

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC -7 A 11: 51

1. NAME OF COMMITTEE (In full)

Johnson for Congress

ADDRESS (number and street) Check if different than previously reported.
P.O. Box 1986

2. FEC IDENTIFICATION NUMBER
C00145607

CITY, STATE and ZIP CODE STATE/DISTRICT
New Britain, CT 06050 CT 6

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report Twelfth day report preceding _____ (Type of Election) _____
election on _____ in the State of _____
- July 15 Quarterly Report
- October 15 Quarterly Report Thirtieth day report following the General Election on
11/07/2000 in the State of CT
- January 31 Year End Report Termination Report
- July 31 Mid-Year Report (Non-election Year Only)

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-date
10/19/2000 through 11/27/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$126643.82	\$844936.11
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$126643.82	\$844936.11
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$202842.33	\$809026.09
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$433.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$202842.33	\$808593.09
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$485488.69	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

For further information:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
LISA R. CARVER ASST TREASURER

Signature of Treasurer *Lisa R Car* Date **12/5/00**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to penalties of 2 U.S.C. §437g.

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FEC FORM 3
(Revised 4/87)

Detailed Summary Page

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) Johnson for Congress	Report Covering the Period:	
	From:	To:
	10/19/2000	11/27/2000
I. RECEIPTS	Column A Total This Period	Column B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (Use Schedule A)	\$35428.00	
(ii) Unitemized	\$9974.00	
(iii) Total of contributions from individual	\$45399.00	\$390331.76
(b) Political Party Committees	\$750.00	\$4660.00
(c) Other Political Committees (such as PACs)	\$60494.82	\$449944.35
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	\$126643.82	\$844936.11
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$0.00	\$433.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$0.00	\$0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$126643.82	\$845369.11
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$202842.33	\$809026.08
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$99500.00	\$152250.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$302342.33	\$961276.08
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$661167.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$126643.62
25. SUBTOTAL (add Line 23 and Line 24)		\$787811.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$302342.33
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$485468.69

SCHEDULE A

ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Abbott 24 Cliffmore Road West Hartford, CT 06107-	Retired	10/29/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$200.00	
Peter Albertsen 5 Cedar Hill Road W. Simsbury, CT 06092	Univ. CT Health Center Physician	10/19/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$200.00	
Eniga Antonetti 15 Sacher Drive Meriden, CT 06450-	Information Requested	10/27/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$200.00	
Peter Ashdam 5 Branch Brook Road Simsbury, CT 06070	Kostin, Suffness, & Co. CPA	10/20/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$300.00	
Richard Augustine 30 White Oak Lane Simsbury, CT 06070-	Zahron Alternative Power treasurer	10/21/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$200.00	
Paul Baldi 221 North Street P. O. Box 180 Litchfield, CT 06759	Carol H. Baldi, Inc Lawyer	1/28/2000	\$50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$200.00	
Stephen Barberino 64 Pinnacle Road Farmington, CT 06032	Self-Employed Auto Dealer	10/27/2000	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	

SUBTOTAL of Receipts This Page (optional)

\$1950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 16
FOR LINE NUMBER 11(a) (2)

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NAME OF COMMITTEE (In Full)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code Patty Barnes P.O. Box 1560 Bristol, CT 06010</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Retired</p> <p>Date (month, day, year) 10/30/2000</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Michael Behrens 17 North Main Street West Hartford, CT 06107-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Information Requested</p> <p>Occupation</p> <p>Date (month, day, year) 10/21/2000</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Rodney Beach 1301 5th Ave. Suite 333C Seattle, WA 98101-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Information Requested</p> <p>Occupation</p> <p>Date (month, day, year) 1/13/2000</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Malcolm Bonawitz 143 Sterling Road Mount Pocono, PA 18344-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Information Requested</p> <p>Occupation</p> <p>Date (month, day, year) 10/24/2000</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>E. Full Name, Mailing Address and Zip Code Michael Boyle 2104 E. Highland Drive Seattle, WA 98112-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Microsoft Corporation</p> <p>Occupation Senior Tax Counsel</p> <p>Date (month, day, year) 11/03/2000</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Richard Brink 36 Crossroads Lane Glastonbury, CT 06033</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer BHS-Toxin</p> <p>Occupation President</p> <p>Date (month, day, year) 10/24/2000</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>G. Full Name, Mailing Address and Zip Code Charles Buell 88 Scott Swamp Road Apt. 105 #7 Farmington, CT 06032-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Date (month, day, year) 10/27/2000</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$2300.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the detailed Summary Page

