/>335 N Maple Dr Ste 135<br/>Beverly Hills, CA 90210</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify): 1,006 1,000</p> | <p>Name of Employer</p> <p>Occupation<br/><u>Info requested</u></p> <p>Aggregate Year-to-Date &gt; \$ 2000.00</p>                    | <p>Date (month, day, year)<br/>11/18/91</p> | <p>Amount of Each Receipt this Period<br/>2000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code<br/>Fornos, Werner H<br/>218 B Third St NE<br/>Washington, DC 20002</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                            | <p>Name of Employer<br/>Population Inst.</p> <p>Occupation<br/><u>President</u></p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>     | <p>Date (month, day, year)<br/>11/18/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>D. Full Name, Mailing Address and ZIP Code<br/>Samson, Rose L<br/>2Mt Holyoke Dr<br/>Rancho Mirage, CA 92270</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                              | <p>Name of Employer</p> <p>Occupation<br/><u>Homemaker</u></p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>                          | <p>Date (month, day, year)<br/>11/20/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>E. Full Name, Mailing Address and ZIP Code<br/>Darmon Meyer, Martine<br/>2539 N Terrace Ave<br/>Milwaukee, WI 53211</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                       | <p>Name of Employer<br/>UW-Milwaukee</p> <p>Occupation<br/><u>Professor</u></p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>         | <p>Date (month, day, year)<br/>11/20/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>F. Full Name, Mailing Address and ZIP Code<br/>Reinhardt, Randall E<br/>3435 N Lake Dr<br/>Milwaukee, WI 53211</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                            | <p>Name of Employer<br/>Warshafsky, Reinhardt</p> <p>Occupation<br/><u>Attorney</u></p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p> | <p>Date (month, day, year)<br/>11/21/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>G. Full Name, Mailing Address and ZIP Code<br/>Reading, Miriam S<br/>2912 E Bellevue Pl<br/>Milwaukee, WI 53211</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                           | <p>Name of Employer</p> <p>Occupation<br/><u>Homemaker</u></p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>                          | <p>Date (month, day, year)<br/>11/25/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |

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92014402667

## SCHEDULE A

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |   |
|---|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Knox, Ronald P<br>W180 S6807 Muskego Dr<br>Muskego, WI 53150<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br><br><b>Occupation</b><br>Info requested<br><b>Aggregate Year-to-Date</b> > \$ 250.00                | <b>Date (month, day, year)</b><br>11/25/91             | <b>Amount of Each Receipt this Period</b><br>250.00             |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Harmon, Deborah L<br>2022 Columbia Rd #301 NW<br>Washington, DC 20009<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 1,000 | <b>Name of Employer</b><br>Self<br><br><b>Occupation</b><br>Consultant<br><b>Aggregate Year-to-Date</b> > \$ 2000.00           | <b>Date (month, day, year)</b><br>11/27/91<br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1000.00<br>1000.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Usow, Herbert L<br>633 W Wisconsin Ave #408<br>Milwaukee, WI 53203<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                           | <b>Name of Employer</b><br>Self<br><br><b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 250.00              | <b>Date (month, day, year)</b><br>11/27/91             | <b>Amount of Each Receipt this Period</b><br>250.00             |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Lebenthal, James A<br>610 West End Ave<br>New York, NY 10024<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br>Lebenthal & Co<br><br><b>Occupation</b><br>Chairman<br><b>Aggregate Year-to-Date</b> > \$ 250.00    | <b>Date (month, day, year)</b><br>11/27/91             | <b>Amount of Each Receipt this Period</b><br>250.00             |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Yake, J Stanley<br>10 Ferry Dr<br>Rexford, NY 12148<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br>Self<br><br><b>Occupation</b><br>Entrepreneur<br><b>Aggregate Year-to-Date</b> > \$ 500.00          | <b>Date (month, day, year)</b><br>11/22/91             | <b>Amount of Each Receipt this Period</b><br>500.00             |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Hayden, William H<br>30 Fifth Ave #16K<br>New York, NY 10011<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br>Bear Stearns<br><br><b>Occupation</b><br>Executive<br><b>Aggregate Year-to-Date</b> > \$ 500.00     | <b>Date (month, day, year)</b><br>11/22/91             | <b>Amount of Each Receipt this Period</b><br>500.00             |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Gardner, Brian J<br>535 Smith St<br>Farmington, NY 11735<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                     | <b>Name of Employer</b><br>Instant Whip Processing<br><br><b>Occupation</b><br>vp<br><b>Aggregate Year-to-Date</b> > \$ 500.00 | <b>Date (month, day, year)</b><br>11/22/91             | <b>Amount of Each Receipt this Period</b><br>500.00             |

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9201402568

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |   |
|--|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Faley, Kevin O</b><br><b>1575 Eye St NW #1025</b><br><b>Washington, DC 20005</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                               | <b>Name of Employer</b><br><b>Riukin, Radler</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>        | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Direnfeld, Barry</b><br><b>3000 K St NW #300</b><br><b>Washington, DC 20007</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                | <b>Name of Employer</b><br><b>Swidler &amp; Berlin</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Danashek, Philip M</b><br><b>44 Stornoway</b><br><b>Chappaqua, NY 10514</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                    | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>Info requested</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>                       | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Connaughton, Thomas A</b><br><b>5900 Benfield Dr</b><br><b>Alexandria, VA 22310</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                            | <b>Name of Employer</b><br><b>Riukin &amp; Radler</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>  | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Bayh, Birch</b><br><b>5019 Lowell St NW</b><br><b>Washington, DC 20016</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                     | <b>Name of Employer</b><br><b>Riukin &amp; Radler</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>  | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Corzine, Jon S</b><br><b>25 Lenox Rd</b><br><b>Summit, NJ 07901</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br><b>Goldman Sachs</b><br><br><b>Occupation</b><br><b>Executive</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>       | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>DeRegt, Kenneth M</b><br><b>Morgan Stanley</b><br><b>1221 Ave of the Americas</b><br><b>New York, NY 10020</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Morgan Stanley</b><br><br><b>Occupation</b><br><b>Executive</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>       | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |

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920140269

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|   |  |   |   |
|---|--|---|---|
| <p><b>A. Full Name, Mailing Address and ZIP Code</b><br/> <b>Kraemer, David R</b><br/> <b>719 Farwell Dr</b><br/> <b>Madison, WI 53704-6031</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>           | <p>Name of Employer<br/><br/> Occupation<br/><i>Info requested</i><br/> Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>                               | <p>Date (month, day, year)<br/> <b>11/25/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>B. Full Name, Mailing Address and ZIP Code</b><br/> <b>Kagen, Allan E</b><br/> <b>8387 N Indian Creek Pkwy</b><br/> <b>Milwaukee, WI 53217</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>      | <p>Name of Employer<br/> <b>Self</b><br/> Occupation<br/> <b>Physician/Teacher</b><br/> Aggregate Year-to-Date &gt; \$ <b>300.00</b></p>               | <p>Date (month, day, year)<br/> <b>12/30/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>100.00</b></p>  |
| <p><b>C. Full Name, Mailing Address and ZIP Code</b><br/> <b>Vice, Jon E</b><br/> <b>13615 W Burleigh RD #4</b><br/> <b>Brookfield, WI 53005-</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>         | <p>Name of Employer<br/> <b>Children's Hospital</b><br/> Occupation<br/> <b>CEO</b><br/> Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>              | <p>Date (month, day, year)<br/> <b>12/06/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>D. Full Name, Mailing Address and ZIP Code</b><br/> <b>Meissner, David G</b><br/> <b>694 Lake Shore Rd</b><br/> <b>Grafton, WI 53024</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>            | <p>Name of Employer<br/> <b>Barkin Paulsen Meis</b><br/> Occupation<br/> <b>Public Relations</b><br/> Aggregate Year-to-Date &gt; \$ <b>250.00</b></p> | <p>Date (month, day, year)<br/> <b>12/03/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>E. Full Name, Mailing Address and ZIP Code</b><br/> <b>McClure, Linda G</b><br/> <b>9505 Brooke Drive</b><br/> <b>Bethesda, MD 20817 2207</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>       | <p>Name of Employer<br/><br/> Occupation<br/> <i>Info requested</i><br/> Aggregate Year-to-Date &gt; \$ <b>1000.00</b></p>                             | <p>Date (month, day, year)<br/> <b>12/30/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>1000.00</b></p> |
| <p><b>F. Full Name, Mailing Address and ZIP Code</b><br/> <b>Schwartz, Harold A</b><br/> <b>3800 N Newhall St</b><br/> <b>Milwaukee, WI 53211</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>         | <p>Name of Employer<br/><br/> Occupation<br/> <b>Retired</b><br/> Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>                                     | <p>Date (month, day, year)<br/> <b>11/07/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>G. Full Name, Mailing Address and ZIP Code</b><br/> <b>Bush, Thomas E</b><br/> <b>3404 W Meadowview Ct</b><br/> <b>Mequon-Theinsville, WI 53092</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer<br/> <b>Self</b><br/> Occupation<br/> <b>Attorney</b><br/> Aggregate Year-to-Date &gt; \$ <b>400.00</b></p>                        | <p>Date (month, day, year)<br/> <b>11/13/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |

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220102670

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |   |   |
|--|--|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Belfer, Arthur B</b><br><b>857 5th Ave</b><br><b>New York, NY 10021</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                  | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Investor</b><br>Aggregate Year-to-Date > \$ <b>500.00</b>              | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Ortenberg, Arthur</b><br><b>650 Fifth Ave</b><br><b>New York, NY 10019</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                               | <b>Name of Employer</b><br><b>Liz Claiborne</b><br><br><b>Occupation</b><br><b>Executive</b><br>Aggregate Year-to-Date > \$ <b>1000.00</b>   | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Ortenberg, Elisabeth</b><br><b>650 Fifth Ave</b><br><b>New York, NY 10019</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                            | <b>Name of Employer</b><br><b>Liz Claiborne</b><br><br><b>Occupation</b><br><b>Executive</b><br>Aggregate Year-to-Date > \$ <b>1000.00</b>   | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Daley, Fredrick J</b><br><b>727 S Dearborn St #613</b><br><b>Chicago, IL 60605</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                       | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ <b>250.00</b>              | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Seidman, Michael B</b><br><b>2951 N Oakland Ave</b><br><b>PO Box 11068</b><br><b>Milwaukee, WI 53211</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Physician</b><br>Aggregate Year-to-Date > \$ <b>300.00</b>             | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>300.00</b>  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Katzenberg, Marilyn</b><br><b>708 Hillcrest Rd</b><br><b>Beverly Hills, CA 90210</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>Homemaker</b><br>Aggregate Year-to-Date > \$ <b>1000.00</b>                       | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Bozic, Steve</b><br><b>3 Cambridge Dr</b><br><b>Hawthorn Woods, IL 60047</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                             | <b>Name of Employer</b><br><b>Steve's Construction</b><br><br><b>Occupation</b><br><b>Owner</b><br>Aggregate Year-to-Date > \$ <b>250.00</b> | <b>Date (month, day, year)</b><br><b>12/02/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |

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

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

92014402671

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

## A. Full Name, Mailing Address and ZIP Code

Denic, Vlastimir  
9412 Normandy  
Morton Grove, IL 60053

## Name of Employer

Quality Carbide Tool

Date (month,  
day, year)  
12/02/91Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

## Occupation

Engineer

Aggregate Year-to-Date &gt; \$ 500.00

## B. Full Name, Mailing Address and ZIP Code

Giljen, Dragoljub  
5942 N St Louis  
Chicago, IL 60659

## Name of Employer

Date (month,  
day, year)  
12/02/91Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

## Occupation

Retired

Aggregate Year-to-Date &gt; \$ 500.00

## C. Full Name, Mailing Address and ZIP Code

Miljus, Veljko  
11443 Woodglen La  
Burr Ridge, IL 60525

## Name of Employer

Universal Prestige

Date (month,  
day, year)  
12/02/91Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

## Occupation

President

Aggregate Year-to-Date &gt; \$ 250.00

## D. Full Name, Mailing Address and ZIP Code

Nikolic, Luka  
117 N First St  
Libertyville, IL 60048

## Name of Employer

L.N. Construction

Date (month,  
day, year)  
12/02/91Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

## Occupation

Owner

Aggregate Year-to-Date &gt; \$ 250.00

## E. Full Name, Mailing Address and ZIP Code

Zecevic, Vuko B  
3114 W Irving Park Rd  
Chicago, IL 60618 3497

## Name of Employer

Self

Date (month,  
day, year)  
12/02/91Amount of Each  
Receipt this Period  
1000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

## Occupation

Physician

Aggregate Year-to-Date &gt; \$ 1000.00

## F. Full Name, Mailing Address and ZIP Code

Vuckovich, Brenda  
755 Kipling Pl  
Deerfield, IL 60015

## Name of Employer

Neuroscience Ctr

Date (month,  
day, year)  
12/02/91Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

## Occupation

Physician

Aggregate Year-to-Date &gt; \$ 250.00

## G. Full Name, Mailing Address and ZIP Code

Bjelopetrovich, Vlado  
5555 W Howard St  
Skokie, IL 60077

## Name of Employer

Great Lakes Graphic

Date (month,  
day, year)  
12/02/91Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

## Occupation

President

Aggregate Year-to-Date &gt; \$ 500.00

SUBTOTAL of Receipts This Page (optional)

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |  |
|--|---|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Schneider, Thomas P</b><br><b>2600 E. Menlo Blvd</b><br><b>Milwaukee, WI 53211</b>                         | <b>Name of Employer</b><br><b>Milw County</b>               | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Deputy DA</b>                       | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Angermeier, Robert C</b><br><b>2570 N Bartlett Ave</b><br><b>Milwaukee, WI 53211</b>                       | <b>Name of Employer</b><br><b>self</b>                      | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>attorney</b>                        | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Belfer, Benjamin</b><br><b>330 W 72nd St #3A</b><br><b>New York, NY 10023</b>                              | <b>Name of Employer</b><br><b>United Feather &amp; Down</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>VP</b>                              | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Lacy, William</b><br><b>2503 W Dunwood Rd</b><br><b>Glendale, WI 53209</b>                                 | <b>Name of Employer</b><br><b>MGIC</b>                      | <b>Date (month, day, year)</b><br><b>11/15/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>President/CEO</b>                   | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Zellner, Lou Turner</b><br><b>1105 Highland Dr</b><br><b>Elm Grove, WI 53122</b>                           | <b>Name of Employer</b><br><b>MGIC</b>                      | <b>Date (month, day, year)</b><br><b>11/15/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Senior VP</b>                       | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Davis, Jerri</b><br><b>703 Kings Court</b><br><b>Alexandria, VA 22302</b>                                  | <b>Name of Employer</b>                                     | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Homemaker</b>                       | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Basol, Bulent</b><br><b>1805 Belmont La #B</b><br><b>Redondo Beach, CA 90278</b>                           | <b>Name of Employer</b><br><b>Self</b>                      | <b>Date (month, day, year)</b><br><b>12/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>300.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Engineer</b>                        | <b>Aggregate Year-to-Date</b> > \$ <b>450.00</b>  |  |

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

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

9201402573

## SCHEDULE A

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |   |   |   |
|--|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Madrigrano, Beth B</b><br><b>1220 Aspen Ct</b><br><b>Delafield, WI 53018</b>                         | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Homemaker</b>                              | <b>Date (month, day, year)</b><br><b>12/02/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Sandrich, Linda</b><br><b>2121 Ave of the Stars</b><br><b>9th Fl</b><br><b>Los Angeles, CA 90067</b> | <b>Name of Employer</b><br><b>Freedman Kinzelberg</b><br><br><b>Occupation</b>                    | <b>Date (month, day, year)</b><br><b>12/02/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Stuart, Charles E</b><br><b>222 Smallwood Village Ctr</b><br><b>St Charles, MD 20602</b>             | <b>Name of Employer</b><br><b>Interstate General</b><br><br><b>Occupation</b><br><b>Senior VP</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Kelly, Edwin L</b><br><b>222 Smallwood Village Ctr</b><br><b>St Charles, MD 20602</b>                | <b>Name of Employer</b><br><b>Interstate General</b><br><br><b>Occupation</b><br><b>Senior VP</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Stahr, Jim</b><br><b>One Servicemaster Way</b><br><b>Downers Grove, IL 60515</b>                     | <b>Name of Employer</b><br><b>Servicemaster</b><br><br><b>Occupation</b><br><b>Executive</b>      | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>   |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Retzke, Ronald E</b><br><b>15165 Santa Maria Dr</b><br><b>Brookfield, WI 53005</b>                   | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Info requested</b>                         | <b>Date (month, day, year)</b><br><b>12/02/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Lazich, Sam</b><br><b>1100 S Delphia</b><br><b>Park Ridge, IL 60068</b>                              | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Consultant</b>              | <b>Date (month, day, year)</b><br><b>12/03/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>   |   |   |

SUBTOTAL of Receipts This Page (optional)

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92014402674



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |  |   |  |   |
|--|--|---|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Popovic, Milo<br>604 N Maple<br>Prospect Heights, IL 60070  |  | <b>Name of Employer</b><br>Arpac Corp.      | <b>Date (month, day, year)</b><br>12/03/91<br>12/03/91 | <b>Amount of Each Receipt this Period</b><br>1000.00<br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 1,000 |  | <b>Occupation</b><br>Consultant             |  | <b>Aggregate Year-to-Date</b> > \$ 2000.00                      |
|  |  |   |  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Zivkovic, Dusan<br>1339 Lathrop<br>River Forest, IL 60305   |  | <b>Name of Employer</b><br>Self             | <b>Date (month, day, year)</b><br>12/03/91             | <b>Amount of Each Receipt this Period</b><br>300.00             |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | <b>Occupation</b><br>Physician              |  | <b>Aggregate Year-to-Date</b> > \$ 300.00                       |
|  |  |   |  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Dragisic, B M<br>7849 Forest Hill Rd<br>Burr Ridge, IL 60525  |  | <b>Name of Employer</b><br>Self             | <b>Date (month, day, year)</b><br>12/03/91             | <b>Amount of Each Receipt this Period</b><br>500.00             |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | <b>Occupation</b><br>Physician              |  | <b>Aggregate Year-to-Date</b> > \$ 500.00                       |
|  |  |   |  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Cupic, Milorad<br>95 Graymoor La<br>Olympia Fields, IL 60461  |  | <b>Name of Employer</b><br>Mercy Hospital   | <b>Date (month, day, year)</b><br>12/03/91<br>12/04/91 | <b>Amount of Each Receipt this Period</b><br>500.00<br>500.00   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | <b>Occupation</b><br>Physician              |  | <b>Aggregate Year-to-Date</b> > \$ 1000.00                      |
|  |  |   |  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Cemovich, Predrag<br>1451 Golden Bell Ct<br>Downers Grove, IL 60515   |  | <b>Name of Employer</b>                     | <b>Date (month, day, year)</b><br>12/03/91             | <b>Amount of Each Receipt this Period</b><br>250.00             |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | <b>Occupation</b><br>Retired                |  | <b>Aggregate Year-to-Date</b> > \$ 250.00                       |
|  |  |   |  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Ozegovic, Djordje<br>705 N Jay St<br>Griffith, IN 46319   |  | <b>Name of Employer</b>                     | <b>Date (month, day, year)</b><br>12/03/91             | <b>Amount of Each Receipt this Period</b><br>250.00             |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | <b>Occupation</b><br>Info requested         |  | <b>Aggregate Year-to-Date</b> > \$ 250.00                       |
|  |  |   |  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Trine, William A<br>501 Aurora Ave<br>Boulder, CO   |  | <b>Name of Employer</b><br>Williams & Trine | <b>Date (month, day, year)</b><br>12/03/91             | <b>Amount of Each Receipt this Period</b><br>250.00             |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | <b>Occupation</b><br>Attorney               |  | <b>Aggregate Year-to-Date</b> > \$ 250.00                       |
|  |  |   |  |   |

SUBTOTAL of Receipts This Page (optional)

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |   |
|---|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Rogers, Mark J</b><br><b>12020 W Elmwood Dr</b><br><b>Franklin, WI 53132</b>          | <b>Name of Employer</b><br><b>Angermeier &amp; Rogers</b>                                     | <b>Date (month, day, year)</b><br><b>12/03/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>          |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Schlosser, John C</b><br><b>9528 W Brookside Dr</b><br><b>Greenfield, WI 53228</b>    | <b>Name of Employer</b>   | <b>Date (month, day, year)</b><br><b>12/03/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Info requested</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>    |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Forman, Martin</b><br><b>10252 N Range Line Rd</b><br><b>Mequon, WI 53092</b>         | <b>Name of Employer</b><br><b>Forman Metal</b>  | <b>Date (month, day, year)</b><br><b>12/03/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Owner</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>             |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Popovic, Predrag</b><br><b>6630 N Spokane</b><br><b>Lincolnwood, IL 60646</b>         | <b>Name of Employer</b><br><b>Wiss, Janney, Elstn</b>   | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Exec Engineer</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>     |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Vucicevic, Slobodan D</b><br><b>5131 Clausen</b><br><b>Western Springs, IL 60558</b>  | <b>Name of Employer</b><br><b>Self</b>  | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>         |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Andre, Paul M</b><br><b>100 Douglas Ct</b><br><b>Hoffman Estates, IL 60134</b>        | <b>Name of Employer</b><br><b>A.B.E. Ltd.</b>   | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>V.P.-Engineering</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b> |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Brogan, John C</b><br><b>824 Emilie St</b><br><b>Green Bay, WI 54301</b>              | <b>Name of Employer</b><br><b>Brogan Bankshires</b>   | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Banker</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>            |   |   |

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

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

92014402376

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 29 OF 68  
FOR LINE NUMBER 11 (a)

