

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)  
 Dickey for Congress

A. Full Name, Mailing Address and Zip Code Rose Whipple P.O. Box 515  Arkadelphia, AR 71923 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Horizon Bancorp, Inc.  Occupation Chairman  Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 07/07/2000	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and Zip Code Frederick White 444 Evangeline Pl.  Shreveport, LA 71106- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Cardiovascular Consultants  Occupation Physician  Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/13/2000	Amount of Each Receipt this Period 100.00
C. Full Name, Mailing Address and Zip Code Charles Whiteside 2505 N. Fillmore  Little Rock, AR 72207 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Merrill Lynch & Co.  Occupation Financial Consultant  Aggregate Year-to-Date -> 350.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and Zip Code William Wilkinson 2431 Thistle Pointe  Bloomfield Hills, MI 48304- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer   Occupation   Aggregate Year-to-Date -> 1,000.00	Date (month, day, year) 09/06/2000	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and Zip Code Mrs. Kenneth Williams 21 Pineridge  Magnolia, AR 71753- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer   Occupation Housewife  Aggregate Year-to-Date -> 500.00	Date (month, day, year) 08/28/2000	Amount of Each Receipt this Period 500.00
F. Full Name, Mailing Address and Zip Code Suddy Willis 2491 Columbia Rd. 12  Magnolia, AR 71753- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed  Occupation   Aggregate Year-to-Date -> 500.00	Date (month, day, year) 09/08/2000	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and Zip Code Jack Wilson 524 Capitol Dr  Mountain Home, AR 72653 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Mountain Home Medical  Occupation Doctor  Aggregate Year-to-Date -> 300.00	Date (month, day, year) 08/30/2000	Amount of Each Receipt this Period 150.00

SUBTOTAL of Receipts This Page (optional)	3,500.00
TOTAL This Period (last page this line number only)	