

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

Any information reported here such reports and statements may not be sold or used by any person for the purpose of soliciting contributions or for nonpolitical purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

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| A. Full Name, Mailing Address and Zip Code Armin Teach 5057 260th Ave Waldorf, MN 56391- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Occupation Retired Aggregate Year-to-Date -> 250.00 | Date (month, day, year) 07/31/2000 | Amount of Each Receipt this Period 50.00 |
| B. Full Name, Mailing Address and Zip Code Tony Trimble 516 Oak St W Stillwater, MN 55082- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Trimble and Asso Occupation Attorney Aggregate Year-to-Date -> 2,000.00 | Date (month, day, year) 07/26/2000 | Amount of Each Receipt this Period 2,000.00 |
| C. Full Name, Mailing Address and Zip Code Inga Mae Urke 403 Hope St Box 452 Starbuck, MN 56381- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Self Occupation Aggregate Year-to-Date -> 100.00 | Date (month, day, year) 07/11/2000 | Amount of Each Receipt this Period 100.00 |
| D. Full Name, Mailing Address and Zip Code Inga Mae Urke 403 Hope St Box 452 Starbuck, MN 56381- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Self Occupation Aggregate Year-to-Date -> 350.00 | Date (month, day, year) 07/11/2000 | Amount of Each Receipt this Period 250.00 |
| E. Full Name, Mailing Address and Zip Code Vincent Wang RR 5 Mankato, MN 56001- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Vincent Wang Cuisine Occupation OWNER Aggregate Year-to-Date -> 250.00 | Date (month, day, year) 07/17/2000 | Amount of Each Receipt this Period 250.00 |
| F. Full Name, Mailing Address and Zip Code Vincent Wang RR 5 Mankato, MN 56001- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer Vincent Wang Cuisine Occupation OWNER Aggregate Year-to-Date -> 350.00 | Date (month, day, year) 07/17/2000 | Amount of Each Receipt this Period 100.00 |
| G. Full Name, Mailing Address and Zip Code Daniel Williams PO Box 421222 Plymouth, MN 55442- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Name of Employer PSI Net Consulting Solutions Occupation Executive Manager Aggregate Year-to-Date -> 250.00 | Date (month, day, year) 07/11/2000 | Amount of Each Receipt this Period 250.00 |

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| SUBTOTAL of Receipts This Page (optional) | 3,000.00 |
| TOTAL This Period (last page this line number only) | |