SCHEDULE A
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 34 / 106

[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Redwine Congressional Committee

A.
Full Name (Last, First, Middle Initial)
Dr. Mark Johnston
Mailing Address
3924 Orchard
City: Sioux City State: IA Zip Code: 51104
FEC ID number of contributing federal political committee.
Name of Employer: Jones Eye Clinic
Occupation: physician
Receipt For: 2002
X Primary General
Other (specify)
Primary Election
Election Cycle-to-Date: 1000.00

Date of Receipt: 12 05 2001
Amount of Each Receipt this Period: 500.00
Contribution
Transaction ID: SA11ai-CN406

B.
Full Name (Last, First, Middle Initial)
Dr. Mark Johnston
Mailing Address
3924 Orchard
City: Sioux City State: IA Zip Code: 51104
FEC ID number of contributing federal political committee.
Name of Employer: Jones Eye Clinic
Occupation: physician
Receipt For: 2002
X Primary General
Other (specify)
Primary Election
Election Cycle-to-Date: 1000.00

Date of Receipt: 08 17 2001
Amount of Each Receipt this Period: 500.00
Contribution
Transaction ID: SA11ai-CN39

C.
Full Name (Last, First, Middle Initial)
Mr. Roland Junek
Mailing Address
671 Indian Wells Court
City: North Sioux City State: SD Zip Code: 57049
FEC ID number of contributing federal political committee.
Name of Employer: n/a
Occupation: retired
Receipt For: 2002
X Primary General
Other (specify)
Primary Election
Election Cycle-to-Date: 500.00

Date of Receipt: 10 16 2001
Amount of Each Receipt this Period: 250.00
Contribution
Transaction ID: SA11ai-CN184

SUBTOTAL of Receipts This Page (optional) ..... ▶ **1250.00**

TOTAL This Period (last page this line number only) ..... ▶