

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a) (1)

Any information supplied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Hoosiers for Tim Roemer

<p>A. Full Name, Mailing Address and Zip Code John Motley 601 Deerfield Pond Drive Great Falls, VA 22066-</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Food Marketing Institute</p> <p>Occupation Sr. V-P for Gov't & Pub. Affai</p> <p>Aggregate Year-to-Date -> 1,000.00</p>	<p>Date (month, day, year) 05/01/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>B. Full Name, Mailing Address and Zip Code John Nielsen 52435 Old Hickory Lane Granger, IN 46530</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer ISPAT Inland Inc.</p> <p>Occupation Gov't & Public Affairs</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 04/26/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and Zip Code John Nielsen 52435 Old Hickory Lane Granger, IN 46530</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer ISPAT Inland Inc.</p> <p>Occupation Gov't & Public Affairs</p> <p>Aggregate Year-to-Date -> 964.50</p>	<p>Date (month, day, year) 04/26/2000</p>	<p>Amount of Each Receipt this Period 464.50</p> <p>IN-KIND</p>
<p>D. Full Name, Mailing Address and Zip Code Daryl Owen 6636 Fletcher Lane Mc Lean, VA 22101-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Hooper, Hooper & Owen</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date -> 250.00</p>	<p>Date (month, day, year) 06/22/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>E. Full Name, Mailing Address and Zip Code Edmund Perry 9612 Glencrest Lane Kensington, MD 20895-3513</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer IBM</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 06/02/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Therese Rohan 3223 Caroline Street South Bend, IN 46614</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer home</p> <p>Occupation homemaker</p> <p>Aggregate Year-to-Date -> 500.00</p>	<p>Date (month, day, year) 04/26/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Jan Schoonmaker 147 E. Street SE Washington, DC 20003</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Van Scoyoc Assoc.</p> <p>Occupation Vice-President</p> <p>Aggregate Year-to-Date -> 250.00</p>	<p>Date (month, day, year) 05/31/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>3,464.50</p>
<p>TOTAL This Period (last page this line number only)</p>	