

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE **1** OF **1**  
FOR LINE NUMBER **11a(i)**

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**NAME OF COMMITTEE (In Full)**

**A I M Management Group Inc. For A Better America**

<b>A. Full Name, Mailing Address and ZIP Code</b> Carolyn Taylor 3926 Club Valley Drive Houston, TX 77082		Name of Employer <b>A I M Management Group Inc.</b>	Date (month, day, year) <b>7/31/98</b>	Amount of Each Receipt this Period <b>300.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation <b>Investments</b>	Aggregate Year-to-Date > \$ <b>300.00</b>	
<b>B. Full Name, Mailing Address and ZIP Code</b> Mark Santero 4138 Rice Blvd. Houston, TX 77005		Name of Employer <b>A I M Management Group Inc.</b>	Date (month, day, year) <b>7/31/98</b>	Amount of Each Receipt this Period <b>1,000.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation <b>Investments</b>	Aggregate Year-to-Date > \$ <b>1,000.00</b>	
<b>C. Full Name, Mailing Address and ZIP Code</b> Gene Needles 428 East First St. Hinsdale, IL 60521		Name of Employer <b>A I M Management Group Inc.</b>	Date (month, day, year) <b>7/31/98</b>	Amount of Each Receipt this Period <b>200.00</b>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation <b>Investments</b>	Aggregate Year-to-Date > \$ <b>200.00</b>	
<b>D. 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 <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
<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 <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 <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 <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)

**1,500.00**