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)  
**FRIENDS OF JIM MOODY #C00150813**

|   |  |   |   |  |
|---|--|---|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Erdman, Joyce</b><br><b>3408 Circle Close</b><br><b>Madison, WI 53705</b>             |  | <b>Name of Employer</b><br><br><b>Occupation</b><br><i>Info requested</i> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>                          |   |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Mentkowski, James C</b><br><b>700 E Day Ave</b><br><b>Whitefish Bay, WI 53217</b>     |  | <b>Name of Employer</b><br><b>Self</b>                                    | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br><b>Attorney</b>                                      |   |  |
|   |  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                          |   |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Greene, Browne</b><br><b>100 Wilshire Blvd</b><br><b>Santa Monica, CA 90401</b>       |  | <b>Name of Employer</b><br><b>Greene, Broillet, T</b>                     | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br><b>Attorney</b>                                      |   |  |
|   |  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                          |   |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Boskovic, Borislav</b><br><b>2102 Bannockburn</b><br><b>Inverness, IL 60067</b>       |  | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Retired</b>        | <b>Date (month, day, year)</b><br><b>12/05/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                          |   |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Stefanovich, Zoran</b><br><b>1520 Oakton</b><br><b>Park Ridge, IL 60068</b>           |  | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Retired</b>        | <b>Date (month, day, year)</b><br><b>12/05/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>                          |   |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Matovic, Desanka</b><br><b>2742 W Estes Ave</b><br><b>Chicago, IL 60645</b>           |  | <b>Name of Employer</b><br><b>Self</b>                                    | <b>Date (month, day, year)</b><br><b>12/05/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br><b>Physician</b>                                     |   |  |
|   |  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>                          |   |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Smolens, H M</b><br><b>2100 Pacific Ave</b><br><b>San Francisco, CA 94115</b>         |  | <b>Name of Employer</b><br><br><b>Occupation</b><br><i>Info requested</i> | <b>Date (month, day, year)</b><br><b>12/05/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>                          |   |  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402677

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 30 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |  |   |  |
|---|--|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Wallach, Jeffrey D</b><br><b>326 W Ravine Baye Rd</b><br><b>Bayside, WI 53217</b>     | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Physician</b>                             | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>   |   |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Wojcik, Walt J</b><br><b>W304 S1804 Brandybrook Rd</b><br><b>Waukesha, WI 53188</b>   | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Info requested</b>                        | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>   |   |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Gaynor, Lilliana V</b><br><b>1110 Lake Shore Dr</b><br><b>Chicago, IL 60611</b>       | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Homemaker</b>                             | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>   |   |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Djurisic, Ilija</b><br><b>1149 Barneswood Dr</b><br><b>Downers Grove, IL 60515</b>    | <b>Name of Employer</b><br><b>Great Lakes Paper</b><br><br><b>Occupation</b><br><b>Executive</b> | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>   |   |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Radonjic, Borka</b><br><b>161 Ridgewood Rd</b><br><b>Riverside, IL 60546</b>          | <b>Name of Employer</b><br><b>Good Samaritan</b><br><br><b>Occupation</b><br><b>Physician</b>    | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>   |   |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Madrigrano, Glenn</b><br><b>4709 83rd Pl</b><br><b>Kenosha, WI 53142</b>              | <b>Name of Employer</b><br><b>MNS Distributing</b><br><br><b>Occupation</b><br><b>Executive</b>  | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>   |   |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Madrigrano, Gene</b><br><b>8245 42nd Ave</b><br><b>Kenosha, WI 53142</b>              | <b>Name of Employer</b><br><b>MNS Distributing</b><br><br><b>Occupation</b><br><b>V.P.</b>       | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>   |   |  |

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

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

92014402678

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

A. Full Name, Mailing Address and ZIP Code

Pfarr, Donald Jr  
4310 Harrison Rd  
Kenosha, WI 53142

Name of Employer

Date (month,  
day, year)  
12/06/91

Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Info requested

Aggregate Year-to-Date > \$ 250.00

B. Full Name, Mailing Address and ZIP Code

Gagliardi, Paul  
29420 41st St  
Salem, WI 53168

Name of Employer

Date (month,  
day, year)  
12/06/91

Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Info requested

Aggregate Year-to-Date > \$ 250.00

C. Full Name, Mailing Address and ZIP Code

Slota, Thomas  
2350 W Villard Ave #104  
Milwaukee, WI 53209

Name of Employer

Self

Date (month,  
day, year)  
12/06/91

Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Physician

Aggregate Year-to-Date > \$ 250.00

D. Full Name, Mailing Address and ZIP Code

Wallace, Judy  
1150 E Standish  
Milwaukee, WI 53217

Name of Employer

Date (month,  
day, year)  
12/06/91

Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Homemaker

Aggregate Year-to-Date > \$ 250.00

E. Full Name, Mailing Address and ZIP Code

Lund, Michael J  
2008 Wauwatosa Ave  
Wauwatosa, WI 53213

Name of Employer

Frisch, Dudek

Date (month,  
day, year)  
12/06/91

Amount of Each  
Receipt this Period  
250.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date > \$ 250.00

F. Full Name, Mailing Address and ZIP Code

Olender, Jack H  
2500 Virginia Ave NW  
Washington, DC 20037

Name of Employer

Self

Date (month,  
day, year)  
12/06/91

Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date > \$ 500.00

G. Full Name, Mailing Address and ZIP Code

Pavlovic, Zivojin S  
1045 N Euclid  
Oak Park, IL 60302

Name of Employer

Self

Date (month,  
day, year)  
12/06/91

Amount of Each  
Receipt this Period  
500.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Physician

Aggregate Year-to-Date > \$ 500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402679

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |   |
|---|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Janicijevic, Nenad</b><br><b>5068 Sherwood Rd</b><br><b>Bethel Park, PA 15102</b>     | <b>Name of Employer</b><br><b>Medi-Help Medical C</b> | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Physicians</b>                | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Fish, Frederick S</b><br><b>10 E Palisade Ave</b><br><b>Englewood, NJ 07631</b>       | <b>Name of Employer</b><br><b>Self</b>                | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Investments</b>               | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Lewin, Paul</b><br><b>PO Box 35460</b><br><b>Miami, FL 33135</b>                      | <b>Name of Employer</b><br>                           | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Attorney</b>                  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Havenick, Fred</b><br><b>PO Box 350460</b><br><b>Miami, FL 33135 0460</b>             | <b>Name of Employer</b><br><b>Self</b>                | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Attorney</b>                  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Boxer, Vicki</b><br><b>229 W Indian Creek Ct</b><br><b>Fox Point, WI 53217</b>        | <b>Name of Employer</b><br>                           | <b>Date (month, day, year)</b><br><b>12/10/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Homemaker</b>                 | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Bresich, Zagorka</b><br><b>400 E Randolph #3303</b><br><b>Chicago, IL 60601</b>       | <b>Name of Employer</b><br><b>Self</b>                | <b>Date (month, day, year)</b><br><b>12/10/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Physician</b>                 | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Appel, Steven J</b><br><b>10105 N Range Line Rd</b><br><b>Mequon, WI 53092</b>        | <b>Name of Employer</b><br>                           | <b>Date (month, day, year)</b><br><b>12/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Info requested</b>            | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |   |

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

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

00011402600

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |   |  |  |
|---|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Madrigrano, Thomas A<br>W337 S5069 Chipmunk Ln<br>Dousman, WI 53118                      | <b>Name of Employer</b><br>WOW Distributing                                       | <b>Date (month, day, year)</b><br>12/12/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Executive<br><b>Aggregate Year-to-Date</b> > \$ 250.00       |  |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Weiss, A.L.<br>606 W Wisconsin Ave<br>Milwaukee, WI 53203                                | <b>Name of Employer</b>   | <b>Date (month, day, year)</b><br>12/13/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Info requested<br><b>Aggregate Year-to-Date</b> > \$ 250.00  |  |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Smith, Bernard<br>10456 Longwood Dr<br>Chicago, IL 60643                                 | <b>Name of Employer</b><br>Self   | <b>Date (month, day, year)</b><br>12/13/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Physician<br><b>Aggregate Year-to-Date</b> > \$ 1000.00      |  |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Dogru, Haluk<br>345 St Joseph St #306<br>New Orleans, LA 70130                           | <b>Name of Employer</b>   | <b>Date (month, day, year)</b><br>12/13/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Info requested<br><b>Aggregate Year-to-Date</b> > \$ 1000.00 |  |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Vijuk, Michael<br>715 Church Rd<br>Elmhurst, IL 60126                                    | <b>Name of Employer</b>   | <b>Date (month, day, year)</b><br>12/13/91 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Retired<br><b>Aggregate Year-to-Date</b> > \$ 500.00         |  |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Kritzik, Stanley<br>1530 W Cedar La<br>Milwaukee, WI 53217                               | <b>Name of Employer</b>   | <b>Date (month, day, year)</b><br>12/13/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Info requested<br><b>Aggregate Year-to-Date</b> > \$ 250.00  |  |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Haddad, William F<br>Manor Rd<br>Patterson, NY 12563                                     | <b>Name of Employer</b><br>Shein Pharmaceutica                                    | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Vice-Chairman<br><b>Aggregate Year-to-Date</b> > \$ 500.00   |  |  |
| <b>SUBTOTAL of Receipts This Page (optional)</b>  |   |  |  |
| <b>TOTAL This Period (last page this line number only)</b>  |   |  |  |

9201402581

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Varis, Agnes<br>34 Hidden Ledge Rd<br>Englewood, NJ 07631                                   | <b>Name of Employer</b><br>Agvar Chemicals, Inc | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Exec                       | <b>Aggregate Year-to-Date</b> > \$ 500.00  | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Patterson, Arthur C<br>1107 5th Ave<br>New York, NY 10128                                   | <b>Name of Employer</b><br>Self                 | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>200.00  |
| <b>Receipt For:</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                   | <b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Amount of Each Receipt this Period</b><br>300.00  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Dimbiloglu, M Ekrem<br>242 North Ave<br>Battle Creek, MI 49017                              | <b>Name of Employer</b><br>Self                 | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>400.00  |
| <b>Receipt For:</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Physician                  | <b>Aggregate Year-to-Date</b> > \$ 400.00  | <b>Amount of Each Receipt this Period</b><br>300.00  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Onder, Baha<br>35608 Johnstown Rd<br>Farmington Hills, MI 48335                             | <b>Name of Employer</b><br>Self                 | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>200.00  |
| <b>Receipt For:</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Physician                  | <b>Aggregate Year-to-Date</b> > \$ 300.00  | <b>Amount of Each Receipt this Period</b><br>200.00  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Bjelobrk, Bogdanka<br>5581 Mandale Dr<br>Troy, MI 48098                                     | <b>Name of Employer</b><br>Info requested       | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Info requested             | <b>Aggregate Year-to-Date</b> > \$ 500.00  | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Dimitrijevic, Rodoljub<br>3361 Chikering La<br>Bloomfield Hills, MI 48013                   | <b>Name of Employer</b><br>Info requested       | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Info requested             | <b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Chelovich, Peter V<br>117 Marblehead Dr<br>Bloomfield Hills, MI 48304                       | <b>Name of Employer</b><br>Info requested       | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b><br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Info requested             | <b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>SUBTOTAL of Receipts This Page (optional)</b> .....   |   |  |  |
| <b>TOTAL This Period (last page this line number only)</b> .....   |   |  |  |

92014102582



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER  
**11 (a)**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |   |
|--|---|---|---|
| <p><b>A. Full Name, Mailing Address and ZIP Code</b><br/> <b>Radulovich, Sue</b><br/> <b>535 Hampton Rd</b><br/> <b>Grosse Pointe, MI 48236</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                                  | <p>Name of Employer</p> <p>Occupation<br/> <b>Homemaker</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>                             | <p>Date (month, day, year)<br/> <b>12/17/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>B. Full Name, Mailing Address and ZIP Code</b><br/> <b>Vukas, Walter</b><br/> <b>1035 Cadieux</b><br/> <b>Grosse Pointe Park, MI 48230</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                                 | <p>Name of Employer</p> <p>Occupation<br/> <b>Retired</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>500.00</b></p>                               | <p>Date (month, day, year)<br/> <b>12/17/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>500.00</b></p>  |
| <p><b>C. Full Name, Mailing Address and ZIP Code</b><br/> <b>Birach, Sima</b><br/> <b>Tower 14, Ste 1190</b><br/> <b>21700 Northwestern Hwy</b><br/> <b>Southfield, MI 48075</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation<br/> <b>Info requested</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>500.00</b></p>                        | <p>Date (month, day, year)<br/> <b>12/17/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>500.00</b></p>  |
| <p><b>D. Full Name, Mailing Address and ZIP Code</b><br/> <b>Radovic, Milorad</b><br/> <b>12364 27 Mile Rd</b><br/> <b>Washington, MI 48094</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                                  | <p>Name of Employer<br/> <b>Utica Rack</b></p> <p>Occupation<br/> <b>Engineer</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>       | <p>Date (month, day, year)<br/> <b>12/17/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>250.00</b></p>  |
| <p><b>E. Full Name, Mailing Address and ZIP Code</b><br/> <b>Field, Frederick W</b><br/> <b>10900 Wilshire Blvd #1400</b><br/> <b>Los Angeles, CA 90024</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                      | <p>Name of Employer<br/> <b>Interscope Grp</b></p> <p>Occupation<br/> <b>President</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>1000.00</b></p> | <p>Date (month, day, year)<br/> <b>12/17/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>1000.00</b></p> |
| <p><b>F. Full Name, Mailing Address and ZIP Code</b><br/> <b>Ozmon, Laird M</b><br/> <b>13490 S Redberry Cir</b><br/> <b>Plainfield, IL 60544</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                                | <p>Name of Employer<br/> <b>Self</b></p> <p>Occupation<br/> <b>Attorney</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>500.00</b></p>             | <p>Date (month, day, year)<br/> <b>12/17/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>500.00</b></p>  |
| <p><b>G. Full Name, Mailing Address and ZIP Code</b><br/> <b>Nikolic, Bogoljub</b><br/> <b>43252 Merrill Rd</b><br/> <b>Sterling Heights, MI 48078</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify):</p>                           | <p>Name of Employer<br/> <b>Light Robotics</b></p> <p>Occupation<br/> <b>Owner</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>400.00</b></p>      | <p>Date (month, day, year)<br/> <b>12/17/91</b></p> | <p>Amount of Each Receipt this Period<br/> <b>400.00</b></p>  |

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

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

92014402583

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary PagePAGE OF  
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FOR LINE NUMBER  
11 (a)

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NAME OF COMMITTEE (in Full)  
FRIENDS OF JIM MOODY #C00150813

|  |  |  |
|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Aygun, Cengiz</b><br><b>812 Bellemore Rd</b><br><b>Baltimore, MD 21210</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                           | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Physician</b><br>Aggregate Year-to-Date > \$ 1000.00                   | <b>Date (month, day, year)</b><br><b>12/17/91</b><br><br><b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Rajic, Fedor</b><br><b>320 S. 2nd Street</b><br><b>Livingston, MT</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Managem't Consult.</b><br>Aggregate Year-to-Date > \$ 1000.00          | <b>Date (month, day, year)</b><br><b>12/17/91</b><br><br><b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Bobb, Patricia C</b><br><b>Three First Nat'l Plaza</b><br><b>Ste 660</b><br><b>Chicago, IL 60602</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ 350.00                                | <b>Date (month, day, year)</b><br><b>12/18/91</b><br><br><b>Amount of Each Receipt this Period</b><br><b>350.00</b>  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Guthman, Jack</b><br><b>230 E Delaware Pl</b><br><b>Chicago, IL 60611</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                            | <b>Name of Employer</b><br><b>Sidney &amp; Austin</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ 250.00      | <b>Date (month, day, year)</b><br><b>12/18/91</b><br><br><b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Lavin, Terrence J</b><br><b>9916 S Hamilton</b><br><b>Chicago, IL 60643</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                          | <b>Name of Employer</b><br><b>Power, Roger &amp; Lavi</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>12/18/91</b><br><br><b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Mullen, John C</b><br><b>Three First Nat'l Plaza</b><br><b>Ste 2700</b><br><b>Chicago, IL 60602</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ 500.00                     | <b>Date (month, day, year)</b><br><b>12/18/91</b><br><br><b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Kautz, James C</b><br><b>251 Oak Ridge Ave</b><br><b>Summit, NJ 07901</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                            | <b>Name of Employer</b><br><b>Goldman Salley</b><br><br><b>Occupation</b><br><b>Executive</b><br>Aggregate Year-to-Date > \$ 500.00          | <b>Date (month, day, year)</b><br><b>12/18/91</b><br><br><b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 37 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |
|---|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Gifford, Geoffrey L<br>834 W George<br>Chicago, IL 60657   | <b>Name of Employer</b><br>Pavalon & Gifford                                     | <b>Date (month, day, year)</b><br>12/18/91<br>12/18/91 | <b>Amount of Each Receipt this Period</b><br>500.00<br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1000 500 | <b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 1500.00      |  |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Power, Joseph A Jr<br>344 W Wellington Ave<br>Chicago, IL 60657  | <b>Name of Employer</b><br>Powers, Rogers & La                                   | <b>Date (month, day, year)</b><br>12/18/91             | <b>Amount of Each Receipt this Period</b><br>1000.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 1000.00      |  |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Wigmore, Deedee<br>1 W 72nd St<br>New York, NY 10023   | <b>Name of Employer</b><br>Self  | <b>Date (month, day, year)</b><br>12/18/91             | <b>Amount of Each Receipt this Period</b><br>1000.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Occupation</b><br>Art Dealer<br><b>Aggregate Year-to-Date</b> > \$ 1000.00    |  |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Murray, John D<br>W3895 Highview Dr<br>Appleton, WI 54915  | <b>Name of Employer</b><br>Habush, Habush & Da                                   | <b>Date (month, day, year)</b><br>12/18/91             | <b>Amount of Each Receipt this Period</b><br>500.00            |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Occupation</b><br>Trial Attorney<br><b>Aggregate Year-to-Date</b> > \$ 500.00 |  |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Hilfman, Louis<br>20 N Clark<br>Chicago, IL 60602  | <b>Name of Employer</b><br>Hilfman & Fugel                                       | <b>Date (month, day, year)</b><br>12/18/91             | <b>Amount of Each Receipt this Period</b><br>500.00            |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 500.00       |  |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Cueto, Amiel<br>101 S 1st<br>Belleville, IL 62222  | <b>Name of Employer</b><br>Cueto, Cueto & Cueto                                  | <b>Date (month, day, year)</b><br>12/18/91             | <b>Amount of Each Receipt this Period</b><br>1000.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 1000.00      |  |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Rogers, Larry R<br>405 N Wabash #4511<br>Chicago, IL 60611   | <b>Name of Employer</b><br>Power, Rodgers & La                                   | <b>Date (month, day, year)</b><br>12/18/91             | <b>Amount of Each Receipt this Period</b><br>1000.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 1000.00      |  |  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

5 9 2 6 0 2 4 1 0 0 2 5

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE **38** OF **68**  
FOR LINE NUMBER  
**11 (a)**

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)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |   |   |
|--|--|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Clifford, Robert A</b><br><b>2 N La Salle St</b><br><b>Chicago, IL 60602</b>           | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>      |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Miller, Jeffrey D</b><br><b>4 E 95th St</b><br><b>New York, NY 10128</b>               | <b>Name of Employer</b><br><b>Miller, Tabak Hirsch</b>                                     | <b>Date (month, day, year)</b><br><b>12/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Executive</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>     |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Zeps, Aivars A</b><br><b>929 N Astor St #701</b><br><b>Milwaukee, WI 53202</b>         | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>      |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Zeps, Mara</b><br><b>929 N Astor</b><br><b>Milwaukee, WI 53202</b>                     | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Homemaker</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>      |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Keesal, Elizabeth</b><br><b>4 Portuguese Bend Rd</b><br><b>Rolling Hills, CA 90274</b> | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Homemaker</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>     |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Rusnack, William C</b><br><b>1203 Patton Way</b><br><b>San Marino, CA 91108</b>        | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Info requested</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b> |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Henley, Jane F</b><br><b>440 N Rose Lane</b><br><b>Haverford, PA 19041</b>             | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Occupation</b><br><b>Homemaker</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>     |   |   |

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

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

20011102696

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 39 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |
|---|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Henley, Kenneth<br>440 N Rose Lane<br>Haverford, PA 19041                                | <b>Name of Employer</b><br><br><b>Occupation</b><br>Info requested           | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                   |  |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Abert, Grant D<br>RR 1 Box 1288<br>Readstown, WI 54652                                   | <b>Name of Employer</b><br>Self<br><br><b>Occupation</b><br>Investor         | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                   |  |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Ward, Nancy<br>RR 1 Box 1288<br>Readstown, WI 54652                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                   |  |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Spence, Russell M<br>R. R. 2<br>Spring Valley, WI 54767                                  | <b>Name of Employer</b><br><br><b>Occupation</b><br>Info requested           | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 250.00                                    |  |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Ricci, Edward M<br>5165 Woodland Lakes Drive<br>Palm Beach Gardens, FL 33418             | <b>Name of Employer</b><br>Self<br><br><b>Occupation</b><br>Attorney         | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                   |  |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Bernstein, Audrey<br>225 W Nokomis Ct<br>Milwaukee, WI 53217                             | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker                | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 1000.00                                   |  |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Samardzija, Peter<br>1622 Volbrecht Ct<br>South Holland, IL 60473 3639                   | <b>Name of Employer</b><br>Gremp Steel<br><br><b>Occupation</b><br>President | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Aggregate Year-to-Date</b> > \$ 500.00                                    |  |  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402637

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

PAGE 40 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |   |   |   |
|--|---|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code<br/>Broydrick, Bill<br/>2929 N Shepard<br/>Milwaukee, WI 53211</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>          | <p>Name of Employer<br/>Self</p> <p>Occupation<br/>Consultant</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>               | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>1000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code<br/>Athens, Thomas<br/>1106 Hibbard Rd<br/>Wilmette, IL 60091</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>           | <p>Name of Employer<br/>Self</p> <p>Occupation<br/>Investor</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>                  | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>C. Full Name, Mailing Address and ZIP Code<br/>Hafif, Herb<br/>265 W Bonita Ave<br/>Claremont, CA 91711</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>            | <p>Name of Employer<br/>Self</p> <p>Occupation<br/>Developer</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>                | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>1000.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code<br/>Bandler, Ned W<br/>390 Park Ave<br/>New York, NY 10022</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>              | <p>Name of Employer<br/>Unilever U.S. Inc.</p> <p>Occupation<br/>Senior V.P.</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p> | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p>  |
| <p>E. Full Name, Mailing Address and ZIP Code<br/>Tobin, Bruce D<br/>221 Roastmeat Hill Rd<br/>Killingworth, CT 06419</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p> | <p>Name of Employer<br/>Pierce Kennedy Heams</p> <p>Occupation<br/>Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p> | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>1000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code<br/>Maier, Louis A III<br/>9862 N Range Line Rd<br/>Mequon, WI 53092</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>    | <p>Name of Employer</p> <p>Occupation<br/>Info requested</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>                     | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>G. Full Name, Mailing Address and ZIP Code<br/>Gordon, Milton<br/>716 Dill Road<br/>Severna Park, MD 21146</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>         | <p>Name of Employer</p> <p>Occupation<br/>Info requested</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>                    | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>1000.00</p> |