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NAME OF COMMITTEE (In Full)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code Conard Buffo 6 Scarborough Road Simsbury, CT 06070-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer CT Valley Radiology</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 11/09/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>B. Full Name, Mailing Address and Zip Code Rosemarie Burton 8 Woodside Terrace New Haven, CT 06515-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Klingberg Family Center</p> <p>Occupation CEO</p> <p>Aggregate Year-to-Date -> \$350.00</p>	<p>Date (month, day, year) 11/03/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Ronald Bushwell 200 Executive Drive Suite 120 West Orange, NJ 07052-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Phoenix Mutual Life Insurance</p> <p>Occupation Life Underwriter</p> <p>Aggregate Year-to-Date -> \$400.00</p>	<p>Date (month, day, year) 10/26/2000</p>	<p>Amount of Each Receipt this Period \$400.00</p>
<p>D. Full Name, Mailing Address and Zip Code David Carter 100 Edgehill Road New Haven, CT 06511</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 10/26/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code David Carter 100 Edgehill Road New Haven, CT 06511</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$400.00</p>	<p>Date (month, day, year) 11/02/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Roger Chapman 118 Hammonasset Meadows Road Madison, CT 06443</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Blakslee, Arpaia & Chapman</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/30/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code Cynthia Clark 28 Mackinnon Place East Lyme, CT 06333-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Information Requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/25/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1800.00

TOTAL This Period (last page this line number only!)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Clark 28 Mackinnon Place East Lyme, CT 06333- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		10/19/2000	\$200.00
Aggregate Year-to-Date ->		\$200.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Coffin 56 Jobs Creek Road Sunapee, NH 03782 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Retired	11/01/2003	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Seymour Cohen 13A Dogwood Lane Westport, CT 06880- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CSA Executive	10/27/2000	\$500.00
Aggregate Year-to-Date ->		\$500.00	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Day 701 E. Harrison PO Box 2807 Harlingen, TX 78551- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Jefferson Pilot Financial Life Underwriter	11/02/2000	\$200.00
Aggregate Year-to-Date ->		\$200.00	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Dettmer 80 Round Hill Road Greenwich, CT 06831 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Retired	10/27/2000	\$200.00
Aggregate Year-to-Date ->		\$400.00	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terrence Donahue 6 Timothy Way Avon, CT 06001-407B Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	New Britain Surgical Inc. Physician	10/20/2000	\$200.00
Aggregate Year-to-Date ->		\$200.00	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Donaldson 463 East Hyerdale Drive Goshen, CT 06756 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Retired	10/30/2000	\$50.00
Aggregate Year-to-Date ->		\$750.00	

