

| SCHEDULE A | | ITEMIZED RECEIPTS | | Use separate schedule(s) for each category of the Detailed Summary Page | 11 / 31 |
|---|--|--|--|---|----------------|
| | | | | FOR LINE NUMBER 11A1 | |
| 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) BOB NEY FOR CONGRESS | | | | | |
| Full Name, Mailing Address, and ZIP Code CHERYLE M. WILLIAMSON 1040 N. LAKE SHORE DRIVE 25B CHICAGO IL 60611-1171 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Name of Employer INFORMATION REQUEST PENDING Occupation Aggregate Year-to-Date > \$ 1000.00 | Date (month, day, year) 11/01/2000 | Amount of Each Receipt this Period 1000.00 | | |
| Full Name, Mailing Address, and ZIP Code THOMAS H. HARDY 1759 COVENTRY ROAD COLUMBUS OH 43212 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Name of Employer INSURANCE TRADE ASSOC. Occupation PRESIDENT Aggregate Year-to-Date > \$ 1000.00 | Date (month, day, year) 11/02/2000 | Amount of Each Receipt this Period 1000.00 | | |
| Full Name, Mailing Address, and ZIP Code RICHARD L. RIESBECK P.O. BOX 459 13 YORKSHIRE DRIVE ST. CLAIRSVILLE OH 43950 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Name of Employer RIESBECK'S FOOD MARKETS Occupation PRESIDENT Aggregate Year-to-Date > \$ 850.00 | Date (month, day, year) 11/03/2000 | Amount of Each Receipt this Period 500.00 | | |
| Full Name, Mailing Address, and ZIP Code CAROLYN CLIMACO 10 WENDEN COURT CLEVELAND OH 44108 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Name of Employer Occupation HOMEMAKER Aggregate Year-to-Date > \$ 1000.00 | Date (month, day, year) 11/04/2000 | Amount of Each Receipt this Period 1000.00 | | |
| Full Name, Mailing Address, and ZIP Code JOHN R. CLIMACO 1228 EUCLID AVENUE SUITE 900 CLEVELAND OH 44115 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Name of Employer SELF EMPLOYED Occupation ATTORNEY Aggregate Year-to-Date > \$ 1000.00 | Date (month, day, year) 11/04/2000 | Amount of Each Receipt this Period 1000.00 | | |
| Full Name, Mailing Address, and ZIP Code RICHARD B. COLBY 7253 HOPEWELL CT. DUBLIN OH 43017 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Name of Employer COLBY & CO. Occupation PRESIDENT Aggregate Year-to-Date > \$ 400.00 | Date (month, day, year) 11/04/2000 | Amount of Each Receipt this Period 250.00 | | |
| Full Name, Mailing Address, and ZIP Code BARBARA D. PADDEN 3020 GLENDALE ROAD STEUBENVILLE OH 43952 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : | Name of Employer Occupation RETIRED Aggregate Year-to-Date > \$ 1000.00 | Date (month, day, year) 11/04/2000 | Amount of Each Receipt this Period 1000.00 | | |
| SUBTOTALS of Receipts This Page (Optional) | | | | | |
| TOTALS This Period (last page this line number only) | | | | | |