SUBTOTAL of Receipts This Page (optional)

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92014402583

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 41 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |   |
|---|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Cohen, Carl I</b><br><b>9084 Dewberry Court</b><br><b>Indianapolis, IN 46260</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Name of Employer</b><br><br><b>Occupation</b><br><i>Info requested</i><br><b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>                              | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Gray, Barbara</b><br><b>PO Box 3958</b><br><b>Missoula, MT 59806</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Homemaker</b><br><b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                                    | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Athens, Andrew</b><br><b>1106 Hibbard Road</b><br><b>Wilmette, IL 60091</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Name of Employer</b><br><br><b>Occupation</b><br><i>Info requested</i><br><b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>                               | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Cayir, Ali</b><br><b>512 Brower Ave</b><br><b>Placentia, CA 92670</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):               | <b>Name of Employer</b><br><br><b>Occupation</b><br><i>Info requested</i><br><b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>                              | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Schmidt, K Peter</b><br><b>1200 New Hampshire</b><br><b>Washington, DC 20036</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                      | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Good, Ned</b><br><b>70 S Lake Ave #600</b><br><b>Pasadena, CA 91101 2601</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                      | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Ozbek, Sahver</b><br><b>108 Kingwood Park</b><br><b>Poughkeepsie, NY 12601 5407</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>Hudson River Psyc Center</b><br><br><b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date</b> > \$ <b>250.00</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |

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

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

92014402689

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

PAGE 42 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |   |   |  |
|--|---|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code<br/>O'Connor, Kevin D<br/>100 E Wisconsin Avenue<br/>Suite 1200<br/>Milwaukee, WI 53202</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p> | <p>Name of Employer<br/>Norwest Invest. Serv.</p> <p>Occupation<br/>Vice President</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p> | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code<br/>Higgins, Lawrence P<br/>12805 Horseshoe Rd<br/>Tampa, FL 33624</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                      | <p>Name of Employer<br/>Self</p> <p>Occupation<br/>Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                        | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code<br/>Joldzic, Bogdan<br/>20 California Ave<br/>Paterson, NJ 07503</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                        | <p>Name of Employer</p> <p>Occupation<br/>Info requested</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                           | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code<br/>Goldberg, Jeffrey M<br/>20 N Clark No. 3100<br/>Chicago, IL 60602</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                   | <p>Name of Employer</p> <p>Occupation<br/>Info requested</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                           | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code<br/>Fogel, Robert L<br/>554 W Eugene<br/>Chicago, IL 60614</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                              | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>  | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code<br/>Bluestone, Stanton J<br/>4724 N Wilshire Dr<br/>Whitefish Bay, WI 53211</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>             | <p>Name of Employer</p> <p>Occupation<br/>Info requested</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                           | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code<br/>Metz, James S<br/>11214 Tynewold<br/>Houston, TX 77024</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                              | <p>Name of Employer<br/>Self</p> <p>Occupation<br/>Investor</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                        | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p> |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402690



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 43 OF 68  
FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |   |   |   |
|---|---|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code<br/>Klein, Michael L<br/>500 W Texas<br/>Suite 1230<br/>Midland, TX 79701 4271</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p> | <p>Name of Employer<br/><br/>Occupation<br/>Info requested</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                     | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p>  |
| <p>B. Full Name, Mailing Address and ZIP Code<br/>Mattone, Vincent<br/>245 Park Ave<br/>New York, NY 10167</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                   | <p>Name of Employer<br/>Bear, Stearns &amp; Co</p> <p>Occupation<br/>Executive</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p> | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p>  |
| <p>C. Full Name, Mailing Address and ZIP Code<br/>Johnson, Steven L<br/>1607 Stardust Dr<br/>Waukesha, WI 53186</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>              | <p>Name of Employer<br/><br/>Occupation<br/>Info requested</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>                     | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>D. Full Name, Mailing Address and ZIP Code<br/>Gallagher, Michael L<br/>1400 N 113th<br/>Wauwatosa, WI 53226</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>              | <p>Name of Employer<br/>Miller Brands</p> <p>Occupation<br/>VP</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>                 | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>E. Full Name, Mailing Address and ZIP Code<br/>Licht, Richard A<br/>One Park Row<br/>Providence, RI 02903</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                 | <p>Name of Employer<br/>Licht &amp; Semonoff</p> <p>Occupation<br/>Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>    | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>250.00</p>  |
| <p>F. Full Name, Mailing Address and ZIP Code<br/>Spence, JB<br/>2950 SW 27th Ave #300<br/>Miami, FL 33133</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>                   | <p>Name of Employer<br/>Self</p> <p>Occupation<br/>Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>                    | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>500.00</p>  |
| <p>G. Full Name, Mailing Address and ZIP Code<br/>Cloherty, Patricia M<br/>155 Main St<br/>Cold Spring, NY 10516</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>             | <p>Name of Employer<br/><br/>Occupation<br/>Homemaker</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>                         | <p>Date (month, day, year)<br/>12/30/91</p> | <p>Amount of Each Receipt this Period<br/>1000.00</p> |

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

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

9201402391

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER  
**11 (a)**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

A. Full Name, Mailing Address and ZIP Code

**Hoyt, John C**  
**PO Box 2807**  
**Great Falls, MT 59403**

Name of Employer

**Hoyt & Blewett**

Date (month,  
day, year)

**12/30/91**

Amount of Each  
Receipt this Period

**300.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Attorney**

Aggregate Year-to-Date > \$ **300.00**

B. Full Name, Mailing Address and ZIP Code

**Berman, Jason**  
**1020 19th St NW**  
**Ste 200**  
**Washington, DC 20036**

Name of Employer

**RIAA**

Date (month,  
day, year)

**12/30/91**

Amount of Each  
Receipt this Period

**500.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**President**

Aggregate Year-to-Date > \$ **500.00**

C. Full Name, Mailing Address and ZIP Code

**Newmyer, AG III**  
**1220 L St NW**  
**Ste 425**  
**Washington, DC 20005**

Name of Employer

Date (month,  
day, year)

**12/30/91**

Amount of Each  
Receipt this Period

**500.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ **500.00**

D. Full Name, Mailing Address and ZIP Code

**Schaefer, Philip A**  
**Citicorp Ctr**  
**One Sansome St**  
**San Francisco, CA 94104**

Name of Employer

**Bear, Stearns & Co**

Date (month,  
day, year)

**12/30/91**

Amount of Each  
Receipt this Period

**500.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Exec**

Aggregate Year-to-Date > \$ **500.00**

E. Full Name, Mailing Address and ZIP Code

**Manatt, Charles T**  
**1200 New Hampshire Ave. N.W.**  
**Washington, DC 20036**

Name of Employer

**Manatt, Phelps, Phi**

Date (month,  
day, year)

**12/30/91**

Amount of Each  
Receipt this Period

**300.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Attorney**

Aggregate Year-to-Date > \$ **300.00**

F. Full Name, Mailing Address and ZIP Code

**Bagley, Smith**  
**1425 21st St NW**  
**Washington, DC 20036**

Name of Employer

Date (month,  
day, year)

**12/30/91**

Amount of Each  
Receipt this Period

**1000.00**

Receipt For:

☒ Primary

☒ General

☐ Other (specify):

**1,000**

**1,000**

Occupation

**Philanthropist**

Aggregate Year-to-Date > \$ **2000.00**

G. Full Name, Mailing Address and ZIP Code

**Aker, Umit T**  
**226 Chamonix Ct**  
**St Louis, MO 63131 2320**

Name of Employer

**Self**

Date (month,  
day, year)

**12/30/91**

Amount of Each  
Receipt this Period

**500.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Physician**

Aggregate Year-to-Date > \$ **500.00**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9 2 0 1 4 4 0 2 5 9 2

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 45 OF 68  
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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Sites, John C Jr</b><br><b>850 Park Ave</b><br><b>New York, NY 10021</b>   | <b>Name of Employer</b><br><br><b>Occupation</b><br><i>Info requested</i>                              | <b>Date (month, day, year)</b><br><b>12/30/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      |  | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>                    |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Johnson, W Dudley</b><br><b>2315 N Lake Dr Ste 1007</b><br><b>Milwaukee, WI 53211</b>                                      | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Physician</b>                    | <b>Date (month, day, year)</b><br><b>12/19/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      |  | <b>Aggregate Year-to-Date</b> > \$ <b>600.00</b>                     |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Woodmansee, Winifred</b><br><b>1500 E Brown Deer Rd</b><br><b>Milwaukee, WI 53217</b>                                      | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Homemaker</b>                                   | <b>Date (month, day, year)</b><br><b>11/25/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>125.00</b>                    |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      |  | <b>Aggregate Year-to-Date</b> > \$ <b>225.00</b>                     |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Coleman, William B</b><br><b>1333 W Paradise Ct</b><br><b>Glendale, WI 53209-</b>  | <b>Name of Employer</b><br><b>Coleman &amp; Williams</b><br><br><b>Occupation</b><br><b>accountant</b> | <b>Date (month, day, year)</b><br><b>12/06/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                    |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      |  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>                     |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Aygun, Mehtap</b><br><b>301 St Paul Pl</b><br><b>Baltimore, MD 21202-</b>  | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Physician</b>                    | <b>Date (month, day, year)</b><br><b>12/30/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>1,000</b> <b>1,000</b> |  | <b>Aggregate Year-to-Date</b> > \$ <b>2000.00</b>                    |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Frautschi, Pamela H</b><br><b>2430 E. Newberry Boulevard</b><br><b>Milwaukee, WI 53211-</b>                                | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Info requested</b>                              | <b>Date (month, day, year)</b><br><b>12/06/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                    |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      |  | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>                     |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Kovacevich, Iriney</b><br><b>Box 371</b><br><b>Grayslake, IL 60631-</b>  | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Clergyman</b>                                   | <b>Date (month, day, year)</b><br><b>12/12/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      |  | <b>Aggregate Year-to-Date</b> > \$ <b>600.00</b>                     |   |

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

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

9201402693

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |  |   |  |
|--|--|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Isik, Mefharet</b><br><b>370 N Civic Dr #203</b><br><b>Walnut Creek, CA 94596</b>        | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>50.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Practical Nurse</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>  |   |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Knapp, Rebecca</b><br><b>5803 W Washington Blvd</b><br><b>Milwaukee, WI 53208-</b>       | <b>Name of Employer</b><br><b>United Health, Inc</b>   | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Health Care</b><br><b>Aggregate Year-to-Date &gt; \$ 350.00</b>      |   |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Kresovic, Ljubica</b><br><b>5790 S 27th St</b><br><b>Milwaukee, WI 53221</b>             | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Retired</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>          |   |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Okutan, Abdullah</b><br><b>4475 Habersham La S</b><br><b>Richmond Heights, IN 44143-</b> | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>50.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Retired</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>          |   |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Pikula, Jan</b><br><b>5457 S Lake Drive</b><br><b>Cudahy, WI 53110-</b>                  | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>09/28/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Retired</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>          |   |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Polat, Asuman</b><br><b>50 Central Park West</b><br><b>New York, NY 10023-</b>           | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>300.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Fashion Designer</b><br><b>Aggregate Year-to-Date &gt; \$ 800.00</b> |   |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Eris, Eve M</b><br><b>1415 N Colchester Pl</b><br><b>Agoura, CA 91301</b>                | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Homemaker</b><br><b>Aggregate Year-to-Date &gt; \$ 400.00</b>        |   |  |

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

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92014402694

## SCHEDULE A

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Dirksen, Roger G<br>926 E Circle Dr<br>Milwaukee, WI 53217-                                   | <b>Name of Employer</b><br>Associated Commerce | <b>Date (month, day, year)</b><br>11/21/91 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br>Pres/CEO                  | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Seckin, Tamer A<br>8524 10th Avenue<br>Brooklyn, NY 11228-                                    | <b>Name of Employer</b><br>Self                | <b>Date (month, day, year)</b><br>11/22/91 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br>Physician                 | <b>Aggregate Year-to-Date</b> > \$ 500.00  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Wagner, Rodney B<br>196 Warren Street<br>Brooklyn, NY 11201-                                  | <b>Name of Employer</b><br>JP Morgan           | <b>Date (month, day, year)</b><br>11/22/91 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br>Banker                    | <b>Aggregate Year-to-Date</b> > \$ 500.00  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Cutrona, Joseph F H<br>1250 South Washington St<br>Porto Vecchio #502<br>Alexandria, VA 22314 | <b>Name of Employer</b><br>NASSTRAL            | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>300.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br>Associate Executive       | <b>Aggregate Year-to-Date</b> > \$ 300.00  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Wells, Frank G<br>712 N Palm Dr<br>Beverly Hills, CA 90210                                    | <b>Name of Employer</b><br>Walt Disney Company | <b>Date (month, day, year)</b><br>11/18/91 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br>Chief Operating Officer   | <b>Aggregate Year-to-Date</b> > \$ 500.00  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Lacey, Richard A<br>317 W 88th St<br>New York, NY 10024                                       | <b>Name of Employer</b><br>Pierce, Kenney, Her | <b>Date (month, day, year)</b><br>11/22/91 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br>Attorney                  | <b>Aggregate Year-to-Date</b> > \$ 750.00  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Horton, Mary<br>7816 Windcombe Blvd<br>Indianapolis, IN 46240                                 | <b>Name of Employer</b>                        | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br>Homemaker                 | <b>Aggregate Year-to-Date</b> > \$ 500.00  |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402395

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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**11 (a)**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|   |  |  |   |
|---|--|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code<br/><b>VanEtten, Laura</b><br/><b>1206 W Abingdon Dr</b><br/><b>Alexandria, VA 22314</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>   | <p>Name of Employer<br/><b>Capitol Strategies</b></p> <p>Occupation<br/><b>Owner</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>350.00</b></p>               | <p>Date (month, day, year)<br/><b>11/22/91</b></p>                     | <p>Amount of Each Receipt this Period<br/><b>350.00</b></p>                     |
| <p>B. Full Name, Mailing Address and ZIP Code<br/><b>Marek, Frank J</b><br/><b>N26 W30760 Golf Hills Dr</b><br/><b>Pewaukee, WI 53072</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>  | <p>Name of Employer<br/><b>A to Z Printing Comp.</b></p> <p>Occupation<br/><b>CEO</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p>              | <p>Date (month, day, year)<br/><b>11/12/91</b></p>                     | <p>Amount of Each Receipt this Period<br/><b>250.00</b></p>                     |
| <p>C. Full Name, Mailing Address and ZIP Code<br/><b>Wallace, Robert B</b><br/><b>1342 28th St NW</b><br/><b>Washington, DC 20007 3133</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>   | <p>Name of Employer</p> <p>Occupation<br/><b>Retired</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>1000.00</b></p>  | <p>Date (month, day, year)<br/><b>12/17/91</b></p>                     | <p>Amount of Each Receipt this Period<br/><b>1000.00</b></p>                    |
| <p>D. Full Name, Mailing Address and ZIP Code<br/><b>Kornreich, Morton A</b><br/><b>Franklin Lane</b><br/><b>Harrison, NY 10528</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>  | <p>Name of Employer<br/><b>Kornreich Organization</b></p> <p>Occupation<br/><b>President/CEO</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>1000.00</b></p>  | <p>Date (month, day, year)<br/><b>11/18/91</b></p>                     | <p>Amount of Each Receipt this Period<br/><b>1000.00</b></p>                    |
| <p>E. Full Name, Mailing Address and ZIP Code<br/><b>Ferguson, William Jr</b><br/><b>2301 N Monroe St</b><br/><b>Arlington, VA 22207</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>   | <p>Name of Employer<br/><b>The Ferguson Co</b></p> <p>Occupation<br/><b>President</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>500.00</b></p>              | <p>Date (month, day, year)<br/><b>12/30/91</b></p>                     | <p>Amount of Each Receipt this Period<br/><b>500.00</b></p>                     |
| <p>F. Full Name, Mailing Address and ZIP Code<br/><b>Chudnow, Joseph</b><br/><b>7800 N Mohawk Rd</b><br/><b>Milwaukee, WI 53217</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br/><input type="checkbox"/> Other (specify):</p>  | <p>Name of Employer<br/><b>Chudnow Construction</b></p> <p>Occupation<br/><b>Builder/Developer</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>250.00</b></p> | <p>Date (month, day, year)<br/><b>11/12/91</b></p>                     | <p>Amount of Each Receipt this Period<br/><b>250.00</b></p>                     |
| <p>G. Full Name, Mailing Address and ZIP Code<br/><b>Pincourt, A Kenneth Jr</b><br/><b>222 Lakeview Ave</b><br/><b>Esperante - Ste 1500, PO Dwr O</b><br/><b>West Palm Beach, FL 33402</b></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br/><input type="checkbox"/> Other (specify): <b>6,000 6,000</b></p> | <p>Name of Employer<br/><b>Todhunter Int'l</b></p> <p>Occupation<br/><b>President</b></p> <p>Aggregate Year-to-Date &gt; \$ <b>2000.00</b></p>             | <p>Date (month, day, year)<br/><b>10/31/91</b><br/><b>10/31/91</b></p> | <p>Amount of Each Receipt this Period<br/><b>1000.00</b><br/><b>1000.00</b></p> |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402696

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |   |  |   |
|---|---|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Marks, Edward B</b><br><b>333 E 46th St #11-B</b><br><b>New York, NY 10017</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                            | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>Consultant</b><br>Aggregate Year-to-Date > \$ <b>500.00</b>                                    | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Pavalon, Eugene</b><br><b>2 N. La Salle</b><br><b>#1600</b><br><b>Chicago, IL 60602</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Name of Employer</b><br><b>Pavalon &amp; Gifford</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ <b>500.00</b>      | <b>Date (month, day, year)</b><br><b>12/18/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Lamontagne, Raymond</b><br><b>201 Middlebrook Farm Rd</b><br><b>Wilton, CT 06897</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | <b>Name of Employer</b><br><b>Seavest Group</b><br><br><b>Occupation</b><br><b>President/Investments</b><br>Aggregate Year-to-Date > \$ <b>500.00</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Erim, M. Ata</b><br><b>55 Woods Lane</b><br><b>Colonia, NJ 07067</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                      | <b>Name of Employer</b><br><b>Medical Services Gr.</b><br><br><b>Occupation</b><br><b>Physician</b><br>Aggregate Year-to-Date > \$ <b>1000.00</b>     | <b>Date (month, day, year)</b><br><b>12/20/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Trainer, Charles I</b><br><b>3318 N Lake Dr</b><br><b>Milwaukee, WI 53211</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>4000 4000</b> | <b>Name of Employer</b><br><b>TMB Development Co</b><br><br><b>Occupation</b><br><b>Developer</b><br>Aggregate Year-to-Date > \$ <b>2000.00</b>       | <b>Date (month, day, year)</b><br><b>12/30/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b><br><b>1000.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Zastrow, Raymond C</b><br><b>W322 N6853 Wildwood Pt Rd</b><br><b>Hartland, WI 53029</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Name of Employer</b><br><b>Self</b><br><br><b>Occupation</b><br><b>Pathologist</b><br>Aggregate Year-to-Date > \$ <b>450.00</b>                    | <b>Date (month, day, year)</b><br><b>11/05/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                    |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Dahlberg, James E</b><br><b>1119 Merrill Springs Rd</b><br><b>Madison, WI 53705</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                       | <b>Name of Employer</b><br><br><b>Occupation</b><br><b>info requested</b><br>Aggregate Year-to-Date > \$ <b>250.00</b>                                | <b>Date (month, day, year)</b><br><b>12/09/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>                    |

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

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

92014402697

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|  |  |   |   |
|--|--|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Gerken, Walter B</b><br><b>1 Point Loma Drive</b><br><b>Corona Del Mar, CA 92625</b>                       | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Consultant</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>         |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Loeb, Leonard</b><br><b>736 E Sylvan</b><br><b>Milwaukee, WI 53217-5350</b>                                | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/02/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>           |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Rodin, Curt</b><br><b>188 W Randolph Suite 827</b><br><b>Chicago, IL 60601</b>                             | <b>Name of Employer</b><br><b>Anesi, Ozmon, Linda</b>  | <b>Date (month, day, year)</b><br><b>12/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>          |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Oshry, Harold</b><br><b>5304 Woodlands Blvd</b><br><b>Tamarac, FL 33319</b>                                | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Retired</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>            |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Jackson, Thomas</b><br><b>2723 N Grant Blvd</b><br><b>Milwaukee, WI 53210</b>                              | <b>Name of Employer</b><br><b>UW-Milwaukee</b>   | <b>Date (month, day, year)</b><br><b>11/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Educator/Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b> |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Zilber, Joseph J</b><br><b>1610 N Prospect Ave #1201</b><br><b>Milwaukee, WI 53202-</b>                    | <b>Name of Employer</b><br><b>Zilber Ltd</b>   | <b>Date (month, day, year)</b><br><b>12/13/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>           |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Guzeldere, Bekir</b><br><b>303 Lombardy</b><br><b>Sugar Land, TX 77478</b>                                 | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>          |   |   |

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

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

92014102598



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |   |
|--|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Hatipoglu, Mustafa</b><br><b>4424 Conlin St.</b><br><b>Metairie, LA 70006</b>              | <b>Name of Employer</b>   | <b>Date (month, day, year)</b><br><b>12/13/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br><b>Info requested</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b> |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Onal, Mustafa</b><br><b>5164 Mountain Rd</b><br><b>Pasadena, MD 21122</b>                  | <b>Name of Employer</b><br><b>Self</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>400.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>       |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Treptow, Dean A</b><br><b>N61 W5353 Edgewater Dr</b><br><b>Cedarburg, WI 53012</b>         | <b>Name of Employer</b><br><b>Polaris Group, Inc</b>  | <b>Date (month, day, year)</b><br><b>12/03/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>       |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Chicorel, Phyllis</b><br><b>4940 N Lake Dr</b><br><b>Whitefish Bay, WI 53217</b>           | <b>Name of Employer</b><br><b>Weight Watchers</b>   | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>       |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Fleisher, Richard S</b><br><b>111 W Washington St</b><br><b>Chicago, IL 60602</b>          | <b>Name of Employer</b><br><b>Karlin &amp; Fleisher</b>                                     | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>        |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Branch, David</b><br><b>2101 E Kensington Blvd</b><br><b>Milwaukee, WI 53211-</b>          | <b>Name of Employer</b><br><b>Friebert, Finerty &amp;</b>                                   | <b>Date (month, day, year)</b><br><b>11/19/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>        |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Moody-Huston, Margaret</b><br><b>1717 Mira Vista Ave</b><br><b>Santa Barbara, CA 93103</b> | <b>Name of Employer</b><br><b>self</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Occupation</b><br><b>Restaurateur</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>   |   |   |