SUBTOTAL of Receipts This Page (optional)	\$2350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code Daniel Donofrio 200 Bluff Point Road South Glastonbury, CT 06073-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Kostin, Ruffness, & Co.</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/22/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>B. Full Name, Mailing Address and Zip Code Robert Dowsell 4 Langley Park Farmington, CT 06032-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Hartford Radiation Assoc</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>C. Full Name, Mailing Address and Zip Code Elizabeth Elia P.O. Box 436 Old Saybrook, CT 06475-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 1/01/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and Zip Code Charleen Ernst 23 Metacom Drive Simsbury, CT 06070-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Cardium Health Services</p> <p>Occupation Health care technology</p> <p>Aggregate Year-to-Date -> \$1400.00</p>	<p>Date (month, day, year) 0/19/2000</p>	<p>Amount of Each Receipt this Period \$400.00</p>
<p>E. Full Name, Mailing Address and Zip Code Irwin Ettinger 180 Dogwood Lane Stanford, CT 06903</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Travelers Group</p> <p>Occupation Exec. Vice President</p> <p>Aggregate Year-to-Date -> \$400.00</p>	<p>Date (month, day, year) 10/30/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>F. Full Name, Mailing Address and Zip Code Mark Facey Mark Facey & Company 225 North Main Street Bristol, CT 06010-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Mark Facey & Company</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date -> \$400.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period \$400.00</p>
<p>G. Full Name, Mailing Address and Zip Code Robert & Carolyn Fiordella 29 Summerberry Drive Bristol, CT 06010</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Phoenix Mutual Life Insur</p> <p>Occupation C.E.O.</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 10/31/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$2550.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) Johnson for Congress			
A. Full Name, Mailing Address and Zip Code Bernard & Marilyn Fox One Langley Pk. Farmington, CT 06032 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		10/27/2000	\$800.00
	Occupation Retired		
Aggregate Year-to-Date ->		\$2000.00	
B. Full Name, Mailing Address and Zip Code William Gardner 53 Highridge Road West Simsbury, CT 06092 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	PWA	11/01/2000	\$50.00
	Occupation Retired		
Aggregate Year-to-Date ->		\$450.00	
C. Full Name, Mailing Address and Zip Code Marc Glickstein 962 Mott Hill Road Glastonbury, CT 06033- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self Employed	10/20/2000	\$250.00
	Occupation Physician		
Aggregate Year-to-Date ->		\$250.00	
D. Full Name, Mailing Address and Zip Code Raymond Green 120 West Road Collinsville, CT 06022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Day, Perry & Howard	10/30/2000	\$25.00
	Occupation Attorney		
Aggregate Year-to-Date ->		\$225.00	
E. Full Name, Mailing Address and Zip Code Eunice Groark 35 Saddle Ridge Drive Bloomfield, CT 06002- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self Employed	10/30/2000	\$250.00
	Occupation Consultant		
Aggregate Year-to-Date ->		\$250.00	
F. Full Name, Mailing Address and Zip Code Jay Haberland 19 Orchard Lane Simsbury, CT 06070- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	United Technologies	10/19/2000	\$1000.00
	Occupation Executive	Re-marked	
Aggregate Year-to-Date ->		\$1000.00	
G. Full Name, Mailing Address and Zip Code Above Contribution Earmarked Through United Technologies Corporation PAC United Technologies Building Hartford, CT 06101 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)	\$2375.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code Val Halanandaris 2699 Wild Holly Road Annapolis, MD 21403-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Information Requested</p> <p>Date (month, day, year) 10/31/2000</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Phillip Harriman 121 Middle Street Portland, ME 04101-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Label & Harriman</p> <p>Date (month, day, year) 10/19/2000</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and Zip Code Ronald Hilliard 75 14th Street Suite 4540 Atlanta, GA 30309-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self</p> <p>Date (month, day, year) 11/06/2000</p> <p>Occupation Life Underwriter</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>D. Full Name, Mailing Address and Zip Code Janet Hobbie 2780 Riverbend Road Allentown, PA 18103-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Date (month, day, year) 10/25/2000</p> <p>Occupation none</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>E. Full Name, Mailing Address and Zip Code Fred Rollfelder 50 Reverknolls Avon, CT 06001</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Date (month, day, year) 10/28/2000</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>F. Full Name, Mailing Address and Zip Code Carroll Hughes 700 Plaza Middlesex Middletown, CT 06457-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Public Affairs Consulting</p> <p>Date (month, day, year) 10/20/2000</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>G. Full Name, Mailing Address and Zip Code S. Edward Jeter 221 Deercliff Road Avon, CT 06001</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self-Employed</p> <p>Date (month, day, year) 10/23/2000</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$400.00</p>	<p>Amount of Each Receipt this Period \$400.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$2400.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code Anne Hale Johnson 13600 Red Barn Lane Potomac, MD 20854-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation Volunteer</p> <p>Aggregate Year-to-Date -> \$750.00</p>	<p>Date (month, day, year) 10/25/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and Zip Code Stanley Johnson 48 Masket Trail Simsbury, CT 06070</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Johnson Gage Co.</p> <p>Occupation C.E.O.</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 10/26/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>C. Full Name, Mailing Address and Zip Code Michael Kaleel 75 Federal Street Boston, MA 02110</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Kaleel Company</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>D. Full Name, Mailing Address and Zip Code Bruce Kaplan 49 Pheasant Chase West Hartford, CT 06117-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self Employed</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>E. Full Name, Mailing Address and Zip Code Edmund Kindelan 34 Burgundy Drive Kensington, CT 06037-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Kostin, Ruffkess, & Co.</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>F. Full Name, Mailing Address and Zip Code Richard Kretz 77 Deepwood Drive Avon, CT 06001-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Kostin, Ruffkess, & Co.</p> <p>Occupation Managing Partner</p> <p>Aggregate Year-to-Date -> \$400.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period \$400.00</p>
<p>G. Full Name, Mailing Address and Zip Code John Lawrence 30 Farmcliff Drive Glastonbury, CT 06033-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Shipman and Goodwin</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$1900.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the so-called summary wage

