

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11 (REV)

**Contributions from Individuals/Persons**

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**NAME OF COMMITTEE (In Full)**

Steberow for Senate C00344473

<b>A. Full Name, Mailing Address and ZIP Code</b> Rod A Grieshaber 4778 W Michigan Ave Ypsilanti, MI 48197  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Retired	9/12/00	
Aggregate Year-to-Date >		\$	\$500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Rod A Grieshaber 4778 W Michigan Ave Ypsilanti, MI 48197  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Retired	8/7/00	
Aggregate Year-to-Date >		\$	\$500.00
<b>C. Full Name, Mailing Address and ZIP Code</b> W Randolph Barnhart 544 Columbine St Denver, CO 80208  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Browney Hillard & Barnhart	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Attorney	9/20/00	
Aggregate Year-to-Date >		\$	\$250.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Deborah E McFarland 6614 39th St NW Washington, DC 20016  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Retired	9/19/00	
Aggregate Year-to-Date >		\$	\$1,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Robert Gordon 28405 Eastbrook Ct Farmington Hills, MI 48334-4252  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Retired	9/20/00	
Aggregate Year-to-Date >		\$	\$1,500.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Bettylu K Saltzman 181 E Chicago Ave Chicago, IL 60611-2601  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Homemaker	8/25/00	
Aggregate Year-to-Date >		\$	\$1,500.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Rachel Rion 18151 Mayfield St Livonia, MI 48152-4425  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Retired	8/7/00	
Aggregate Year-to-Date >		\$	\$275.00

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

\$2,375.00

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