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

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

92011102499

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

A. Full Name, Mailing Address and ZIP Code

**Elconin, Michael  
5144 W Jerelyn Pl  
Milwaukee, WI 53219 3253**

Name of Employer  
**Software Banc**

Date (month,  
day, year)  
**12/30/91**

Amount of Each  
Receipt this Period  
**250.00**

Receipt For: ☒ Primary ☐ General  
☐ Other (specify):

Occupation  
**Owner**

Aggregate Year-to-Date > \$ **250.00**

B. Full Name, Mailing Address and ZIP Code

**Kelly, Walter F  
3370 N Gordon Pl  
Milwaukee, WI 53212**

Name of Employer  
**Sutton & Kelly**

Date (month,  
day, year)  
**12/04/91**

Amount of Each  
Receipt this Period  
**250.00**

Receipt For: ☒ Primary ☐ General  
☐ Other (specify):

Occupation  
**Attorney**

Aggregate Year-to-Date > \$ **250.00**

C. Full Name, Mailing Address and ZIP Code

**Kitten, Donald R  
4909 W Edgerton Ave  
Greenfield, WI 53220**

Name of Employer  
**Self**

Date (month,  
day, year)  
**11/22/91**

Amount of Each  
Receipt this Period  
**975.00**

Receipt For: ☒ Primary ☐ General  
☐ Other (specify):

Occupation  
**Broker-Real Estate**

Aggregate Year-to-Date > \$ **975.00**

D. Full Name, Mailing Address and ZIP Code

**Dudek, Edward A  
9121 Wildflowers Ct  
Hales Corners, WI 53130**

Name of Employer  
**Frisch, Dudek Ltd**

Date (month,  
day, year)  
**12/06/91**

Amount of Each  
Receipt this Period  
**500.00**

Receipt For: ☒ Primary ☐ General  
☐ Other (specify):

Occupation  
**Attorney**

Aggregate Year-to-Date > \$ **500.00**

E. Full Name, Mailing Address and ZIP Code

**Hargarten, Stephen W  
1216 East Vienna Ave.  
Milwaukee, WI 53212**

Name of Employer  
**Med College of Wis**

Date (month,  
day, year)  
**12/04/91**

Amount of Each  
Receipt this Period  
**250.00**

Receipt For: ☒ Primary ☐ General  
☐ Other (specify):

Occupation  
**Physician**

Aggregate Year-to-Date > \$ **350.00**

F. Full Name, Mailing Address and ZIP Code

**Puelicher, John A  
9080 N Range Line Rd  
Milwaukee, WI 53217**

Name of Employer  
**M & I Corporation**

Date (month,  
day, year)  
**12/30/91**

Amount of Each  
Receipt this Period  
**500.00**

Receipt For: ☒ Primary ☐ General  
☐ Other (specify):

Occupation  
**Chairman**

Aggregate Year-to-Date > \$ **500.00**

G. Full Name, Mailing Address and ZIP Code

**Jacobs, Stephen T  
4820 N Lake Dr  
Milwaukee, WI 53211**

Name of Employer  
**Reinhardt Boerner**

Date (month,  
day, year)  
**12/03/91**

Amount of Each  
Receipt this Period  
**500.00**

Receipt For: ☒ Primary ☐ General  
☐ Other (specify):

Occupation  
**Attorney**

Aggregate Year-to-Date > \$ **500.00**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402700

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 (a)

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)

FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Bechthold, Ned W<br>15275 Westover Rd<br>Elm Grove, WI 53122  | <b>Name of Employer</b><br>Payne & Dolan, Inc   | <b>Date (month, day, year)</b><br>12/04/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b><br><input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                      | <b>Occupation</b><br>President<br><b>Aggregate Year-to-Date</b> > \$ 250.00             |  |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Benjamin, Jerry W<br>2825 E Newberry Blvd<br>Milwaukee, WI 53211  | <b>Name of Employer</b><br>AB Data Ltd  | <b>Date (month, day, year)</b><br>12/06/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b><br><input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                      | <b>Occupation</b><br>Owner-Marketing<br><b>Aggregate Year-to-Date</b> > \$ 250.00       |  |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Boxer, Richard J<br>7210 N Beach Dr<br>Milwaukee, WI 53217-   | <b>Name of Employer</b><br>self   | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>500.00  |
| <b>Receipt For:</b><br><input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                      | <b>Occupation</b><br>Surgeon<br><b>Aggregate Year-to-Date</b> > \$ 600.00               |  |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Bulut, John O<br>801 Red Stable Way<br>Oak Brook, IL 60521  | <b>Name of Employer</b><br>McDonough Assoc.   | <b>Date (month, day, year)</b><br>12/17/91 | <b>Amount of Each Receipt this Period</b><br>1000.00 |
| <b>Receipt For:</b><br><input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary 1,000 <input checked="" type="checkbox"/> General 500 | <b>Occupation</b><br>Engineer<br><b>Aggregate Year-to-Date</b> > \$ 1500.00             |  |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Burton, Steven D<br>135 E 57th St 23rd Fl<br>New York, NY 10022   | <b>Name of Employer</b><br>Sithe/Energies Grp   | <b>Date (month, day, year)</b><br>12/20/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b><br><input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                      | <b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 250.00              |  |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Coffman, Kenneth M<br>925 E Wells St #925<br>Milwaukee, WI 53202  | <b>Name of Employer</b><br>Downey, Inc  | <b>Date (month, day, year)</b><br>11/04/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b><br><input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                      | <b>Occupation</b><br>Mechanical Contractor<br><b>Aggregate Year-to-Date</b> > \$ 250.00 |  |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Croak, Francis R<br>12555 W Grove Ter<br>Elm Grove, WI 53122  | <b>Name of Employer</b><br>Cook & Franke  | <b>Date (month, day, year)</b><br>11/05/91 | <b>Amount of Each Receipt this Period</b><br>250.00  |
| <b>Receipt For:</b><br><input type="checkbox"/> Other (specify): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General                      | <b>Occupation</b><br>Attorney<br><b>Aggregate Year-to-Date</b> > \$ 250.00              |  |  |

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

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

92014402701

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

A. Full Name, Mailing Address and ZIP Code

**Maslowski, James P  
2530 N 88th St  
Wauwatosa, WI 53226**

Name of Employer

**PDC Facilities**

Date (month,  
day, year)

**11/14/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Vice President**

Aggregate Year-to-Date > \$ **250.00**

B. Full Name, Mailing Address and ZIP Code

**Meyer, Glenn A  
16475 Shore Line Dr  
Brookfield, WI 53005**

Name of Employer

**Medical College of**

Date (month,  
day, year)

**11/04/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Physician**

Aggregate Year-to-Date > \$ **250.00**

C. Full Name, Mailing Address and ZIP Code

**Lozoff, Shelby R  
9429 N Regent Ct  
Milwaukee, WI 53217**

Name of Employer

**Wisconsin Bldgs Ptn**

Date (month,  
day, year)

**12/03/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Realtor**

Aggregate Year-to-Date > \$ **250.00**

D. Full Name, Mailing Address and ZIP Code

**Pollack-Sender, Adrienne  
1510 E Goodrich Ln  
Milwaukee, WI 53217**

Name of Employer

**Self**

Date (month,  
day, year)

**12/04/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Property Manager**

Aggregate Year-to-Date > \$ **250.00**

E. Full Name, Mailing Address and ZIP Code

**Reichert, James W  
19520 Killarney Way  
Brookfield, WI 53045 4837**

Name of Employer

**MGIC**

Date (month,  
day, year)

**11/15/91**

Amount of Each  
Receipt this Period

**250.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Exec VP**

Aggregate Year-to-Date > \$ **250.00**

F. Full Name, Mailing Address and ZIP Code

**Riches, Robert A  
222 E Ravine Baye Rd  
Milwaukee, WI 53217**

Name of Employer

**Self**

Date (month,  
day, year)

**12/06/91**

Amount of Each  
Receipt this Period

**500.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Tire Distributor**

Aggregate Year-to-Date > \$ **500.00**

G. Full Name, Mailing Address and ZIP Code

**Glennon, Robert E  
Williams & Jensen, P.C.  
1101 Connecticut Ave NW  
Washington, DC 20036**

Name of Employer

**Williams & Jensen**

Date (month,  
day, year)

**11/22/91**

Amount of Each  
Receipt this Period

**500.00**

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

**Attorney**

Aggregate Year-to-Date > \$ **500.00**

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402702

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Meister, Morris M</b><br><b>7320 N Beach Dr</b><br><b>Milwaukee, WI 53217</b>                                | <b>Name of Employer</b><br><b>Meister &amp; Bonfiglio</b>                                   | <b>Date (month, day, year)</b><br><b>11/08/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>       |  |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Gilman, Daniel D MD</b><br><b>1009 N Jackson St #1206-B</b><br><b>Milwaukee, WI 53202 3201</b>               | <b>Name of Employer</b><br><b>Self</b>  | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>11/21/91</b> | <b>Amount of Each Receipt this Period</b><br><b>750.00</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 1,000 | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 2000.00</b>      |  |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Sinclair, Eugene P</b><br><b>13185 Lee Ct</b><br><b>Elm Grove, WI 53122</b>                                  | <b>Name of Employer</b><br><b>Self</b>  | <b>Date (month, day, year)</b><br><b>12/06/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Occupation</b><br><b>Physician</b><br><b>Aggregate Year-to-Date &gt; \$ 350.00</b>       |  |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Savonuzzi, Andrea I</b><br><b>808 Lindren Rd</b><br><b>Kohler, WI 53044</b>                                  | <b>Name of Employer</b><br><b>Amer Wood-Stock Co</b>  | <b>Date (month, day, year)</b><br><b>12/02/91</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>750.00</b><br><b>750.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 500   | <b>Occupation</b><br><b>Owner</b><br><b>Aggregate Year-to-Date &gt; \$ 1500.00</b>          |  |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Komaneki, Joseph J</b><br><b>S41 W27053 Oak Grove</b><br><b>Waukesha, WI 53188</b>                           | <b>Name of Employer</b><br><b>MGIC</b>  | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Occupation</b><br><b>Vice President</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b> |  |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Schnur, Robert A</b><br><b>929 N Astor St #2307</b><br><b>Milwaukee, WI 53202</b>                            | <b>Name of Employer</b><br><b>Michael, Best &amp; Friedman</b>                              | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 350.00</b>        |  |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Samson, R Max</b><br><b>2402 W Bonniwell Rd 136N</b><br><b>Mequon-Theinsville, WI 53092</b>                  | <b>Name of Employer</b><br><b>American Medical Serv.</b>                                    | <b>Date (month, day, year)</b><br><b>11/20/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>       |  |  |

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

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

92014402703

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |   |
|---|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>McKenna, James F</b><br><b>15815 Ridgefield Ct</b><br><b>Brookfield, WI 53005</b>           | <b>Name of Employer</b><br><b>North Shore Bank</b>        | <b>Date (month, day, year)</b><br><b>11/07/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Occupation</b><br><b>President</b>                     |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Jonas, John</b><br><b>5840 Colfax Avenue</b><br><b>Alexandria, VA 22311</b>                 | <b>Name of Employer</b><br><b>Patton, Boggs &amp; Blo</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Occupation</b><br><b>Attorney</b>                      |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Soley, Michael J Sr</b><br><b>924 E Tara Hill E</b><br><b>Hartford, WI 53027-</b>           | <b>Name of Employer</b><br><b>Miller-Bradford</b>         | <b>Date (month, day, year)</b><br><b>11/13/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Occupation</b><br><b>VP-Owner</b>                      |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Recht, Jack J</b><br><b>9097 N Bayside Dr</b><br><b>Milwaukee, WI 53217</b>                 | <b>Name of Employer</b><br><b>Metropolitan Assoc.</b>     | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Occupation</b><br><b>Real Estate Dev-Investmnt</b>     |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Kohler Cabot, Marie</b><br><b>2734 E Bradford Avenue</b><br><b>Milwaukee, WI 53211-4502</b> | <b>Name of Employer</b><br><b>Self</b>                    | <b>Date (month, day, year)</b><br><b>11/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Occupation</b><br><b>Actress/Writer</b>                |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Fleming, Joe W II</b><br><b>3817 Jocelyn, NW</b><br><b>Washington, DC 20015</b>             | <b>Name of Employer</b><br><b>Nat'l Assoc Rehab F</b>     | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Occupation</b><br><b>Exec Director</b>                 |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Saner, Robert J II</b><br><b>2905 Woodland Drive NW</b><br><b>Washington, DC 20008</b>      | <b>Name of Employer</b><br><b>White, Fine &amp; Vervi</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Occupation</b><br><b>Attorney</b>                      |   |   |
|   | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>          |   |   |

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

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

22014402704

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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11 (a)

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NAME OF COMMITTEE (in Full)  
FRIENDS OF JIM MOODY #C00150813

|  |   |   |   |
|--|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Lubar, Sheldon B<br>8160 N Green Bay Rd<br>Glendale, WI 53209  | Name of Employer<br>Lubar & Co  | Date (month, day, year)<br>11/12/91             | Amount of Each Receipt this Period<br>500.00          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | Occupation<br>Investment Banker<br>Aggregate Year-to-Date > \$ 500.00 |   |   |
| B. Full Name, Mailing Address and ZIP Code<br>Madrigano, Joseph F Jr<br>4618 Taft Rd<br>Kenosha, WI 53142  | Name of Employer<br>Self  | Date (month, day, year)<br>12/06/91             | Amount of Each Receipt this Period<br>500.00          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | Occupation<br>Attorney<br>Aggregate Year-to-Date > \$ 500.00          |   |   |
| C. Full Name, Mailing Address and ZIP Code<br>Fleck, David H<br>5776 North Shore Dr<br>Milwaukee, WI 53217   | Name of Employer<br>Foley & Lardner                                   | Date (month, day, year)<br>12/30/91             | Amount of Each Receipt this Period<br>500.00          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | Occupation<br>Attorney<br>Aggregate Year-to-Date > \$ 500.00          |   |   |
| D. Full Name, Mailing Address and ZIP Code<br>Kirlikovali, Ergun<br>507 Harbor Woods Place<br>Newport Beach, CA 92660                                      | Name of Employer<br>Polymor Inc.                                      | Date (month, day, year)<br>12/04/91<br>12/30/91 | Amount of Each Receipt this Period<br>100.00<br>25.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | Occupation<br>President<br>Aggregate Year-to-Date > \$ 275.00         |   |   |
| E. Full Name, Mailing Address and ZIP Code<br>Ozbey, A. M.<br>5406 Connecticut Ave NW<br>#108<br>Washington, DC 20015                                      | Name of Employer<br>Self  | Date (month, day, year)<br>11/12/91             | Amount of Each Receipt this Period<br>1000.00         |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1000 100 | Occupation<br>Physician<br>Aggregate Year-to-Date > \$ 1100.00        |   |   |
| F. Full Name, Mailing Address and ZIP Code<br>Tansev, Ed<br>102 Laidley Street<br>San Francisco, CA 94131  | Name of Employer<br>Self  | Date (month, day, year)<br>12/17/91             | Amount of Each Receipt this Period<br>500.00          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | Occupation<br>Developer<br>Aggregate Year-to-Date > \$ 500.00         |   |   |
| G. Full Name, Mailing Address and ZIP Code<br>Burdett, Randy L<br>90 Pipers Walk<br>Sugar Land, TX 77479 2516  | Name of Employer<br>Self  | Date (month, day, year)<br>12/30/91             | Amount of Each Receipt this Period<br>150.00          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | Occupation<br>Physician<br>Aggregate Year-to-Date > \$ 300.00         |   |   |
| SUBTOTAL of Receipts This Page (optional) .....  |   |   |   |
| TOTAL This Period (last page this line number only) .....  |   |   |   |

22014402705

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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FOR LINE NUMBER  
11 (a)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |   |  |
|---|--|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Acar, Ferit<br>3508 Hwy 66<br>Rowlett, TX 75088<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                            | Name of Employer<br><b>Self</b><br><br>Occupation<br><b>Physician</b><br>Aggregate Year-to-Date > \$ 250.00              | Date (month, day, year)<br>12/30/91             | Amount of Each Receipt this Period<br>250.00           |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Akgun, Muammer<br>4613 Joliet Ave<br>Lyons, IL 60534<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                       | Name of Employer<br><b>Kara Co Inc</b><br><br>Occupation<br><b>Service Manager</b><br>Aggregate Year-to-Date > \$ 250.00 | Date (month, day, year)<br>12/13/91             | Amount of Each Receipt this Period<br>50.00            |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Demirezer, Gungor H<br>PO Box 1033<br>Beverly Hills, CA 90213<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | Name of Employer<br><br><br>Occupation<br><b>Info requested</b><br>Aggregate Year-to-Date > \$ 500.00                    | Date (month, day, year)<br>12/17/91             | Amount of Each Receipt this Period<br>500.00           |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Winer, Patricia<br>1611 E Belleview Pl<br>Milwaukee, WI 53211<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | Name of Employer<br><br><br>Occupation<br><b>Artist</b><br>Aggregate Year-to-Date > \$ 250.00                            | Date (month, day, year)<br>11/25/91             | Amount of Each Receipt this Period<br>250.00           |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Belfer, Robert A<br>927 5th Ave<br>New York, NY 10021<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Name of Employer<br><b>Self</b><br><br>Occupation<br><b>Investor</b><br>Aggregate Year-to-Date > \$ 500.00               | Date (month, day, year)<br>11/22/91             | Amount of Each Receipt this Period<br>500.00           |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>O'Shaughnessy, Adele K<br>12144 N Ridge Rd<br>Mequon-Theinsville, WI 53092<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Name of Employer<br><br><br>Occupation<br><b>Retired</b><br>Aggregate Year-to-Date > \$ 1100.00                          | Date (month, day, year)<br>11/12/91             | Amount of Each Receipt this Period<br>1000.00          |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Daniels, John W<br>3251 N 51st Blvd<br>Milwaukee, WI 53216<br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | Name of Employer<br><b>Quarles &amp; Brady</b><br><br>Occupation<br><b>lawyer</b><br>Aggregate Year-to-Date > \$ 500.00  | Date (month, day, year)<br>09/28/91<br>11/22/91 | Amount of Each Receipt this Period<br>250.00<br>250.00 |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER 11 (a)

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NAME OF COMMITTEE (in Full)

**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |  |
|---|---|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Singh, Hardish</b><br><b>7900 W Harwood Ave #112</b><br><b>Wauwatosa, WI 53213</b>    | <b>Name of Employer</b><br><b>Computer People Unl</b>       | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>100.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Computer Engineer</b>               | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Lapinski, John C</b><br><b>821 E Bradley Rd</b><br><b>Milwaukee, WI 53217 2904</b>    | <b>Name of Employer</b><br><b>Michael Best &amp; Friend</b> | <b>Date (month, day, year)</b><br><b>12/02/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Attorney</b>                        | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Fowler, John</b><br><b>851 Waterville Lake Rd</b><br><b>Oconomowoc, WI 53066</b>      | <b>Name of Employer</b><br><b>Quad Graphics</b>             | <b>Date (month, day, year)</b><br><b>11/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>VP</b>                              | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Gebhard, William</b><br><b>W264 S7440 Mt Whitney Ave</b><br><b>Waukesha, WI 53186</b> | <b>Name of Employer</b><br><b>Runzheimer</b>                | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>VP Finance</b>                      | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Karpat, Kemal H</b><br><b>915 University Bay Dr</b><br><b>Madison, WI 53705</b>       | <b>Name of Employer</b><br><b>Univ of Wisc-Madison</b>      | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Professor</b>                       | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Little, Virginia</b><br><b>2216 N Terrance Ave</b><br><b>Milwaukee, WI 53202</b>      | <b>Name of Employer</b><br><b>We Care Nursing Serv.</b>     | <b>Date (month, day, year)</b><br><b>11/21/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Administer</b>                      | <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Snyder, Lawrence A</b><br><b>1021 Lake Dr</b><br><b>Delafield, WI 53018</b>           | <b>Name of Employer</b><br><b>Runzheimer</b>                | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br><b>Exec vp</b>                         | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |  |

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

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

92013402707

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |  |   |   |
|---|--|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Sheinbaum, Stanley K</b><br><b>345 N Rockingham Ave</b><br><b>Los Angeles, CA 90049</b> | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Occupation</b><br><b>Economist</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>              |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Suplizio, Paul E</b><br><b>9513 Beach Mill Rd</b><br><b>Great Falls, VA 22066</b>       | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Occupation</b><br><b>Consultant</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b>            |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Klug, Richard P</b><br><b>4230 Hwy 167</b><br><b>Hubertus, WI 53033 9792</b>            | <b>Name of Employer</b><br><b>F &amp; M Bank</b>   | <b>Date (month, day, year)</b><br><b>12/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Occupation</b><br><b>Executive</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>              |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Tempelsman, Maurice</b><br><b>529 Fifth Ave</b><br><b>New York, NY 10017</b>            | <b>Name of Employer</b>  | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Occupation</b><br><b>Info requested</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>         |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Tyson, Don</b><br><b>PO Drawer E</b><br><b>Springdale, AR 72764</b>                     | <b>Name of Employer</b><br><b>Tyson Foods</b>  | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Occupation</b><br><b>Chairman of the Board</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b> |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Wislow, Robert A</b><br><b>20 N Michigan Ave #400</b><br><b>Chicago, IL 60602</b>       | <b>Name of Employer</b><br><b>Self</b>   | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>               |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Zipperman, Louis</b><br><b>400 Tigertail Rd</b><br><b>Los Angeles, CA 90049</b>         | <b>Name of Employer</b><br><b>Community Linen Rental</b>   | <b>Date (month, day, year)</b><br><b>10/31/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Occupation</b><br><b>President</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>              |   |   |

SUBTOTAL of Receipts This Page (optional)