Any information copied 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)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code Benton Leach 17-C Heritage Crest Drive Southbury, CT 06488</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 0/19/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Harry Levitt 644 South Figueroa Street Los Angeles, CA 90017-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self Employed</p> <p>Occupation Life Underwriter</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 11/02/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>C. Full Name, Mailing Address and Zip Code F. Peter Libassi 580 J Mountain Road West Hartford, CT 06117</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 0/23/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and Zip Code Erna Manderham 68 Todd Hill Road Bethlehem, CT 06751</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date -> \$750.00</p>	<p>Date (month, day, year) 10/30/2000</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>E. Full Name, Mailing Address and Zip Code Martin Marola 57 Davdison Road Goshen, CT 06756-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Tru Hatch Inc.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 0/20/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Patricia McCowan 118 Fox Run Court Newington, CT 06111-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Kostin, Ruffness, & Co.</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date -> \$200.00</p>	<p>Date (month, day, year) 0/20/2000</p>	<p>Amount of Each Receipt this Period \$200.00</p>
<p>G. Full Name, Mailing Address and Zip Code Stephen Middlebrook 21 Guernsey Lane Avon, CT 06001</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Day, Berry and Howard</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$300.00</p>	<p>Date (month, day, year) 10/27/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the detailed surrory page

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NAME OF COMMITTEE (In Full) Johnson for Congress			
A. Full Name, Mailing Address and Zip Code Goran Kornhed 94 Celabaugh Pond Road Hudson, NY 10520- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/22/2000 \$200.00	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and Zip Code John Morosani 1619 Third Avenue Apartment 14A New York, NY 10128-3462 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Purman Selz Capital Mngmt Occupation Money Manager Aggregate Year-to-Date ->	Date (month, day, year) 10/19/2000 \$250.00	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Virginia Morosani 184 Wigwam Road Litchfield, CT 06759 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date ->	Date (month, day, year) 10/29/2000 \$250.00	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code George & Ruth Murphy 102 East Street Washington, CT 06793 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Retired Aggregate Year to-Date ->	Date (month, day, year) 11/02/2000 \$500.00	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Joseph Murphy 41 Grossett Road Riverside, CT 06878- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self Employed Occupation Physician Aggregate Year-to-Date ->	Date (month, day, year) 10/20/2000 \$250.00	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Joannette Naman 507 Bolton Place Houston, TX 77024- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date ->	Date (month, day, year) 10/20/2000 \$250.00	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Daniel Neiditz 23 Timrod Road West Hartford, CT 06107 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer M.J. Neiditz & Co. Occupation Real Estate Aggregate Year-to-Date ->	Date (month, day, year) 10/30/2000 \$350.00	Amount of Each Receipt this Period \$350.00

SUBTOTAL of Receipts This Page (optional)	\$2050.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allen Nixon 1 Atwater Terrace Farmington, CT 06032-	Torrington Co. Occupation: President	10/20/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$550.00	
Peter Pasch Buffum Road Washington Dpt., CT 06794	Occupation	10/19/2000	\$150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
Margaret Patricelli 77 Hartford Road Simsbury, CT 06070	Occupation: Homemaker	11/20/2000	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	IN-KIND
Robert Patricelli Folly Farm 77 Hartford Road Simsbury, CT 06070	Occupation: Executive	10/19/2000	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1500.00	IN-KIND
Philip Pearson 44 Paul Spring Road Farmington, CT 06032	Occupation: Dir. of Metallurgy	10/28/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$200.00	
Hoyt Pease 78 Carey Street Southington, CT 06489	Occupation: Retired	10/28/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
Joseph Patronella 1266 Enfield Street Enfield, CT 06082-	Occupation: C.E.O.	10/26/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	

