

SCHEDULE A-P

Federal Election Commission
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Washington, D.C. 20483

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NAME OF COMMITTEE (in Full) LUGAR FOR PRESIDENT		DATE (MONTH, DAY, YEAR)	AMOUNT OF EACH RECEIPT THIS PERIOD
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<p>NAME, ADDRESS, CITY, STATE, ZIP CODE McNamera, Mr. Robert B. 7710 Spring Hill Rd. Indianapolis, IN 46260</p>	<p>NAME OF EMPLOYER Retired</p> <p>OCCUPATION Retired</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$250.00</p>	03/10/95	\$250.00
<p>NAME, ADDRESS, CITY, STATE, ZIP CODE Strauss, Mr. Jerome N. 6441 Park Central Dr., W. Indianapolis, IN 46260</p>	<p>NAME OF EMPLOYER Info Requested</p> <p>OCCUPATION Info Requested</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$1,000.00</p>	03/06/95	\$1,000.00
<p>NAME, ADDRESS, CITY, STATE, ZIP CODE Hanke, Dr. C. William 4461 Sylvan Rd. Indianapolis, IN 46208</p>	<p>NAME OF EMPLOYER Indiana University</p> <p>OCCUPATION Physician</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$500.00</p>	03/15/95	\$500.00
<p>NAME, ADDRESS, CITY, STATE, ZIP CODE Stewart, Mr. Leonard P. II 5306 Woodlawn Ave. Chevy Chase, MD 20815</p>	<p>NAME OF EMPLOYER Info Requested</p> <p>OCCUPATION Info Requested</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$500.00</p>	03/20/95	\$500.00
<p>NAME, ADDRESS, CITY, STATE, ZIP CODE Lofton, Mr. Thomas M. 9060 Pickwick Drive Indianapolis, IN 46260</p>	<p>NAME OF EMPLOYER Lilly Endowment</p> <p>OCCUPATION Foundation Manager</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$250.00</p>	03/21/95	\$250.00
<p>NAME, ADDRESS, CITY, STATE, ZIP CODE Tight, Mr. Dexter C. 170 Wildwood Way Woodside, CA 94062</p>	<p>NAME OF EMPLOYER Info Requested</p> <p>OCCUPATION Info Requested</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$500.00</p>	03/30/95	\$500.00
<p>NAME, ADDRESS, CITY, STATE, ZIP CODE Weller, Mr. Mark W. 1675 Trap Rd. Vienna, VA 22182</p>	<p>NAME OF EMPLOYER Sagamore Assoc.</p> <p>OCCUPATION Attorney</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$500.00</p>	03/30/95	\$500.00
<p>NAME, ADDRESS, CITY, STATE, ZIP CODE Perry, Mr. William 441 Druid Hill Rd. Vienna, VA 22180</p>	<p>NAME OF EMPLOYER ISOM</p> <p>OCCUPATION President</p> <p>RECEIPT FOR (specify other): <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p>AGGREGATE YEAR-TO-DATE \$250.00</p>	03/30/95	\$250.00
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