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92014402708

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |   |  |   |
|---|--|---|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Abdoo, Richard A<br>2110 W Greenwood<br>Glendale, WI 53209                               |  | <b>Name of Employer</b><br>Wisconsin Elec & Power | <b>Date (month, day, year)</b><br>12/10/91 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Chairman & CEO               | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Conta, Dennis J<br>925 E Wells St, Tower B<br>Milwaukee, WI 53202 3957                   |  | <b>Name of Employer</b><br>Conta & Assoc          | <b>Date (month, day, year)</b><br>12/06/91 |   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Attorney                     | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Kahn, Albion<br>10110 N Charter Mall 23W<br>Mequon-Theinsville, WI 53092                 |  | <b>Name of Employer</b><br>Kahns, Inc             | <b>Date (month, day, year)</b><br>10/10/91 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Retailer                     | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Levins, Elizabeth<br>3005 E. Hampshire Ave.<br>Milwaukee, WI 53211                       |  | <b>Name of Employer</b><br>Self                   | <b>Date (month, day, year)</b><br>11/27/91 |   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Real Estate                  | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Meissner, Nancy J<br>611 E Lake View Ave<br>Milwaukee, WI 53217                          |  | <b>Name of Employer</b><br>Quarles & Brady        | <b>Date (month, day, year)</b><br>12/06/91 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Attorney                     | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Cabot, F Colin<br>2809 N Prospect Ave<br>Milwaukee, WI 53211                             |  | <b>Name of Employer</b><br>University School      | <b>Date (month, day, year)</b><br>11/12/91 |   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Teacher                      | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Daily, Frank J<br>1460 Fairhaven Blvd<br>Elm Grove, WI 53122                             |  | <b>Name of Employer</b><br>Quarles & Brady        | <b>Date (month, day, year)</b><br>11/22/91 | <b>Amount of Each Receipt this Period</b><br>250.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Attorney                     | <b>Aggregate Year-to-Date</b> > \$ 250.00  |   |

SUBTOTAL of Receipts This Page (optional)

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## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |   |  |   |
|---|---|--|---|
| A. Full Name, Mailing Address and ZIP Code<br>Friebert, Robert H<br>410 E Green Tree Rd<br>Milwaukee, WI 53217-   | Name of Employer<br>Friebert Finerty &<br>St. John                | Date (month,<br>day, year)<br>09/28/91<br>12/04/91<br>12/26/91 | Amount of Each<br>Receipt this Period<br>250.00<br>500.00<br>61.87<br>(Pr kind) |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Occupation<br>Attorney<br>Aggregate Year-to-Date > \$ See Below   |  |   |
| B. Full Name, Mailing Address and ZIP Code<br>Friebert, Robert H<br>410 E Green Tree Rd<br>Milwaukee, WI 53217-   | Name of Employer<br>Friebert Finerty &<br>St. John                | Date (month,<br>day, year)<br>12/30/91                         | Amount of Each<br>Receipt this Period<br>688.13                                 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 500 | Occupation<br>Attorney<br>Aggregate Year-to-Date > \$ 1500.00     |  |   |
| C. Full Name, Mailing Address and ZIP Code<br>Gimbel, Franklyn M<br>3075 N Lake Drive<br>Milwaukee, WI 53211  | Name of Employer<br>Gimbel & Assoc                                | Date (month,<br>day, year)<br>12/06/91                         | Amount of Each<br>Receipt this Period<br>250.00                                 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Occupation<br>Attorney<br>Aggregate Year-to-Date > \$ 250.00      |  |   |
| D. Full Name, Mailing Address and ZIP Code<br>Grande, Donald I<br>5009 N Lake Dr<br>Milwaukee, WI 53217   | Name of Employer<br>Zilber Ltd                                    | Date (month,<br>day, year)<br>12/30/91                         | Amount of Each<br>Receipt this Period<br>500.00                                 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Occupation<br>Executive<br>Aggregate Year-to-Date > \$ 500.00     |  |   |
| E. Full Name, Mailing Address and ZIP Code<br>Hase, David<br>11240 N. Lakeview Pl. 2E<br>Mequon, WI 53092   | Name of Employer<br>Foley & Lardner                               | Date (month,<br>day, year)<br>11/25/91                         | Amount of Each<br>Receipt this Period<br>250.00                                 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Occupation<br>Attorney<br>Aggregate Year-to-Date > \$ 250.00      |  |   |
| F. Full Name, Mailing Address and ZIP Code<br>Kresovic, Dragomir<br>8810 S 51st St<br>Franklin, WI 53132  | Name of Employer<br>Cameo Care Ctr                                | Date (month,<br>day, year)<br>12/11/91                         | Amount of Each<br>Receipt this Period<br>250.00                                 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Occupation<br>Administrator<br>Aggregate Year-to-Date > \$ 500.00 |  |   |
| G. Full Name, Mailing Address and ZIP Code<br>Stone Lane, Helaine<br>7721 N Lake Dr<br>Milwaukee, WI 53217-2910   | Name of Employer<br>Ernest W Lane Co                              | Date (month,<br>day, year)<br>12/03/91                         | Amount of Each<br>Receipt this Period<br>250.00                                 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                      | Occupation<br>Retired<br>Aggregate Year-to-Date > \$ 250.00       |  |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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## NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |   |  |  |
|---|--|---|--|--|
| A. Full Name, Mailing Address and ZIP Code<br>Katz, Daniel J.<br>6530 N Lake Dr<br>Milwaukee, WI 53217  |  | Name of Employer<br>self                | Date (month,<br>day, year)<br>12/30/91             | Amount of Each<br>Receipt this Period<br>250.00            |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | Occupation<br>Developer                 | Aggregate Year-to-Date > \$ 250.00                 |  |
| B. Full Name, Mailing Address and ZIP Code<br>Kelly, Edward Jr.<br>24 Josephine La<br>East Islip, NY 11730  |  | Name of Employer<br>STI Targeted Manage | Date (month,<br>day, year)<br>12/18/91             | Amount of Each<br>Receipt this Period<br>500.00            |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,600 250   |  | Occupation<br>Pres                      | Aggregate Year-to-Date > \$ 1250.00                |  |
| C. Full Name, Mailing Address and ZIP Code<br>Kurtz, Harvey A<br>3927 N Stowell Ave<br>Milwaukee, WI 53211  |  | Name of Employer<br>Whyte & Hirschboech | Date (month,<br>day, year)<br>11/01/91             | Amount of Each<br>Receipt this Period<br>250.00            |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | Occupation<br>Attorney                  | Aggregate Year-to-Date > \$ 250.00                 |  |
| D. Full Name, Mailing Address and ZIP Code<br>Loewenstein, Paul W MD<br>9010 N Tennyson Dr<br>Milwaukee, WI 53217   |  | Name of Employer<br>self                | Date (month,<br>day, year)<br>11/27/91             | Amount of Each<br>Receipt this Period<br>250.00            |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        |  | Occupation<br>Physician                 | Aggregate Year-to-Date > \$ 450.00                 |  |
| E. Full Name, Mailing Address and ZIP Code<br>Mervis, Michael P<br>710 N Plankinton Ave<br>Milwaukee, WI 53203  |  | Name of Employer<br>Mervis & Co         | Date (month,<br>day, year)<br>09/28/91<br>12/12/91 | Amount of Each<br>Receipt this Period<br>1000.00<br>500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 600   |  | Occupation<br>President                 | Aggregate Year-to-Date > \$ 1600.00                |  |
| F. Full Name, Mailing Address and ZIP Code<br>Miller, Keith<br>4780 N Lake Dr<br>Milwaukee, WI 53211-1256   |  | Name of Employer<br>M Financial Corp of | Date (month,<br>day, year)<br>11/18/91             | Amount of Each<br>Receipt this Period<br>100.00            |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                   |  | Occupation<br>Insurance Agent           | Aggregate Year-to-Date > \$ 350.00                 |  |
| G. Full Name, Mailing Address and ZIP Code<br>Moody, Jane<br>900 Calle De Los Amigos<br>Santa Barbara, CA 93105   |  | Name of Employer                        | Date (month,<br>day, year)<br>12/30/91             | Amount of Each<br>Receipt this Period<br>2000.00           |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1,000 1,000 |  | Occupation<br>Retired                   | Aggregate Year-to-Date > \$ 2000.00                |  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402711

## SCHEDULE A

## ITEMIZED RECEIPTS

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |  |   |  |
|--|--|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Nankin, Armin H<br>6375 N Lake Dr<br>Milwaukee, WI 53233                          | Name of Employer<br>Self   | Date (month, day, year)<br>09/28/91<br>12/06/91 | Amount of Each Receipt this Period<br>500.00<br>500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Developer/CPA<br>Aggregate Year-to-Date > \$ 1000.00 |   |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Nemeth, Alan P<br>2601 N Wahl Ave<br>Milwaukee, WI 53211                          | Name of Employer<br>KW Muth/Sheboygan                              | Date (month, day, year)<br>12/30/91             | Amount of Each Receipt this Period<br>250.00           |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Retired<br>Aggregate Year-to-Date > \$ 250.00        |   |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Podewils, William P<br>10421 W Grange Ave<br>Hales Corners, WI 53130-             | Name of Employer<br>Continental Savings                            | Date (month, day, year)<br>12/05/91             | Amount of Each Receipt this Period<br>250.00           |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>President<br>Aggregate Year-to-Date > \$ 250.00      |   |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Ritz, Esther Leah<br>929 N Astor St #2107-8<br>Milwaukee, WI 53202                | Name of Employer   | Date (month, day, year)<br>12/06/91             | Amount of Each Receipt this Period<br>1000.00          |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Retired<br>Aggregate Year-to-Date > \$ 1000.00       |   |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Roper, James R<br>3218 Sandwood Way<br>Madison, WI 53713                          | Name of Employer   | Date (month, day, year)<br>12/18/91             | Amount of Each Receipt this Period<br>400.00           |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Info requested<br>Aggregate Year-to-Date > \$ 400.00 |   |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Rotter, Merton<br>4401 N Stowell Avenue<br>Milwaukee, WI 53211                    | Name of Employer<br>Warshafsky Rotter T                            | Date (month, day, year)<br>11/21/91             | Amount of Each Receipt this Period<br>250.00           |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Attorney<br>Aggregate Year-to-Date > \$ 250.00       |   |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Schrader, Thomas F<br>3048 W Hidden Lake Rd<br>Mequon-Theinsville, WI 53092-5362  | Name of Employer<br>Wisconsin Gas                                  | Date (month, day, year)<br>12/02/91             | Amount of Each Receipt this Period<br>250.00           |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation<br>Pres/CEO<br>Aggregate Year-to-Date > \$ 350.00       |   |  |

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

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

92014402712

## SCHEDULE A

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |   |
|---|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Meyer, George L N Jr<br>312 E Buffalo St #55<br>Milwaukee, WI 53202                      | <b>Name of Employer</b><br>Retired             | <b>Date (month, day, year)</b><br>12/30/91             | <b>Amount of Each Receipt this Period</b><br>250.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>                              |  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Murphy, Judith C<br>1139 N Edison St<br>Milwaukee, WI 53202                              | <b>Name of Employer</b><br>Marshall & Isley Tr | <b>Date (month, day, year)</b><br>09/28/91<br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>250.00<br>100.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Vice President            |  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Orenstein, William H<br>701 E Bay Point Rd<br>Milwaukee, WI 53217-                       | <b>Name of Employer</b><br>Self                | <b>Date (month, day, year)</b><br>11/07/91             | <b>Amount of Each Receipt this Period</b><br>250.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Real Estate               |  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Podell, James J<br>400 W White Oak Way<br>Mequon-Theinsville, WI 53092                   | <b>Name of Employer</b><br>Podell & Podell     | <b>Date (month, day, year)</b><br>12/02/91             | <b>Amount of Each Receipt this Period</b><br>1000.00          |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                  |  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Scott, Robert D<br>3501 N Summit Ave<br>Milwaukee, WI 53211                              | <b>Name of Employer</b><br>Frisch Dudek, Ltd   | <b>Date (month, day, year)</b><br>12/04/91             | <b>Amount of Each Receipt this Period</b><br>250.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                  |  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Donnelly, Thomas J<br>12455 Wrayburn Rd<br>Elm Grove, WI 53122                           | <b>Name of Employer</b><br>Quarles & Brady     | <b>Date (month, day, year)</b><br>10/31/91             | <b>Amount of Each Receipt this Period</b><br>250.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Attorney                  |  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Bolger, T Michael<br>137 E White Oak Way 96N<br>Mequon-Theinsville, WI 53092             | <b>Name of Employer</b><br>Medical College of  | <b>Date (month, day, year)</b><br>11/13/91             | <b>Amount of Each Receipt this Period</b><br>250.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b><br>Pres                      |  |   |
|   | <b>Aggregate Year-to-Date</b> > \$ 250.00      |  |   |

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |   |  |
|--|--|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Pelisek, Frank J</b><br><b>921 E Circle Dr</b><br><b>Milwaukee, WI 53217</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br><b>Michael Best &amp; Friedman</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ <b>250.00</b> | <b>Date (month, day, year)</b><br><b>12/05/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                                   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Randall, William L</b><br><b>6122 N Berkely Blvd</b><br><b>Milwaukee, WI 53217</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                           | <b>Name of Employer</b><br><b>First Bank Milwaukee</b><br><br><b>Occupation</b><br><b>Exec VP</b><br>Aggregate Year-to-Date > \$ <b>250.00</b>         | <b>Date (month, day, year)</b><br><b>12/17/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                                   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Warshafsky, Ted M</b><br><b>3944 N Lake Dr</b><br><b>Milwaukee, WI 53211</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                 | <b>Name of Employer</b><br><b>Warshafsky &amp; Rotter</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ <b>1000.00</b>    | <b>Date (month, day, year)</b><br><b>11/12/91</b><br><b>11/21/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>250.00</b><br><b>750.00</b>                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Appel, Lawrence R</b><br><b>1600 W Greentree Rd #214</b><br><b>Glendale, WI 53209</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Name of Employer</b><br><b>Lakeshore Commercial</b><br><br><b>Occupation</b><br><b>Executive</b><br>Aggregate Year-to-Date > \$ <b>300.00</b>       | <b>Date (month, day, year)</b><br><b>12/09/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                                   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Bernstein, Joseph M</b><br><b>225 W Nokomis Ct</b><br><b>Milwaukee, WI 53217</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>1,000 250</b> | <b>Name of Employer</b><br><b>Godfrey &amp; Kahn</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ <b>1250.00</b>         | <b>Date (month, day, year)</b><br><b>09/28/91</b><br><b>12/30/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b><br><b>750.00</b><br><b>250.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Brachman, James H</b><br><b>626 E Kilbourn Ave #2008</b><br><b>Milwaukee, WI 53202-3233</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Name of Employer</b><br><b>Henri's Food Products</b><br><br><b>Occupation</b><br><b>Executive</b><br>Aggregate Year-to-Date > \$ <b>500.00</b>      | <b>Date (month, day, year)</b><br><b>12/06/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                                   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Chernof, Stephen L</b><br><b>3722 N Lake Dr</b><br><b>Milwaukee, WI 53211-2646</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                           | <b>Name of Employer</b><br><b>Godfrey &amp; Kahn</b><br><br><b>Occupation</b><br><b>Attorney</b><br>Aggregate Year-to-Date > \$ <b>350.00</b>          | <b>Date (month, day, year)</b><br><b>11/21/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>                                   |

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92014402714



## SCHEDULE A

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Cooper, Richard<br>777 N Prospect Ave #702<br>Milwaukee, WI 53202-<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br>Med College of Wisc<br><b>Occupation</b><br>Dean/Physician<br>Aggregate Year-to-Date > \$ 600.00 | <b>Date (month, day, year)</b><br>09/28/91<br>12/02/91 | <b>Amount of Each Receipt this Period</b><br>250.00<br>250.00  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Dewane, John<br>1030 N 16th St<br>Manitowoc, WI 54220<br>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): 1060 500 | <b>Name of Employer</b><br>Self<br><b>Occupation</b><br>Attorney<br>Aggregate Year-to-Date > \$ 1500.00                     | <b>Date (month, day, year)</b><br>12/30/91<br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1000.00<br>500.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Eppstein, Samuel D<br>6555 N Alberta Ct<br>Milwaukee, WI 53217<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | <b>Name of Employer</b><br>Herbst Eppstein Kel<br><b>Occupation</b><br>Architect<br>Aggregate Year-to-Date > \$ 250.00      | <b>Date (month, day, year)</b><br>11/12/91             | <b>Amount of Each Receipt this Period</b><br>250.00            |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Fromstein, James A<br>1515 E Standish Pl<br>Milwaukee, WI 53217<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | <b>Name of Employer</b><br>Manpower Inc<br><b>Occupation</b><br>Vice President<br>Aggregate Year-to-Date > \$ 1000.00       | <b>Date (month, day, year)</b><br>12/30/91             | <b>Amount of Each Receipt this Period</b><br>1000.00           |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Gellman, Larry<br>3535 N Summit Ave<br>Milwaukee, WI 53211<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                | <b>Name of Employer</b><br>Blunt Ellis & Loewi<br><b>Occupation</b><br>Lawyer/Exec<br>Aggregate Year-to-Date > \$ 250.00    | <b>Date (month, day, year)</b><br>12/13/91             | <b>Amount of Each Receipt this Period</b><br>250.00            |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Gendelman, Sheldon<br>6000 N Shore Dr<br>Milwaukee, WI 53217-4636<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Name of Employer</b><br>Dealer Mart<br><b>Occupation</b><br>Executive<br>Aggregate Year-to-Date > \$ 250.00              | <b>Date (month, day, year)</b><br>12/13/91             | <b>Amount of Each Receipt this Period</b><br>250.00            |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Gerlach, Jill E<br>2542 N. Terrace Ave.<br>Milwaukee, WI 53211<br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | <b>Name of Employer</b><br><br><b>Occupation</b><br>Homemaker<br>Aggregate Year-to-Date > \$ 250.00                         | <b>Date (month, day, year)</b><br>12/06/91             | <b>Amount of Each Receipt this Period</b><br>250.00            |

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

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |   |   |   |
|--|---|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Teschner, Richard R</b><br><b>1840 N Prospect Ave #908</b><br><b>Milwaukee, WI 53202</b> | <b>Name of Employer</b><br><b>Quarles &amp; Brady</b>   | <b>Date (month, day, year)</b><br><b>10/08/91</b> | <b>Amount of Each Receipt this Period</b><br><b>200.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 350.00</b>                  |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Tyson, John</b><br><b>PO Box 2020</b><br><b>Springdale, AR 72765</b>                     | <b>Name of Employer</b><br><b>Tyson Foods</b>   | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Vice Chairman-Operations</b><br><b>Aggregate Year-to-Date &gt; \$ 1000.00</b> |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Crotty, E. William</b><br><b>P.O. Box 5488</b><br><b>Daytona Beach, FL 32118</b>         | <b>Name of Employer</b><br><b>Black &amp; Crotty</b>  | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 500.00</b>                  |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Isdell, David</b><br><b>1201 Pennsylvania Ave.</b><br><b>Washington, DC 20004</b>        | <b>Name of Employer</b><br><b>Covington &amp; Burling</b>   | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>                  |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Iverson, William</b><br><b>1201 Pennsylvania Ave.</b><br><b>Washington, DC 20004</b>     | <b>Name of Employer</b><br><b>Covington &amp; Burling</b>   | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Occupation</b><br><b>Attorney</b><br><b>Aggregate Year-to-Date &gt; \$ 250.00</b>                  |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>  | <b>Name of Employer</b><br>   | <b>Date (month, day, year)</b><br>                | <b>Amount of Each Receipt this Period</b><br>               |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):               | <b>Occupation</b><br><b>Aggregate Year-to-Date &gt; \$</b>  |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>  | <b>Name of Employer</b><br>   | <b>Date (month, day, year)</b><br>                | <b>Amount of Each Receipt this Period</b><br>               |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):               | <b>Occupation</b><br><b>Aggregate Year-to-Date &gt; \$</b>  |   |   |
| <b>SUBTOTAL of Receipts This Page (optional)</b> .....   |   |   |   |
| <b>TOTAL This Period (last page this line number only)</b> .....   |   |   |   |

92014102716

# SCHEDULE A

## ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11(b)

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)

FRIENDS OF JIM MOODY #000150813

### A. Full Name, Mailing Address and ZIP Code

McNamara - McGraw for Alderman  
111 E. Wisconsin Ave. #1800  
Milwaukee, WI 53202

Name of Employer

Donation

Date (month,  
day, year)

09/24/91

Amount of Each  
Receipt this Period

100.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

### B. Full Name, Mailing Address and ZIP Code

Strohl for Wisconsin  
P.O. Box 1096  
Madison, WI 53701

Name of Employer

Donation

Date (month,  
day, year)

11/11/91

Amount of Each  
Receipt this Period

50.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

### C. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

### D. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

### E. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

### F. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

### G. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

150.00

92012402717

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 20  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |                                       |   |   |
|---|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Burlington Industries Good Gov't</b><br><b>P.O. Box 21207</b><br><b>Greensboro, NC 27420</b>          | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 1500.00        |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Ass'n for Respiratory Care PA</b><br><b>11030 Ables Lane</b><br><b>Dallas, TX 75229</b>           | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>300.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 600.00         |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Podiatric Medical PAC</b><br><b>9312 Old Georgetown Road</b><br><b>Bethesda, MD 20814</b>         | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 2000.00        |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Boilermakers-Blacksmiths LEAP PAC</b><br><b>400 First Street, N.W.</b><br><b>Washington, DC 20001</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 2500.00        |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Amalgamated Transit Union COPE</b><br><b>5025 Wisconsin Ave., N.W.</b><br><b>Washington, DC 20016</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>2500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 3500.00        |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>DRIVE - Teamsters PAC</b><br><b>25 Louisiana Ave., N.W.</b><br><b>Washington, DC 20001</b>            | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/08/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 2000.00        |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Norwest Corporation PAC</b><br><b>735 West Wisconsin Ave.</b><br><b>Milwaukee, WI 53201</b>           | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 1500.00        |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9201402718

