

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	30 / 68
				FOR LINE NUMBER 17A	
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NAME OF COMMITTEE (In Full) HAGELIN 2000					
Full Name, Mailing Address, and ZIP Code Joseph J. Porco 12 Saddle Ridge Rd. Newtown CT 06470-0379		Name of Employer Self Occupation Advisor		Date (month, day, year) 07/27/2000 Amount of Each Receipt this Period 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Lucile M. Portwood 1815 Hamilton Rd Okemos MI 48864-1812		Name of Employer Information Requested Occupation Retired		Date (month, day, year) 07/05/2000 Amount of Each Receipt this Period 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Lucile M. Portwood 1815 Hamilton Rd Okemos MI 48864-1812		Name of Employer Information Requested Occupation Retired		Date (month, day, year) 07/24/2000 Amount of Each Receipt this Period 100.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 350.00			
Full Name, Mailing Address, and ZIP Code Paul N. Potter 187 Piney Branch Boone NC 28607-		Name of Employer MVED Occupation Teacher		Date (month, day, year) 07/02/2000 Amount of Each Receipt this Period 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Susan R. Potter 187 Piney Branch Boone NC 28607-		Name of Employer MVED Occupation Teacher		Date (month, day, year) 07/02/2000 Amount of Each Receipt this Period 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Julia Preminger 3555 Heaventy Mt. Drive #43 Boone NC 28607-		Name of Employer Self Occupation Artist		Date (month, day, year) 07/27/2000 Amount of Each Receipt this Period 750.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 850.00			
Full Name, Mailing Address, and ZIP Code Kevin L. Price 258 Angola St Walled Lake MI 48390-2112		Name of Employer CSI Inc. Occupation Engineer		Date (month, day, year) 07/14/2000 Amount of Each Receipt this Period 25.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Aggregate Year-to-Date > \$ 25.00			
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					