

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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

PAGE 11 OF 15
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

Friends for Baron Hill CD032705B

A. Full Name, Mailing Address and ZIP Code Alan Loble 4535 N. Park Ave Indianapolis, IN 46205	Name of Employer Self Occupation Atty Aggregate Year-to-Date > \$	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		\$700.00	
B. Full Name, Mailing Address and ZIP Code Rhonda R. Long-Sharp 11405 Sturgen Bay Lane Indianapolis, IN 46236	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		\$600.00	
C. Full Name, Mailing Address and ZIP Code Mark Lytle 511 W State St Madison, IN 47250-2534	Name of Employer Lytle Funeral Home * In-Kind: Occupation Owner Aggregate Year-to-Date > \$	Date (month, day, year) 10/19/98 10/19/98	Amount of Each Receipt this Period \$100.00 \$468.90 *
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		\$568.90	
D. Full Name, Mailing Address and ZIP Code Howard Lytton Jr. 416 S. Main St. Jasper, IN 47548	Name of Employer Self Occupation Atty. Aggregate Year-to-Date > \$	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		\$500.00	
E. Full Name, Mailing Address and ZIP Code Joel Markovitch 2830-169th St. Hammond, IN 46323	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/23/98 10/23/98	Amount of Each Receipt this Period \$100.00 \$600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		\$800.00	
F. Full Name, Mailing Address and ZIP Code Phillp Meyers 3231 W 46th St Indianapolis, IN 46208	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		\$250.00	
G. Full Name, Mailing Address and ZIP Code Carol Miller 5605 Claire Rose Ln Atlanta, GA 30327	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date > \$	Date (month, day, year) 11/18/98	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		\$250.00	

SUBTOTAL of Receipts This Page (optional) \$28,514.26

TOTAL This Period (last page this line number only)