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 2 OF 20  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |   |   |
|--|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Wine &amp; Spirits PAC</b><br><b>2033 M Street, N.W.</b><br><b>Washington, DC 20036</b>                    | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date &gt; \$ 1000.00</b>     |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Penn Central PAC</b><br><b>1 East Fourth Street</b><br><b>Cincinnati, OH 45202</b>                         | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date &gt; \$ 1000.00</b>     |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Pacific Mutual PAC</b><br><b>700 Newport Center Drive</b><br><b>Newport Beach, CA 92660</b>                | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date &gt; \$ 500.00</b>      |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Columbia Gas Employees PAC</b><br><b>20 Montchanin Road</b><br><b>Wilmington, DL 19807</b>                 | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date &gt; \$ 500.00</b>      |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Mass. Mutual PAC</b><br><b>1295 State Street</b><br><b>Springfield, MA 01111</b>                           | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date &gt; \$ 500.00</b>      |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Recording Industry Ass'n PAC</b><br><b>1020 19th Street, N.W.</b><br><b>Washington, DC 20036</b>           | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date &gt; \$ 500.00</b>      |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l Ass'n of Insurance Brokers</b><br><b>1401 New York Ave. N.W.</b><br><b>Washington, DC 20005</b>      | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date &gt; \$ 500.00</b>      |   |

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

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

92014402719

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 3 OF 20  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |   |   |
|--|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Time Warner PAC</b><br><b>75 Rockefeller Plaza</b><br><b>New York, NY 10019</b>                    | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>5000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 5000.00        |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>First Bank PAC</b><br><b>201 West Wisconsin Avenue</b><br><b>Milwaukee, WI 53259</b>               | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 100.00         |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>USAir PAC</b><br><b>2345 Crystal Drive</b><br><b>Arlington, VA 22227</b>                           | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 250.00         |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Nabisco Brands Program PAC</b><br><b>100 Deforest Avenue</b><br><b>East Hanover, NJ 07936</b>      | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00         |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Eli Lilly &amp; Co. PAC</b><br><b>Lilly Corporate Center</b><br><b>Indianapolis, IN 46285</b>      | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00         |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Waste Management (WMI PAC)</b><br><b>3003 Butterfield Road</b><br><b>Oak Brook, IL 60521</b>       | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00         |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Paramount Communications PAC</b><br><b>1 Gulf &amp; Western Plaza</b><br><b>New York, NY 10023</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):              | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00        |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402720

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE 4 OF 20  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |                                       |   |   |
|---|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>FoxPAC</b><br><b>1901 Avenue of the Stars</b><br><b>Los Angeles, CA 90067</b>                         | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     |   |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |                                       |   |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l Ass'n Rehabilitation Agencies</b><br><b>1600 Wilson Boulevard</b><br><b>Arlington, VA 22209</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     |   |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |                                       |   |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>New England Life PAC</b><br><b>501 Boylston Street</b><br><b>Boston, MA 02117</b>                     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     |   |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>   |                                       |   |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Commercial Finance Ass'n PAC</b><br><b>1 Penn Plaza</b><br><b>New York, NY 10119</b>                  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/06/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     |   |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>250.00</b>  |                                       |   |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Detroit Edison PAC</b><br><b>2000 Second Avenue</b><br><b>Detroit, MI 48226</b>                       | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     |   |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |                                       |   |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>N L F PAC</b><br><b>23823 Valencia Boulevard</b><br><b>Valencia, CA 91355</b>                         | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     |   |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>   |                                       |   |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Boat Owners Assn'n PAC</b><br><b>880 South Pickett Street</b><br><b>Alexandria, VA 22304</b>          | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/09/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Occupation</b>                     |   |   |
| <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |                                       |   |   |

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

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

92014402721

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

PAGE **5** OF **20**  
FOR LINE NUMBER  
**11 (c)**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |   |   |
|--|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>BellSouth Corp. PAC</b><br><b>1155 W. Peachtree St. NE</b><br><b>Atlanta, GA 30367</b>                     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Wisconsin Bell Employees PAC</b><br><b>722 North Broadway</b><br><b>Milwaukee, WI 53202</b>                | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>2000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>2000.00</b> |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Morgan Companies PAC</b><br><b>60 Wall Street</b><br><b>New York, NY 10260</b>                             | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l Venture Capital Ass'n</b><br><b>1050 17th Street, N.W.</b><br><b>Washington, DC 20036</b>            | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>3000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>3000.00</b> |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Ensearch Employees PAC</b><br><b>300 S. St. Paul Street</b><br><b>Dallas, TX 75201</b>                     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>First Chicago PAC</b><br><b>One First National Plaza</b><br><b>Chicago, IL 60670</b>                       | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Seafarers PAC</b><br><b>5201 Auth Way</b><br><b>Camp Springs, MD 20746</b>                                 | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>5000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>5000.00</b> |   |

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

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

92014402722



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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PAGE 6 OF 20  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |  |   |
|--|---------------------------------------|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Prudential Securities PAC</b><br><b>100 Gold Street</b><br><b>New York, NY 10292</b>                   | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00                            |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Merrill Lynch PAC</b><br><b>3000 K Street, N.W.</b><br><b>Washington, DC 20007</b>                     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00                           |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>New York Stock Exchange PAC</b><br><b>1800 K Street</b><br><b>Washington, DC 20006</b>                 | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00                            |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Joseph Seagram &amp; Sons PAC</b><br><b>800 Third Avenue</b><br><b>New York, NY 10022</b>              | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00                            |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Independent Insurance Agents PAC</b><br><b>600 Pennsylvania Ave. SE</b><br><b>Washington, DC 20003</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>2000.00</b>                 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 2000.00                           |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Mead Effective Citizenship PAC</b><br><b>Courthouse Plaza NE</b><br><b>Dayton, OH 45463</b>            | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00                            |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>SmithKline PAC (SK-PAC)</b><br><b>P.O. Box 7929</b><br><b>Philadelphia, PA 19101</b>                   | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                  | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00                            |   |

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

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

92014402723

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s)  
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PAGE 7 OF 20  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |   |   |
|--|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>AGC PAC</b><br><b>1957 E Street, N.W.</b><br><b>Washington, DC 20006</b>                                   | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Auto Dealers &amp; Drivers PAC</b><br><b>153-12 Hillside Avenue</b><br><b>Jamaica, NY 11432</b>            | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Equitable Life Assurance PAC</b><br><b>135 W. 50th Street</b><br><b>New York, NY 10020</b>                 | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Guardian Life PAC</b><br><b>201 Park Avenue South</b><br><b>New York, NY 10003</b>                         | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Int'l Group PAC</b><br><b>70 Pine Street</b><br><b>New York, NY 10270</b>                              | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Mutual Life Insurance PAC</b><br><b>418 6th Avenue</b><br><b>Des Moines, IA 50309</b>                  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Swidler &amp; Berlin PAC</b><br><b>3000 K Street, N.W.</b><br><b>Washington, DC 20007</b>                  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92014402724

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 8 OF 20  
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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |                                       |   |   |
|---|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>New York Life PAC</b><br><b>51 Madison Avenue</b><br><b>New York, NY 10010</b>                          | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00        |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>AMGEN PAC</b><br><b>1840 De Havilland Drive</b><br><b>Thousand Oaks, CA 91320</b>                       | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>200.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 200.00         |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Champion Co. PAC</b><br><b>One Champion Plaza</b><br><b>Stamford, CT 06921</b>                          | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00         |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>MONY PAC</b><br><b>56th &amp; Broadway</b><br><b>New York, NY 10019</b>                                 | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 1000.00        |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l Structured Settlements PAC</b><br><b>1001 Connecticut Ave., NW</b><br><b>Washington, DC 20036</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00         |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>AAM/PAC</b><br><b>100 Maryland Ave., N.E.</b><br><b>Washington, DC 20002</b>                            | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>25.00</b>   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 25.00          |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Marriott PAC</b><br><b>Marriott Drive</b><br><b>Washington, DC</b>                                      | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/18/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ 500.00         |   |

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92014402725

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 9 OF 20  
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NAME OF COMMITTEE (In Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |  |   |
|--|---------------------------------------|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>URCLA &amp; PWA AFL-CIO PAC</b><br><b>87 South High Street</b><br><b>Akron, OH 44308</b>     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Occupation</b><br><br>             | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                     |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Maintenance of Way League</b><br><b>12050 Woodward Avenue</b><br><b>Detroit, MI 48203</b>    | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/31/91</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Occupation</b><br><br>             | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>                    |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Human Rights Campaign Fund</b><br><b>P.O. Box 1396</b><br><b>Washington, DC 20013</b>        | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Occupation</b><br><br>             | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>                    |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Ica Cream &amp; Milk PAC</b><br><b>888 16th Street, N.W.</b><br><b>Washington, DC 20006</b>  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Occupation</b><br><br>             | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                     |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Banc One PAC</b><br><b>100 E. Broad Street</b><br><b>Columbus, OH 43271</b>                  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Occupation</b><br><br>             | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                     |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Transamerica Life Co. PAC</b><br><b>1150 South Olive</b><br><b>Los Angeles, CA 90015</b>     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Occupation</b><br><br>             | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b>                    |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l Boiler Council PAC</b><br><b>1155 15th Street, N.W.</b><br><b>Washington, DC 20005</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Occupation</b><br><br>             | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>                     |   |

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

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

92014402726

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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10 20  
FOR LINE NUMBER  
11 (c)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Pub. Ownership Electric Resources</b><br><b>2301 M Street</b><br><b>Washington, DC 20037</b>               | <b>Name of Employer</b><br><b>PAC</b>            | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                                |  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l League of Postmasters PAC</b><br><b>1023 North Royal Street</b><br><b>Alexandria, VA 22314</b>       | <b>Name of Employer</b><br><b>PAC</b>            | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                                |  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>CSX Transportation PAC</b><br><b>1331 Pennsylvania Ave. NW</b><br><b>Washington, DC 20004</b>              | <b>Name of Employer</b><br><b>PAC</b>            | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                                |  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Express PAC</b><br><b>1020 19th Street, N.W.</b><br><b>Washington, DC 20036</b>                        | <b>Name of Employer</b><br><b>PAC</b>            | <b>Date (month, day, year)</b><br><b>10/31/91</b><br><b>12/20/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                                |  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Petroleum Marketers Ass'n PAC</b><br><b>1120 Vermont Ave., N.W.</b><br><b>Washington, DC 20005</b>         | <b>Name of Employer</b><br><b>PAC</b>            | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                                |  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Coca-Cola Co. PAC</b><br><b>P.O. Drawer 1734</b><br><b>Atlanta, GA 30301</b>                               | <b>Name of Employer</b><br><b>PAC</b>            | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                                |  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>O'Melveny &amp; Myers PAC</b><br><b>555 13th Street, N.W.</b><br><b>Washington, DC 20004</b>               | <b>Name of Employer</b><br><b>PAC</b>            | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                                |  |   |
|  | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b> |  |   |

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

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

92014402727

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |                                       |   |   |
|---|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Yellow Freight System PAC</b><br><b>P.O. Box 7270</b><br><b>Shawnee Mission, KA 66207</b>     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Computer Dealers PAC</b><br><b>1212 Potomac Street, N.W.</b><br><b>Washington, DC 20007</b>   | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Pepsi-Cola Bottlers PAC</b><br><b>3501 Algonquin Road</b><br><b>Rolling Meadows, IL 60008</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Trucking PAC</b><br><b>430 First Street, S.E.</b><br><b>Washington, DC 20003</b>          | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Morrison-Knudsen PAC</b><br><b>P.O. Box 7808</b><br><b>Boise, ID 83729</b>                    | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>BUSPAC</b><br><b>1015 15th Street, N.W.</b><br><b>Washington, DC 20005</b>                    | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>SnackPAC</b><br><b>1711 King Street</b><br><b>Alexandria, VA 22314</b>                        | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |

SUBTOTAL of Receipts This Page (optional)

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |   |  |   |
|---|---|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Anheuser-Busch PAC</b><br><b>One Busch Place</b><br><b>St. Lois, MO 63118</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 500.00  | <b>Date (month, day, year)</b><br><b>09/24/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Bell South Services PAC</b><br><b>3700 Colonnade Parkway</b><br><b>Birmingham, AL 35243</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>09/24/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Hillhaven PAC</b><br><b>2700 Colorado Boulevard</b><br><b>Santa Monica, CA 90404</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>10/08/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Sheet Metal Workers PAC</b><br><b>1750 New York Avenue, NW</b><br><b>Washington, DC 20006</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 2500.00 | <b>Date (month, day, year)</b><br><b>10/08/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>2500.00</b>                 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>PTP PAC</b><br><b>1625 K Street, N.W.</b><br><b>Washington, DC 20006</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>10/14/91</b><br><b>11/22/91</b> | <b>Amount of Each Receipt this Period</b><br><b>250.00</b><br><b>750.00</b> |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>GTE PAC</b><br><b>1850 M Street, N.W.</b><br><b>Washington, DC 20036</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                        | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 500.00  | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Donohue &amp; Associates PAC</b><br><b>4738 North 40th Street</b><br><b>Sheboygan, WI 53083</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 500.00  | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |

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

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

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |                                |  |  |
|---|--------------------------------|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Manor Health Care PAC<br>10750 Columbia Pike<br>Silver Spring, MD 20981                  | <b>Name of Employer</b><br>PAC | <b>Date (month, day, year)</b><br>09/24/91             | <b>Amount of Each Receipt this Period</b><br>1000.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>              | <b>Aggregate Year-to-Date</b> > \$ 1000.00             |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Owens-Illinois Inc. PAC<br>One Seagate<br>Toledo, OH 43666                               | <b>Name of Employer</b><br>PAC | <b>Date (month, day, year)</b><br>09/24/91             | <b>Amount of Each Receipt this Period</b><br>200.00            |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>              | <b>Aggregate Year-to-Date</b> > \$ 200.00              |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Ass'n for Advancement Psychology<br>P.O. Box 38129<br>Colorado Springs, CO 80937         | <b>Name of Employer</b><br>PAC | <b>Date (month, day, year)</b><br>09/24/91<br>11/12/91 | <b>Amount of Each Receipt this Period</b><br>1000.00<br>500.00 |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>              | <b>Aggregate Year-to-Date</b> > \$ 1500.00             |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Am. Academy of Physician Asst's<br>950 N. Washington Street<br>Alexandria, VA 22314      | <b>Name of Employer</b><br>PAC | <b>Date (month, day, year)</b><br>09/24/91             | <b>Amount of Each Receipt this Period</b><br>500.00            |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>              | <b>Aggregate Year-to-Date</b> > \$ 500.00              |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Citizens & Southern PAC<br>35 Broad Street<br>Atlanta, GA 30303                          | <b>Name of Employer</b><br>PAC | <b>Date (month, day, year)</b><br>09/24/91             | <b>Amount of Each Receipt this Period</b><br>1000.00           |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>              | <b>Aggregate Year-to-Date</b> > \$ 1000.00             |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Commodity Futures PAC<br>30 S. Wacker Drive<br>Chicago, IL 60606                         | <b>Name of Employer</b><br>PAC | <b>Date (month, day, year)</b><br>09/24/91             | <b>Amount of Each Receipt this Period</b><br>500.00            |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>              | <b>Aggregate Year-to-Date</b> > \$ 500.00              |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>I.L.G.W.U. PAC<br>1710 Broadway<br>New York, NY 10019                                    | <b>Name of Employer</b><br>PAC | <b>Date (month, day, year)</b><br>09/24/91             | <b>Amount of Each Receipt this Period</b><br>500.00            |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Occupation</b>              | <b>Aggregate Year-to-Date</b> > \$ 500.00              |  |

SUBTOTAL of Receipts This Page (optional)

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9201402730



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |  |  |   |
|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Prudential Insurance Co. PAC</b><br><b>1140 Connecticut Ave. NW</b><br><b>Washington, DC 20036</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 2500.00 | <b>Date (month, day, year)</b><br><b>11/04/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b><br><b>1000.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Consulting Engineers PAC</b><br><b>1015 15th Street, N.W.</b><br><b>Washington, DC 20005</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1500.00 | <b>Date (month, day, year)</b><br><b>12/17/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Chicago Board of Trade PAC</b><br><b>141 W. Jackson Boulevard</b><br><b>Chicago, IL 60604</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):      | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>12/20/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Pfizer PAC</b><br><b>235 East 42nd Street</b><br><b>New York, NY 10017</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                         | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1500.00 | <b>Date (month, day, year)</b><br><b>09/24/91</b><br><b>12/17/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>1000.00</b>  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Upjohn Employees PAC</b><br><b>7000 Portage Road</b><br><b>Kalamazoo, MI 49001</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                 | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>09/24/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Torchmark Corp. PAC</b><br><b>2001 3rd Avenue</b><br><b>Birmingham, AL 35233</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>09/24/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>USXPAC</b><br><b>818 Connecticut Ave., NW</b><br><b>Washington, DC 20006</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                       | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 500.00  | <b>Date (month, day, year)</b><br><b>09/24/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |

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92014402731

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |  |  |   |
|---|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>MCA PAC</b><br><b>100 Universal City Plaza</b><br><b>Universal City, CA 91608</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                     | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 4000.00 | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Pharmaceutical PAC</b><br><b>2215 Constitution Ave. NW</b><br><b>Washington, DC 20037</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):         | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>11/04/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Television &amp; Radio PAC</b><br><b>1771 N Street, N.W.</b><br><b>Washington, DC 20036</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):           | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Institute of CPA's PAC</b><br><b>1455 Pennsylvania Ave. NW</b><br><b>Washington, DC 20004</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):     | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 1500.00 | <b>Date (month, day, year)</b><br><b>10/14/91</b><br><b>12/04/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b> |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Labor Political League PAC</b><br><b>6310 W. Appleton Avenue</b><br><b>Milwaukee, WI 53210</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 5000.00 | <b>Date (month, day, year)</b><br><b>12/30/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>2000.00</b>                 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Int'l Council of Shopping Centers</b><br><b>5900 N. Port Washington</b><br><b>Milwaukee, WI 53217</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 2000.00 | <b>Date (month, day, year)</b><br><b>12/09/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Service Employees (SEIU-COPE)</b><br><b>1313 L Street, N.W.</b><br><b>Washington, DC 20005</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):        | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ 5000.00 | <b>Date (month, day, year)</b><br><b>12/18/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>4000.00</b>                 |

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92014402732

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |  |   |
|--|---------------------------------------|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Ass'n of Trial Lawyers of America</b><br><b>1050 31st Street, N.W.</b><br><b>Washington, DC 20007</b>    | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                    | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>2000.00</b>                    |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Airline Pilots Ass'n PAC</b><br><b>1625 Massachusetts Ave. NW</b><br><b>Washington, DC 20036</b>         | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                    | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>2500.00</b>                    |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Council of Life Insurance PAC</b><br><b>1001 Pennsylvania Ave. NW</b><br><b>Washington, DC 20004</b> | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/18/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>2500.00</b>                   |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                    | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>3000.00</b>                    |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Credit Union Legislative PAC</b><br><b>805 15th Street, N.W.</b><br><b>Washington, DC 20005</b>          | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/09/91</b><br><b>12/10/91</b> | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b><br><b>1500.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                    | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>5000.00</b>                    |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Hospital Ass'n PAC</b><br><b>840 North Lake Shore Dr.</b><br><b>Chicago, IL 60611</b>                | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                    |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                    | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>1250.00</b>                    |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l Farmers Organization PAC</b><br><b>777 N. Capitol St., N.E.</b><br><b>Washington, DC 20002</b>     | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>11/12/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>150.00</b>                    |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                    | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>300.00</b>                     |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Kinetic Concepts PAC</b><br><b>P.O. Box 8588</b><br><b>San Antonio, TX 78208</b>                         | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>09/24/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>2000.00</b><br><b>1000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                    | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>3500.00</b>                    |   |

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9201402733

## SCHEDULE A

## ITEMIZED RECEIPTS

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## NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |                         |   |  |
|--|-------------------------|---|--|
| A. Full Name, Mailing Address and ZIP Code<br>Ernst & Young PAC<br>1200 19th Street, N.W.<br>Washington, DC 20036                      | Name of Employer<br>PAC | Date (month, day, year)<br>11/18/91<br>12/04/91 | Amount of Each Receipt this Period<br>500.00<br>500.00   |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation              | Aggregate Year-to-Date > \$ 1500.00             |  |
| B. Full Name, Mailing Address and ZIP Code<br>Am. Physical Therapy PAC<br>1111 North Fairfax Street<br>Alexandria, VA 22314            | Name of Employer<br>PAC | Date (month, day, year)<br>09/24/91<br>10/31/91 | Amount of Each Receipt this Period<br>1000.00<br>1000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation              | Aggregate Year-to-Date > \$ 2500.00             |  |
| C. Full Name, Mailing Address and ZIP Code<br>Nat'l Rural Letter Carriers PAC<br>1448 Duke Street<br>Alexandria, VA 22314              | Name of Employer<br>PAC | Date (month, day, year)<br>12/11/91             | Amount of Each Receipt this Period<br>1500.00            |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation              | Aggregate Year-to-Date > \$ 3000.00             |  |
| D. Full Name, Mailing Address and ZIP Code<br>Nat'l Education Ass'n PAC<br>1201 16th Street, N.W.<br>Washington, DC 20036              | Name of Employer<br>PAC | Date (month, day, year)<br>11/04/91             | Amount of Each Receipt this Period<br>500.00             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation              | Aggregate Year-to-Date > \$ 2500.00             |  |
| E. Full Name, Mailing Address and ZIP Code<br>Signalman's Political League PAC<br>P.O. Box U<br>Mt. Prospect, IL 60056                 | Name of Employer<br>PAC | Date (month, day, year)<br>10/14/91             | Amount of Each Receipt this Period<br>500.00             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation              | Aggregate Year-to-Date > \$ 1000.00             |  |
| F. Full Name, Mailing Address and ZIP Code<br>Responsible Citizens Political PAC<br>815 16th Street, N.W.<br>Washington, DC 20001      | Name of Employer<br>PAC | Date (month, day, year)<br>09/24/91             | Amount of Each Receipt this Period<br>1000.00            |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation              | Aggregate Year-to-Date > \$ 1500.00             |  |
| G. Full Name, Mailing Address and ZIP Code<br>Ass'n Private Pension & Welfare<br>1212 New York Ave., N.W.<br>Washington, DC 20005      | Name of Employer<br>PAC | Date (month, day, year)<br>10/14/91             | Amount of Each Receipt this Period<br>500.00             |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | Occupation              | Aggregate Year-to-Date > \$ 1000.00             |  |

