

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 8</b>
			FOR LINE NUMBER <b>11A1</b>

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**NAME OF COMMITTEE (In Full)**  
**Alberly for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> James B. Bacon  4340 Nottingham Ave.  Youngstown OH 44511 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Businessman Aggregate Year-to-Date > \$ 550.00	Date (month, day, year) 10/13/2000	Amount of Each Receipt this Period 50.00 campaign contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Daniel Becker  120 Overlook Blvd.  Struthers OH 44471 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Business Aggregate Year-to-Date > \$ 700.00	Date (month, day, year) 10/15/2000	Amount of Each Receipt this Period 500.00 campaign contribution
<b>Full Name, Mailing Address, and ZIP Code</b> W.W. Bresnahan  7338 Spring Lake Ln.  Canfield OH 44406 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Businessman Aggregate Year-to-Date > \$ 275.00	Date (month, day, year) 10/18/2000	Amount of Each Receipt this Period 200.00 campaign contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Thomas Bumbrier  3665 Hunters Hill  Poland OH 44514 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Businessman Aggregate Year-to-Date > \$ 325.00	Date (month, day, year) 10/06/2000	Amount of Each Receipt this Period 250.00 campaign contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Robert A. Cakagni  8115 Bendemeer Dr.  Poland OH 44514 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Business Owner Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 10/05/2000	Amount of Each Receipt this Period 100.00 campaign contribution
<b>Full Name, Mailing Address, and ZIP Code</b> Albert Dr. Celco  7357 Oak Drive  Poland OH 44514 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer none  Occupation Retired Dentist Aggregate Year-to-Date > \$ 650.00	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 100.00 campaign contribution
<b>Full Name, Mailing Address, and ZIP Code</b> James Collier  7054 Indian Trail  Poland OH 44514 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer   Occupation Professor Aggregate Year-to-Date > \$ 235.84	Date (month, day, year) 10/03/2000	Amount of Each Receipt this Period 50.00 campaign contribution

**SUBTOTALS** of Receipts This Page (Optional) .....

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