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99014402734

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**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |   |   |  |
|---|---|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Miller Brewing Federal PAC</b><br><b>3939 W. Highland Blvd.</b><br><b>Milwaukee, WI 53201</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):       | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 1750.00 | <b>Date (month, day, year)</b><br><b>09/24/91</b><br><b>10/14/91</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b><br><b>250.00</b> |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Metropolitan Life PAC</b><br><b>11615 L Street, N.W.</b><br><b>Washington, DC 20036</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):             | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 3000.00 | <b>Date (month, day, year)</b><br><b>11/22/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>2000.00</b>                                  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>FANNIE PAC</b><br><b>3900 Wisconsin Ave., N.W.</b><br><b>Washington, DC 20016</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 1500.00 | <b>Date (month, day, year)</b><br><b>11/12/91</b><br><b>12/30/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b>                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Independent Bankers PAC</b><br><b>1 Thomas Circle, N.W.</b><br><b>Washington, DC 20005</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):          | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 2000.00 | <b>Date (month, day, year)</b><br><b>10/31/91</b><br><b>12/09/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>500.00</b>                  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>Brotherhood Locomotive Engineers</b><br><b>1370 Ontario Street</b><br><b>Cleveland, OH 44113</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):    | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>09/24/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                                   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Northwestern Mutual Federal PAC</b><br><b>720 E. Wisconsin Avenue</b><br><b>Milwaukee, WI 53202</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 5000.00 | <b>Date (month, day, year)</b><br><b>12/20/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>2000.00</b>                                  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>Nat'l Beer Wholesalers PAC</b><br><b>5205 Leesburg Pike #1600</b><br><b>Falls Church, VA 22041</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):  | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br>Aggregate Year-to-Date > \$ 1000.00 | <b>Date (month, day, year)</b><br><b>09/24/91</b>                                       | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                                   |

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**SCHEDULE A**

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|   |   |  |  |
|---|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Am. Health Care Ass'n PAC</b><br><b>1201 L Street, N.W.</b><br><b>Washington, DC 20005</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify): <b>5,000</b> <b>1,000</b> | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ <b>6000.00</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>5000.00</b>                  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Firefighters-FIREPAC</b><br><b>1750 New York Ave, N.W.</b><br><b>Washington, DC 20006</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                       | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ <b>2500.00</b> | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>1000.00</b>                  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Bear Stearns PAC</b><br><b>245 Park Avenue</b><br><b>New York, NY 10167</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ <b>5000.00</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>4500.00</b>                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>UPSPAC</b><br><b>51 Weaver Street</b><br><b>Greenwich, CT 06836</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ <b>1100.00</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>                   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br><b>GRACEPAC</b><br><b>919 18th Street, N.W.</b><br><b>Washington, DC 20006</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):   | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> | <b>Date (month, day, year)</b><br><b>11/18/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br><b>Northwest Airlines PAC</b><br><b>901 15th Street, N.W.</b><br><b>Washington, DC 20005</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                                       | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ <b>1000.00</b> | <b>Date (month, day, year)</b><br><b>10/31/91</b>                    | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>                   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br><b>United Food &amp; Commercial Workers</b><br><b>1775 K Street, N.W.</b><br><b>Washington, DC 20006</b><br><br>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):                           | <b>Name of Employer</b><br><b>PAC</b><br><br><b>Occupation</b><br><br><b>Aggregate Year-to-Date</b> > \$ <b>5000.00</b> | <b>Date (month, day, year)</b><br><b>10/14/91</b><br><b>12/11/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b><br><b>4000.00</b> |

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

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

92014102736

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 20 OF 20  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

|  |                                       |   |   |
|--|---------------------------------------|---|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br><b>Southern Wine &amp; Spirits PAC</b><br><b>1600 NW 163rd Street</b><br><b>Miami, FL 33169</b>               | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br><b>Independent Action PAC</b><br><b>1511 K Street, N.W.</b><br><b>Washington, DC 20005</b>                    | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>5000.00</b> |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>5000.00</b> |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br><b>Dickstein, Shapiro &amp; Morin PAC</b><br><b>2101 L Street, N.W.</b><br><b>Washington, DC 20037</b>        | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>500.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>500.00</b>  |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br><b>Aqua-Chem PAC</b><br><b>7800 North 113th Street</b><br><b>Milwaukee, WI 53201</b>                          | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b><br><b>12/30/91</b> | <b>Amount of Each Receipt this Period</b><br><b>100.00</b>  |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b> | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$ <b>100.00</b>  |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b>                    | <b>Amount of Each Receipt this Period</b>                   |
| <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$                |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b>                    | <b>Amount of Each Receipt this Period</b>                   |
| <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$                |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b>  | <b>Name of Employer</b><br><b>PAC</b> | <b>Date (month, day, year)</b>                    | <b>Amount of Each Receipt this Period</b>                   |
| <b>Receipt For:</b> <input type="checkbox"/> <b>Primary</b> <input type="checkbox"/> <b>General</b><br><input type="checkbox"/> <b>Other (specify):</b>            | <b>Occupation</b>                     | <b>Aggregate Year-to-Date</b> > \$                |   |

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

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

142,425.00

92014402737

# SCHEDULE A

## ITEMIZED RECEIPTS

### CONTRIBUTIONS FROM THE CANDIDATE

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

PAGE 1 OF 1  
FOR LINE NUMBER 11(d)

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |  |
|---|--|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Jim Moody<br>3946 North Farwell Avenue<br>Milwaukee, WI 53211                            |  | <b>Name of Employer</b><br>U.S. House of Representatives | <b>Date (month, day, year)</b><br>12/30/91 | <b>Amount of Each Receipt this Period</b><br>1,500.00<br>(In-Kind) |
| <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b><br>Congressman                         | <b>Aggregate Year-to-Date</b> > \$ 1,500   |  |
| <b>B. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                                  | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>                          |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |  | <b>Occupation</b>  | <b>Aggregate Year-to-Date</b> > \$         |  |
| <b>C. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                                  | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>                          |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |  | <b>Occupation</b>  | <b>Aggregate Year-to-Date</b> > \$         |  |
| <b>D. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                                  | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>                          |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |  | <b>Occupation</b>  | <b>Aggregate Year-to-Date</b> > \$         |  |
| <b>E. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                                  | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>                          |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |  | <b>Occupation</b>  | <b>Aggregate Year-to-Date</b> > \$         |  |
| <b>F. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                                  | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>                          |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |  | <b>Occupation</b>  | <b>Aggregate Year-to-Date</b> > \$         |  |
| <b>G. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                                  | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>                          |
| <b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify):            |  | <b>Occupation</b>  | <b>Aggregate Year-to-Date</b> > \$         |  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,500.00

92014102739



# SCHEDULE A

## ITEMIZED RECEIPTS

### OFFSETS TO OPERATING EXPENDITURES

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

PAGE 1 OF 1  
FOR LINE NUMBER 14

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |   |
|---|--|--|--|---|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Wild Promotions<br>12337 W. Dearbourn Avenue<br>Wauwatosa, WI 53226    |  | <b>Name of Employer</b><br>Refund of overpayment | <b>Date (month, day, year)</b><br>10/14/91 | <b>Amount of Each Receipt this Period</b><br>1,612.10 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b>                                | <b>Aggregate Year-to-Date</b> > \$         |   |
| <b>B. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                          | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b>                                | <b>Aggregate Year-to-Date</b> > \$         |   |
| <b>C. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                          | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b>                                | <b>Aggregate Year-to-Date</b> > \$         |   |
| <b>D. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                          | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b>                                | <b>Aggregate Year-to-Date</b> > \$         |   |
| <b>E. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                          | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b>                                | <b>Aggregate Year-to-Date</b> > \$         |   |
| <b>F. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                          | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b>                                | <b>Aggregate Year-to-Date</b> > \$         |   |
| <b>G. Full Name, Mailing Address and ZIP Code</b>   |  | <b>Name of Employer</b>                          | <b>Date (month, day, year)</b>             | <b>Amount of Each Receipt this Period</b>             |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | <b>Occupation</b>                                | <b>Aggregate Year-to-Date</b> > \$         |   |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,612.10

92014102739

# SCHEDULE A

## ITEMIZED RECEIPTS

### OTHER RECEIPTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 15

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |   |   |  |
|---|--|---|---|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Universal Savings Bank<br>754 North 4th Street<br>Milwaukee, WI 53203  |  | Name of Employer<br>Interest paid on accounts | Date (month, day, year)<br>07/31/91<br>07/31/91<br>08/07/91<br>08/13/91 | Amount of Each Receipt this Period<br>1,228.58<br>171.63<br>881.50<br>1,793.42 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | Occupation                                    |   | Aggregate Year-to-Date > \$  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Same as above  |  | Name of Employer                              | Date (month, day, year)<br>08/30/91<br>08/30/91<br>09/30/91<br>09/30/91 | Amount of Each Receipt this Period<br>713.27<br>101.23<br>812.65<br>245.64     |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | Occupation                                    |   | Aggregate Year-to-Date > \$  |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Same as above  |  | Name of Employer                              | Date (month, day, year)<br>10/31/91<br>10/31/91<br>11/06/91<br>11/29/91 | Amount of Each Receipt this Period<br>956.24<br>736.17<br>3,290.95<br>1,895.79 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | Occupation                                    |   | Aggregate Year-to-Date > \$  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Same as above  |  | Name of Employer                              | Date (month, day, year)<br>11/29/91<br>12/09/91<br>12/31/91<br>12/31/91 | Amount of Each Receipt this Period<br>255.45<br>1,595.53<br>3,040.18<br>185.46 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | Occupation                                    |   | Aggregate Year-to-Date > \$ 26,167.08  |
| <b>E. Full Name, Mailing Address and ZIP Code</b>   |  | Name of Employer                              | Date (month, day, year)   | Amount of Each Receipt this Period   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | Occupation                                    |   | Aggregate Year-to-Date > \$  |
| <b>F. Full Name, Mailing Address and ZIP Code</b>   |  | Name of Employer                              | Date (month, day, year)   | Amount of Each Receipt this Period   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | Occupation                                    |   | Aggregate Year-to-Date > \$  |
| <b>G. Full Name, Mailing Address and ZIP Code</b>   |  | Name of Employer                              | Date (month, day, year)   | Amount of Each Receipt this Period   |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  | Occupation                                    |   | Aggregate Year-to-Date > \$  |

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

17,903.69

9201402740

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 13  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

FRIENDS OF JIM MOODY #C00150813

|   |   |  |  |
|---|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Constellation Engineering<br>P.O. Box 91359<br>Milwaukee, WI 53203             | <b>Purpose of Disbursement</b><br>Computer services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>09/24/91                         | <b>Amount of Each Disbursement This Period</b><br>474.75                     |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>A to Z Printing, Inc.<br>6535 River Parkway<br>Wauwatosa, WI 53213             | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Date (month, day, year)</b><br>07/08/91<br>07/18/91<br>08/13/91 | <b>Amount of Each Disbursement This Period</b><br>354.00<br>454.71<br>708.97 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Date (month, day, year)</b><br>09/18/91                         | <b>Amount of Each Disbursement This Period</b><br>3,700.18                   |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Kid Sign Co.<br>7836 West Becher Street<br>West Allis, WI 53219                | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>211.00                     |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>American European Food<br>5625 West North Avenue<br>Milwaukee, WI 53208        | <b>Purpose of Disbursement</b><br>Event food<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Date (month, day, year)</b><br>08/16/91                         | <b>Amount of Each Disbursement This Period</b><br>1,107.75                   |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Milwaukee Athletic Club<br>758 North Broadway<br>Milwaukee, WI 53202           | <b>Purpose of Disbursement</b><br>Event charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Date (month, day, year)</b><br>08/13/91                         | <b>Amount of Each Disbursement This Period</b><br>468.84                     |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Madison Club<br>P.O. Box 7209<br>Madison, WI 53702                             | <b>Purpose of Disbursement</b><br>Dues<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>52.50                      |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Quill Stationary<br>P.O. Box 5900<br>Lincolnshire, IL                          | <b>Purpose of Disbursement</b><br>Office supplies<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>61.77                      |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Yood & Associates, Inc.<br>1442 North Farwell Ave. #602<br>Milwaukee, WI 53202 | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Date (month, day, year)</b><br>07/01/91                         | <b>Amount of Each Disbursement This Period</b><br>1,095.98                   |

**SUBTOTAL** of Disbursements This Page (optional) .....

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

92014402741

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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## NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |   |   |
|---|--|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Consultants Unlimited<br>5124 W. Wisconsin Avenue<br>Milwaukee, WI 53208        | Purpose of Disbursement<br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | Date (month, day, year)<br>09/18/91                                     | Amount of Each Disbursement This Period<br>367.83                               |
| B. Full Name, Mailing Address and ZIP Code<br>D.C. Employment Services<br>500 C Street, N.W.<br>Washington, D.C. 20001        | Purpose of Disbursement<br>Unemployment taxes<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | Date (month, day, year)<br>09/18/91                                     | Amount of Each Disbursement This Period<br>152.13                               |
| C. Full Name, Mailing Address and ZIP Code<br>State Medical Society<br>P.O. Box 1109<br>Madison, WI 53701                     | Purpose of Disbursement<br>List purchase<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | Date (month, day, year)<br>09/18/91                                     | Amount of Each Disbursement This Period<br>508.06                               |
| D. Full Name, Mailing Address and ZIP Code<br>Marc Plaza Hotel<br>509 West Wisconsin Avenue<br>Milwaukee, WI 53203            | Purpose of Disbursement<br>Event charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | Date (month, day, year)<br>07/08/91                                     | Amount of Each Disbursement This Period<br>460.41                               |
| E. Full Name, Mailing Address and ZIP Code<br>Lee John's Catering<br>330 Williams Street<br>Waukesha, WI 53186                | Purpose of Disbursement<br>Event food<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | Date (month, day, year)<br>08/02/91<br>09/18/91                         | Amount of Each Disbursement This Period<br>500.00<br>303.25                     |
| F. Full Name, Mailing Address and ZIP Code<br>Wisconsin Jewish Chronicle<br>1360 North Prospect Avenue<br>Milwaukee, WI 53202 | Purpose of Disbursement<br>Advertising<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | Date (month, day, year)<br>08/13/91                                     | Amount of Each Disbursement This Period<br>88.00                                |
| G. Full Name, Mailing Address and ZIP Code<br>Erin Ede<br>3469 North Pierce Street<br>Milwaukee, WI 53212                     | Purpose of Disbursement<br>Services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | Date (month, day, year)<br>07/01/91<br>09/26/91                         | Amount of Each Disbursement This Period<br>142.50<br>120.00                     |
| H. Full Name, Mailing Address and ZIP Code<br>Dept. Indust, Labor, & Human Rel.<br>125 Webster Street<br>Madison, WI 53702    | Purpose of Disbursement<br>WI Unemployment taxes<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year)<br>07/31/91<br>10/24/91                         | Amount of Each Disbursement This Period<br>220.03<br>517.84                     |
| I. Full Name, Mailing Address and ZIP Code<br>Ford Motor Credit, Co.<br>8989 North Deerwood<br>Milwaukee, WI 53223            | Purpose of Disbursement<br>Car lease<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)             | Date (month, day, year)<br>07/08/91<br>07/18/91<br>09/18/91<br>10/24/91 | Amount of Each Disbursement This Period<br>174.70<br>169.00<br>340.10<br>168.70 |

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

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

920144027-4-2

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |
|---|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Central Parking<br>807 North 2nd Street<br>Milwaukee, WI 53203                   | <b>Purpose of Disbursement</b><br>Parking for volunteers<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)               | <b>Date (month, day, year)</b><br>09/09/91<br>11/20/91             | <b>Amount of Each Disbursement This Period</b><br>211.00<br>158.25                 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>City of Milwaukee Election Comm.<br>200 East Wells Street<br>Milwaukee, WI 53202 | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Date (month, day, year)</b><br>09/05/91                         | <b>Amount of Each Disbursement This Period</b><br>400.00                           |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Paychex, Inc.<br>375 Bishops Way<br>Brookfield, WI 53005                         | <b>Purpose of Disbursement</b><br>Payroll, payroll services<br>payroll<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>07/01/91<br>07/08/91<br>07/15/91 | <b>Amount of Each Disbursement This Period</b><br>562.47<br>38.95<br>690.54        |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Payroll, payroll services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Date (month, day, year)</b><br>07/31/91<br>08/13/91<br>08/15/91 | <b>Amount of Each Disbursement This Period</b><br>1,046.54<br>38.15<br>1,275.60    |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Payroll & payroll services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Date (month, day, year)</b><br>08/30/91<br>09/15/91<br>09/18/91 | <b>Amount of Each Disbursement This Period</b><br>1,093.66<br>1,869.29<br>46.38    |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Payroll, payroll services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Date (month, day, year)</b><br>09/27/91<br>10/11/91<br>10/10/91 | <b>Amount of Each Disbursement This Period</b><br>3,642.10<br>2,537.54<br>61.05    |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Payroll, payroll services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Date (month, day, year)</b><br>10/25/91<br>11/08/91<br>11/22/91 | <b>Amount of Each Disbursement This Period</b><br>2,320.76<br>2,455.11<br>1,967.62 |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Payroll, payroll services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Date (month, day, year)</b><br>12/06/91<br>12/04/91<br>12/20/91 | <b>Amount of Each Disbursement This Period</b><br>2,616.64<br>86.78<br>2,179.92    |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Kit Wood<br>10019 Menlo Avenue<br>Silver Spring, MD 20910                        | <b>Purpose of Disbursement</b><br>Event food<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                           | <b>Date (month, day, year)</b><br>11/13/91                         | <b>Amount of Each Disbursement This Period</b><br>800.00                           |

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92014402743

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |
|---|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Internal Revenue Service<br>2306 Bannister Road<br>Kansas City, MO 64131 | <b>Purpose of Disbursement</b><br>Taxes, 2nd Q. W/H, & Fed U.C.<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)        | <b>Date (month, day, year)</b><br>07/08/91<br>07/15/91<br>07/31/91 | <b>Amount of Each Disbursement This Period</b><br>123.92<br>680.41<br>134.34     |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>3rd Q. W/H & Fed U.C.<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                | <b>Date (month, day, year)</b><br>09/15/91<br>10/24/91<br>10/15/91 | <b>Amount of Each Disbursement This Period</b><br>1,035.16<br>100.15<br>1,935.43 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>4th Q. W/H<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                           | <b>Date (month, day, year)</b><br>11/13/91<br>12/17/91             | <b>Amount of Each Disbursement This Period</b><br>2,005.58<br>1,861.86           |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Jim Moody<br>3946 North Farwell Avenue<br>Milwaukee, WI 53211            | <b>Purpose of Disbursement</b><br>In-kind housing for campaign workers<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify) | <b>Date (month, day, year)</b><br>07/01/91<br>to<br>12/31/91       | <b>Amount of Each Disbursement This Period</b><br>1,500.00<br>(In-Kind)          |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Diamond Graphics<br>6324 West Fond du Lac Avenue<br>Milwaukee, WI 53218  | <b>Purpose of Disbursement</b><br>Printing<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                             | <b>Date (month, day, year)</b><br>11/23/91                         | <b>Amount of Each Disbursement This Period</b><br>266.39                         |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Michael Ruzicka<br>8868 W. Waterford Square<br>Greenfield, WI 53228      | <b>Purpose of Disbursement</b><br>Printing & travel reims.<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)             | <b>Date (month, day, year)</b><br>07/08/91<br>09/26/91<br>10/24/91 | <b>Amount of Each Disbursement This Period</b><br>46.35<br>118.91<br>55.65       |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Supply reimbursement<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                 | <b>Date (month, day, year)</b><br>12/04/91                         | <b>Amount of Each Disbursement This Period</b><br>199.59                         |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Pendl Company<br>550 Elizabeth Street<br>Waukesha, WI 53186              | <b>Purpose of Disbursement</b><br>Computer supplies<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                    | <b>Date (month, day, year)</b><br>12/04/91                         | <b>Amount of Each Disbursement This Period</b><br>124.95                         |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Trina Hass<br>2534 N. Terrace Avenue<br>Milwaukee, WI 53202              | <b>Purpose of Disbursement</b><br>Event food reimbursement<br><b>Disbursement for:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)             | <b>Date (month, day, year)</b><br>12/03/91                         | <b>Amount of Each Disbursement This Period</b><br>400.00                         |

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92014402744

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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**NAME OF COMMITTEE (in Full):**

FRIENDS OF JIM MOODY #C00150813

|  |  |  |  |
|--|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Bethesda Engravers<br>5801 Erdman Avenue<br>Baltimore, MD 21205                       | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b><br>11/12/91                         | <b>Amount of Each Disbursement This Period</b><br>310.85                     |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Allied Printing & Graphics, Inc.<br>14100 W. Cleveland Avenue<br>New Berlin, WI 53151 | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b><br>11/25/91                         | <b>Amount of Each Disbursement This Period</b><br>760.35                     |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Michael Donovan<br>2413 North Fratney Street<br>Milwaukee, WI 53212                   | <b>Purpose of Disbursement</b><br>Consulting & travel reimb.<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>12/05/91<br>12/05/91             | <b>Amount of Each Disbursement This Period</b><br>450.00<br>95.00            |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Bill Kaplan<br>4014 Lorcom Lane<br>Arlington, VA 22207                                | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | <b>Date (month, day, year)</b><br>11/13/91                         | <b>Amount of Each Disbursement This Period</b><br>2,000.00                   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Diners Club<br>P.O. Box 6002<br>The Lakes, NV 88901                                   | <b>Purpose of Disbursement</b><br>Travel<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Date (month, day, year)</b><br>07/18/91<br>08/02/91<br>11/14/91 | <b>Amount of Each Disbursement This Period</b><br>240.00<br>352.54<br>142.89 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Le Mistral Restaurant<br>223 Pennsylvania Ave., S.E.<br>Washington, D.C. 20001        | <b>Purpose of Disbursement</b><br>Event charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>782.98                     |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Mary Carroll<br>E. 86th Street<br>New York, N.Y. 10020                                | <b>Purpose of Disbursement</b><br>Event reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)        | <b>Date (month, day, year)</b><br>07/19/91                         | <b>Amount of Each Disbursement This Period</b><br>628.29                     |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Robert Frieber (contributor)<br>410 East Green Tree Road<br>Milwaukee, WI 53217       | <b>Purpose of Disbursement</b><br>Meeting charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Date (month, day, year)</b><br>11/20/91                         | <b>Amount of Each Disbursement This Period</b><br>61.87<br>(In-kind)         |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Sheraton Park Avenue Hotel<br>Park Avenue<br>New York, N.Y. 10021                     | <b>Purpose of Disbursement</b><br>Event charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>07/19/91                         | <b>Amount of Each Disbursement This Period</b><br>1,328.50                   |

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**

FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Droegkamp Travel<br>14023 W. Greenfield Avenue<br>New Berlin, WI 53151          | <b>Purpose of Disbursement</b><br>Travel expense<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Date (month, day, year)</b><br>08/17/91<br>08/22/91<br>09/18/91 | <b>Amount of Each Disbursement This Period</b><br>200.00<br>725.00<br>1,263.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Travel expense<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Date (month, day, year)</b><br>10/10/91<br>11/13/91             | <b>Amount of Each Disbursement This Period</b><br>428.00<br>770.00             |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Marcus Kunian<br>1127 North 44th Street<br>Milwaukee, WI 53203                  | <b>Purpose of Disbursement</b><br>Supply & travel reims.<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Date (month, day, year)</b><br>08/16/91<br>08/19/91<br>09/03/91 | <b>Amount of Each Disbursement This Period</b><br>90.00<br>223.51<br>85.15     |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Wisconsin Dept. of Revenue<br>125 S. Webster<br>Madison, WI 53702               | <b>Purpose of Disbursement</b><br>2nd & 3rd Quarter W/H's<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>07/31/91<br>10/30/91             | <b>Amount of Each Disbursement This Period</b><br>43.78<br>325.41              |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Struble Totten Communications<br>540 7th Street, S.E.<br>Washington, D.C. 20003 | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>08/15/91<br>10/29/91             | <b>Amount of Each Disbursement This Period</b><br>10,000.00<br>10,000.00       |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Alan Zepp<br>4530 N. Wilson Drive<br>Shorewood, WI 53211                        | <b>Purpose of Disbursement</b><br>Travel & food reims.<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Date (month, day, year)</b><br>07/01/91<br>07/12/91<br>10/10/91 | <b>Amount of Each Disbursement This Period</b><br>274.67<br>96.00<br>28.95     |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Travel reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)    | <b>Date (month, day, year)</b><br>10/24/91                         | <b>Amount of Each Disbursement This Period</b><br>113.40                       |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Hersh Mailing Service<br>P.O. Box 7174<br>Arlington, VA 22207                   | <b>Purpose of Disbursement</b><br>Mailing expense<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)         | <b>Date (month, day, year)</b><br>10/24/91                         | <b>Amount of Each Disbursement This Period</b><br>148.00                       |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>AT & T<br>P.O. Box 85950<br>Louisville, KY 40285                                | <b>Purpose of Disbursement</b><br>Phone charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Date (month, day, year)</b><br>07/08/91<br>09/18/91<br>10/10/91 | <b>Amount of Each Disbursement This Period</b><br>195.58<br>470.72<br>187.36   |

**SUBTOTAL** of Disbursements This Page (optional) .....

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

92014402746



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Jim Cunningham<br>754 Colonial Trace<br>Frankfurt, KY 40601                 | <b>Purpose of Disbursement</b><br>Consulting (2), & supply reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Date (month, day, year)</b><br>09/30/91<br>10/23/91<br>11/04/91 | <b>Amount of Each Disbursement This Period</b><br>8,000.00<br>8,000.00<br>425.48 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Supply reimbursement & consulting & supply reimb.<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>11/21/91<br>11/25/91<br>12/03/91 | <b>Amount of Each Disbursement This Period</b><br>155.63<br>8,000.00<br>148.31   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>VISA<br>P.O. Box 182158<br>Columbus, OH 43218                               | <b>Purpose of Disbursement</b><br>Travel reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                              | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>5,719.31                       |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Northwest Airlines<br>Minneapolis, MN                                       | <b>Purpose of Disbursement</b><br>Travel<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>1,759.78<br>(MEMO)             |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Marc Plaza Hotel<br>509 West Wisconsin Avenue<br>Milwaukee, WI 53203        | <b>Purpose of Disbursement</b><br>Event charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                     | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>400.66<br>(MEMO)               |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Pan Am Airlines<br>New York, NY   | <b>Purpose of Disbursement</b><br>Travel<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>353.00<br>(MEMO)               |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>United Airlines<br>Chicago, IL  | <b>Purpose of Disbursement</b><br>Travel<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>284.00<br>(MEMO)               |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Heiser Ford<br>2319 North Prospect Avenue<br>Milwaukee, WI 53202            | <b>Purpose of Disbursement</b><br>Car repair<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Date (month, day, year)</b><br>07/08/91                         | <b>Amount of Each Disbursement This Period</b><br>276.94<br>(MEMO)               |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Fraioli/Jost, Inc.<br>555 New Jersey Avenue, N.W.<br>Washington, D.C. 20001 | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)  | <b>Date (month, day, year)</b><br>11/14/91                         | <b>Amount of Each Disbursement This Period</b><br>4,000.00                       |

**SUBTOTAL** of Disbursements This Page (optional) .....

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

92014402747

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Cantrell Cutter, Inc.<br>499 South Capitol Street, S.W.<br>Washington, D.C. 20003 | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                             | <b>Date (month, day, year)</b><br>07/08/91<br>08/13/91<br>09/18/91 | <b>Amount of Each Disbursement This Period</b><br>502.64<br>828.77<br>293.72 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                             | <b>Date (month, day, year)</b><br>10/24/91                         | <b>Amount of Each Disbursement This Period</b><br>1,069.08                   |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Cormac Flynn<br>33 West 8th Street<br>New York, NY 10011                          | <b>Purpose of Disbursement</b><br>Consulting (2), travel reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify) | <b>Date (month, day, year)</b><br>07/01/91<br>07/15/91<br>07/16/91 | <b>Amount of Each Disbursement This Period</b><br>750.00<br>750.00<br>223.41 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Consulting (2), travel reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify) | <b>Date (month, day, year)</b><br>07/31/91<br>08/13/91<br>08/21/91 | <b>Amount of Each Disbursement This Period</b><br>750.00<br>750.00<br>92.58  |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Consulting (2), travel reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify) | <b>Date (month, day, year)</b><br>08/30/91<br>09/10/91<br>09/18/91 | <b>Amount of Each Disbursement This Period</b><br>750.00<br>750.00<br>406.72 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Consulting (2), travel reimbursement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify) | <b>Date (month, day, year)</b><br>09/27/91<br>10/15/91<br>10/24/91 | <b>Amount of Each Disbursement This Period</b><br>750.00<br>750.00<br>59.01  |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                           | <b>Date (month, day, year)</b><br>10/28/91                         | <b>Amount of Each Disbursement This Period</b><br>550.00                     |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Ameritech Credit Corp.<br>2550 W. Golf Road<br>Rolling Meadows, IL 60008          | <b>Purpose of Disbursement</b><br>Phone lease<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                          | <b>Date (month, day, year)</b><br>10/15/91                         | <b>Amount of Each Disbursement This Period</b><br>290.45                     |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Quick! The Printer<br>717 N. Plankinton Avenue<br>Milwaukee, WI 53203             | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br>Other (specify)                             | <b>Date (month, day, year)</b><br>08/13/91<br>09/26/91             | <b>Amount of Each Disbursement This Period</b><br>577.58<br>74.22            |

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920144027-48

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |
|---|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Adventur Graphics<br>5401 North 76th Street<br>Milwaukee, WI 53218               | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Date (month, day, year)</b><br>07/08/91<br>07/18/91<br>08/13/91 | <b>Amount of Each Disbursement This Period</b><br>1,338.36<br>770.45<br>783.87 |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Printing<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                             | <b>Date (month, day, year)</b><br>09/26/91                         | <b>Amount of Each Disbursement This Period</b><br>514.84                       |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Mark Thomann<br>2413 N. Fratney Street<br>Milwaukee, WI 53212                    | <b>Purpose of Disbursement</b><br>Consulting & travel reimbursements<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)   | <b>Date (month, day, year)</b><br>11/04/91<br>11/04/91<br>11/06/91 | <b>Amount of Each Disbursement This Period</b><br>800.00<br>95.40<br>51.50     |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Consulting, supply reimb, consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>11/18/91<br>11/25/91<br>11/27/91 | <b>Amount of Each Disbursement This Period</b><br>800.00<br>39.73<br>800.00    |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                           | <b>Date (month, day, year)</b><br>12/11/91                         | <b>Amount of Each Disbursement This Period</b><br>900.00                       |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Wisconsin Newspaper Association<br>702 North Midvale Avenue<br>Madison, WI 53705 | <b>Purpose of Disbursement</b><br>Clipping service<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Date (month, day, year)</b><br>07/08/91<br>07/18/91<br>08/13/91 | <b>Amount of Each Disbursement This Period</b><br>80.69<br>99.91<br>68.29      |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Clipping service<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Date (month, day, year)</b><br>09/26/91<br>10/10/91             | <b>Amount of Each Disbursement This Period</b><br>104.56<br>84.10              |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Germania Building<br>135 West Wells Street #300<br>Milwaukee, WI 53203           | <b>Purpose of Disbursement</b><br>Office rent<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                          | <b>Date (month, day, year)</b><br>07/08/91<br>08/13/91<br>09/26/91 | <b>Amount of Each Disbursement This Period</b><br>472.96<br>233.17<br>247.29   |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Same as above  | <b>Purpose of Disbursement</b><br>Office rent<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                          | <b>Date (month, day, year)</b><br>10/10/91                         | <b>Amount of Each Disbursement This Period</b><br>259.90                       |

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92013402749

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Stephen J. Cady<br>1542 N. Cass Street<br>Milwaukee, WI 53202               | <b>Purpose of Disbursement</b><br>Services, travel reimb,<br>services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>07/15/91<br>07/26/91<br>08/13/91 | <b>Amount of Each Disbursement This Period</b><br>100.00<br>73.25<br>100.00        |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Services, travel reimb,<br>services<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>09/18/91<br>10/10/91<br>10/10/91 | <b>Amount of Each Disbursement This Period</b><br>100.00<br>97.31<br>100.00        |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Travel & supply reimb.<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>11/21/91<br>12/10/91             | <b>Amount of Each Disbursement This Period</b><br>56.97<br>110.52                  |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Rosemary Cribben<br>3220 N Street, N.W.<br>Washington, D.C. 20007           | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                          | <b>Date (month, day, year)</b><br>07/01/91<br>07/14/91<br>07/26/91 | <b>Amount of Each Disbursement This Period</b><br>2,500.00<br>2,500.00<br>2,500.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                          | <b>Date (month, day, year)</b><br>08/13/91<br>08/27/91<br>09/13/91 | <b>Amount of Each Disbursement This Period</b><br>2,500.00<br>2,500.00<br>2,500.00 |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                          | <b>Date (month, day, year)</b><br>10/03/91<br>10/10/91<br>10/31/91 | <b>Amount of Each Disbursement This Period</b><br>2,500.00<br>2,500.00<br>2,500.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Travel reimb & consulting<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Date (month, day, year)</b><br>11/26/91<br>12/02/91             | <b>Amount of Each Disbursement This Period</b><br>358.00<br>2,500.00               |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Commercial Stationary<br>725 North Plankinton Avenue<br>Milwaukee, WI 53203 | <b>Purpose of Disbursement</b><br>Office supplies<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Date (month, day, year)</b><br>07/08/91<br>08/13/91<br>09/26/91 | <b>Amount of Each Disbursement This Period</b><br>208.05<br>117.71<br>146.58       |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Office supplies<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | <b>Date (month, day, year)</b><br>12/09/91                         | <b>Amount of Each Disbursement This Period</b><br>95.86                            |

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

FRIENDS OF JIM MOODY #C00150813

|  |  |                                     |   |
|--|--|-------------------------------------|---|
| A. Full Name, Mailing Address and ZIP Code<br>Postmaster<br>Milwaukee, WI 53201                                | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>07/01/91 | Amount of Each Disbursement This Period<br>1,160.00 |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 07/03/91                            | 58.00   |
|  | Other (specify)  | 07/19/91                            | 500.00  |
| B. Full Name, Mailing Address and ZIP Code<br>Same as above  | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>07/22/91 | Amount of Each Disbursement This Period<br>1,160.00 |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 07/26/91                            | 20.30   |
|  | Other (specify)  | 07/26/91                            | 1,000.00  |
| C. Full Name, Mailing Address and ZIP Code<br>Same as above  | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>07/29/91 | Amount of Each Disbursement This Period<br>15.66    |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 08/13/91                            | 1,305.00  |
|  | Other (specify)  | 09/05/91                            | 1,000.00  |
| D. Full Name, Mailing Address and ZIP Code<br>Same as above  | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>09/13/91 | Amount of Each Disbursement This Period<br>343.36   |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 09/17/91                            | 1,800.00  |
|  | Other (specify)  | 09/18/91                            | 413.95  |
| E. Full Name, Mailing Address and ZIP Code<br>Same as above  | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>09/30/91 | Amount of Each Disbursement This Period<br>550.00   |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 10/10/91                            | 17.50   |
|  | Other (specify)  | 10/21/91                            | 870.00  |
| F. Full Name, Mailing Address and ZIP Code<br>Same as above  | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>10/29/91 | Amount of Each Disbursement This Period<br>250.00   |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 10/30/91                            | 58.54   |
|  | Other (specify)  | 11/04/91                            | 580.00  |
| G. Full Name, Mailing Address and ZIP Code<br>Same as above  | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>11/04/91 | Amount of Each Disbursement This Period<br>25.04    |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 11/20/91                            | 725.00  |
|  | Other (specify)  | 11/22/91                            | 1,000.00  |
| H. Full Name, Mailing Address and ZIP Code<br>Same as above  | Purpose of Disbursement<br>Postage   | Date (month, day, year)<br>11/23/91 | Amount of Each Disbursement This Period<br>290.00   |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 12/05/91                            | 145.00  |
|  | Other (specify)  |                                     |   |
| I. Full Name, Mailing Address and ZIP Code<br>Wild Promotions<br>12337 Dearbourn Avenue<br>Wauwatosa, WI 53226 | Purpose of Disbursement<br>Printing  | Date (month, day, year)<br>08/13/91 | Amount of Each Disbursement This Period<br>469.59   |
|  | Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | 08/13/91                            | 1,277.02  |
|  | Other (specify)  | 09/26/91                            | 4,023.04  |

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

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

99014402751

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 12 OF 13  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

FRIENDS OF JIM MOODY #C00150813

|  |  |  |  |
|--|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>James Office Equipment<br>P.O. Box 1644<br>Waukesha, WI 53187             | <b>Purpose of Disbursement</b><br>Equipment lease<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)            | <b>Date (month, day, year)</b><br>10/14/91                         | <b>Amount of Each Disbursement This Period</b><br>372.15                     |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Wisconsin State Elections Board<br>132 South Wilson<br>Madison, WI 53705  | <b>Purpose of Disbursement</b><br>Printing charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Date (month, day, year)</b><br>08/09/91<br>10/08/91<br>10/17/91 | <b>Amount of Each Disbursement This Period</b><br>231.00<br>896.20<br>148.40 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Printing charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)           | <b>Date (month, day, year)</b><br>10/17/91                         | <b>Amount of Each Disbursement This Period</b><br>37.05                      |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>Milwaukee Telephone<br>P.O. Box 1650<br>Milwaukee, WI 53201               | <b>Purpose of Disbursement</b><br>Phone charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>07/08/91<br>07/18/91<br>08/13/91 | <b>Amount of Each Disbursement This Period</b><br>141.52<br>99.63<br>93.05   |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Phone charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>09/26/91                         | <b>Amount of Each Disbursement This Period</b><br>126.01                     |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>National Democratic Club<br>30 Ivy Street, S.E.<br>Washington, D.C. 20003 | <b>Purpose of Disbursement</b><br>Dues, event charges & dues<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>07/08/91<br>08/13/91<br>09/18/91 | <b>Amount of Each Disbursement This Period</b><br>12.50<br>365.66<br>12.50   |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Dues<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                       | <b>Date (month, day, year)</b><br>10/24/91                         | <b>Amount of Each Disbursement This Period</b><br>12.50                      |
| <b>H. Full Name, Mailing Address and ZIP Code</b><br>Wisconsin Bell<br>742 North Broadway<br>Milwaukee, WI 53202               | <b>Purpose of Disbursement</b><br>Phone charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>07/08/91<br>08/13/91<br>09/26/91 | <b>Amount of Each Disbursement This Period</b><br>139.06<br>145.77<br>364.20 |
| <b>I. Full Name, Mailing Address and ZIP Code</b><br>Same as above   | <b>Purpose of Disbursement</b><br>Phone charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)              | <b>Date (month, day, year)</b><br>10/24/91                         | <b>Amount of Each Disbursement This Period</b><br>612.13                     |

**SUBTOTAL** of Disbursements This Page (optional) .....

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

92014402752

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 13 OF 13  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

FRIENDS OF JIM MOODY #C00150813

|   |  |  |  |
|---|--|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Madison Club<br>P.O. Box 7209<br>Madison, WI 53702 | <b>Purpose of Disbursement</b><br>Dues & meeting charges<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>08/13/91<br>09/26/91 | <b>Amount of Each Disbursement This Period</b><br>106.59<br>364.25 |
| <b>B. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |
| <b>C. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |
| <b>D. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |
| <b>E. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |
| <b>F. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |
| <b>G. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |
| <b>H. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |
| <b>I. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                      | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                     |

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

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

186,395.19

92014402753

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 19(a)

**REPAYMENTS OF LOANS MADE BY CANDIDATE**

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**NAME OF COMMITTEE (in Full)**

FRIENDS OF JIM MOODY #C00150813

|  |   |  |  |
|--|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Jim Moody<br>3946 North Farwell Avenue<br>Milwaukee, WI 53211 | <b>Purpose of Disbursement</b><br>Loan repayment<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>07/18/91<br>07/26/91 | <b>Amount of Each Disbursement This Period</b><br>97,000.00<br>88,000.00 |
| <b>B. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |
| <b>C. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |
| <b>D. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |
| <b>E. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |
| <b>F. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |
| <b>G. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |
| <b>H. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |
| <b>I. Full Name, Mailing Address and ZIP Code</b>  | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | <b>Date (month, day, year)</b>                         | <b>Amount of Each Disbursement This Period</b>                           |

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

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

185,000.00

92014402754



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21

**OTHER DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**

FRIENDS OF JIM MOODY #C00150813

|   |   |  |  |
|---|---|--|--|
| <b>A. Full Name, Mailing Address and ZIP Code</b><br>Milwaukee CO. Democratic Party<br>6525 W. Bluemound<br>Milwaukee, WI 53213                 | <b>Purpose of Disbursement</b><br>Convention charge<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>07/08/91 | <b>Amount of Each Disbursement This Period</b><br>30.00  |
| <b>B. Full Name, Mailing Address and ZIP Code</b><br>Democratic Senatorial Camp. Comm.<br>430 S. Capitol Street, S.E.<br>Washington, D.C. 20003 | <b>Purpose of Disbursement</b><br>Event ticket<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Date (month, day, year)</b><br>10/16/91 | <b>Amount of Each Disbursement This Period</b><br>125.00 |
| <b>C. Full Name, Mailing Address and ZIP Code</b><br>Mil. Common Council Picnic Fund<br>200 East Wells Street<br>Milwaukee, WI 53202            | <b>Purpose of Disbursement</b><br>Event ticket<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)      | <b>Date (month, day, year)</b><br>09/05/91 | <b>Amount of Each Disbursement This Period</b><br>125.00 |
| <b>D. Full Name, Mailing Address and ZIP Code</b><br>State Senate Democratic Comm.<br>P.O. Box 164<br>Madison, WI 53701                         | <b>Purpose of Disbursement</b><br>Donation<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)          | <b>Date (month, day, year)</b><br>09/05/91 | <b>Amount of Each Disbursement This Period</b><br>100.00 |
| <b>E. Full Name, Mailing Address and ZIP Code</b><br>Waukesha CO. Democratic Party<br>1436-A Big Bend Road<br>Waukesha, WI 53186                | <b>Purpose of Disbursement</b><br>List purchase<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Date (month, day, year)</b><br>08/27/91 | <b>Amount of Each Disbursement This Period</b><br>20.00  |
| <b>F. Full Name, Mailing Address and ZIP Code</b><br>Hollywood Women's Political Comm.<br>6380 Willshire Boulevard<br>Los Angeles, CA 90048     | <b>Purpose of Disbursement</b><br>Advertisement<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)     | <b>Date (month, day, year)</b><br>07/18/91 | <b>Amount of Each Disbursement This Period</b><br>300.00 |
| <b>G. Full Name, Mailing Address and ZIP Code</b><br>Douglass CO. Democratic Party<br>1407 Hammond Avenue<br>Superior, WI 54880                 | <b>Purpose of Disbursement</b><br>Event sponsorship<br>Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | <b>Date (month, day, year)</b><br>08/23/91 | <b>Amount of Each Disbursement This Period</b><br>50.00  |
| <b>H. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                 | <b>Date (month, day, year)</b>             | <b>Amount of Each Disbursement This Period</b>           |
| <b>I. Full Name, Mailing Address and ZIP Code</b>   | <b>Purpose of Disbursement</b><br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                                 | <b>Date (month, day, year)</b>             | <b>Amount of Each Disbursement This Period</b>           |

**SUBTOTAL** of Disbursements This Page (optional) .....

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

750.00

92014402755

**SCHEDULE C**  
(Revised 3/80)

**LOANS**

Page 1 of 1 for  
LINE NUMBER 13  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full)  
**FRIENDS OF JIM MOODY #C00150813**

A. Full Name, Mailing Address and ZIP Code of Loan Source

Jim Moody  
3946 North Farwell Avenue  
Milwaukee, WI 53211

Original Amount  
of Loan  
175,000.00  
10,000.00

Cumulative Payment  
To Date  
185,000.00

Balance Outstanding at  
Close of This Period  
-0-

Election: ☐ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred 6/27/80 Date Due \_\_\_\_\_

Interest Rate \_\_\_\_\_ % (apr)

☐ Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:  
\$

2. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:  
\$

3. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:  
\$

B. Full Name, Mailing Address and ZIP Code of Loan Source

Jim Moody  
3946 North Farwell Avenue  
Milwaukee, WI 53211

Original Amount  
of Loan  
185,000.00

Cumulative Payment  
To Date

Balance Outstanding at  
Close of This Period  
185,000.00

Election: ☐ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred 9/24/91 Date Due Open

Interest Rate 5 % (apr)

☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:  
\$

2. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:  
\$

3. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:  
\$

SUBTOTALS This Period This Page (optional) . . . . .

TOTALS This Period (last page in this line only) . . . . .

185,000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

92014402756