SUBTOTAL of Receipts This Page (optional)	\$2550.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Powell PO Box 21008 Greensboro, NC 27401-	Jefferson Pilot Financial Occupation: VP	10/21/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$200.00	
Malcolm Pray 566 Round Hill Road Greenwich, CT 06830	Pray Automobile Corp. Occupation: Retired	10/24/2000	\$100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$600.00	
Lynda Royce 351 Wilson Hill Road Petaluma, CA 94952	Legacy Marketing Group Occupation: President & CEO	10/25/2000	\$700.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$700.00	
Eleanor Rohlfitch 5 Langley Park Farmington, CT 06032-	Housewife Occupation: Housewife	10/27/2000	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$150.00	
Catherine Roland 75 14th Street Atlanta, GA 30309-	Information Requested Occupation:	10/24/2000	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$1000.00	
Frank Schoeneman Route 61 Pottsville, PA 17901-	Information Requested Occupation:	10/27/2000	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	
Barry Spore 190 Spring Road North Haven, CT 06473-	Information Requested Occupation:	10/20/2000	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$250.00	

SUBTOTAL of Receipts This Page (optional)	\$2700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) Johnson for Congress			
A. Full Name, Mailing Address and Zip Code Thomas Springer 27 Cedar Ledge Road West Hartford, CT 06107-	Name of Employer Self Employed	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$250.00
	Occupation Physician	Aggregate Year-to-Date -> \$250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and Zip Code Steven Stang 8 Elaine Drive Simsbury, CT 06070-	Name of Employer Information Requested	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$200.00
	Occupation	Aggregate Year-to-Date -> \$200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and Zip Code Clifford Sterrett RFD No. 3 Box 86 Livery Pool Road New Hartford, CT 06057	Name of Employer Northwestern Mutual Life	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$50.00
	Occupation District Agent	Aggregate Year-to-Date -> \$250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and Zip Code Robert Story 266 Brooke Meadow Road Kensington, CT 06037-	Name of Employer Story Bros., Inc.	Date (month, day, year) 10/23/2000	Amount of Each Receipt this Period \$200.00
	Occupation Owner	Aggregate Year-to-Date -> \$200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and Zip Code Craig Taylor 13 High Hill Road Canton, CT 06019-2222	Name of Employer	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$200.00
	Occupation Consultant	Aggregate Year-to-Date -> \$500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and Zip Code J. Gray Teckell 401 Edwards St. Suite 1133 Shreveport, LA 71101	Name of Employer TCI	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$200.00
	Occupation President	Aggregate Year-to-Date -> \$200.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and Zip Code Craig Thompson 200 Park Ave. Suite 4041 New York, NY 10166-	Name of Employer Thompson Pension	Date (month, day, year) 11/15/2000	Amount of Each Receipt this Period \$1000.00
	Occupation Life Underwriter	Aggregate Year-to-Date -> \$1000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional)	\$2100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 16
 FOR LTNR NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
 Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code Edward Tierney P.O. Box 21 72 Apple Lane Roxbury, CT 06783</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Tierney Realty</p> <p>Occupation Broker</p> <p>Aggregate Year-to-Date -> \$400.00</p>	<p>Date (month, day, year) 10/30/2000</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>B. Full Name, Mailing Address and Zip Code James Tomasso 60 Town Farm Road Farmington, CT 06032-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Tomasso Brothers, Inc.</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 11/02/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code William Tomasso 24 York Road New Britain, CT 06052</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Tomasso Brothers Inc.</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date -> \$1450.00</p>	<p>Date (month, day, year) 10/26/2000</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>D. Full Name, Mailing Address and Zip Code William Tomasso 24 York Road New Britain, CT 06052</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Tomasso Brothers Inc.</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 10/27/2000</p>	<p>Amount of Each Receipt this Period \$550.00</p>
<p>E. Full Name, Mailing Address and Zip Code William Van Winkle 293 North Lake Street Litchfield, CT 06759</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Self Employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date -> \$250.00</p>	<p>Date (month, day, year) 10/23/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>F. Full Name, Mailing Address and Zip Code Ronald Verzone 12 Chase Road Newton, NH 03858</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer United Underwriters Inco.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/31/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Henry Vezan 117 Garfield Road West Hartford, CT 06107</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Vezan-West & Co.</p> <p>Occupation Executive Recruiter</p> <p>Aggregate Year-to-Date -> \$900.00</p>	<p>Date (month, day, year) 10/29/2000</p>	<p>Amount of Each Receipt this Period \$100.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$3050.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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 political purposes, other than using the name and address of any political committee to collect contributions from such sources.

NAME OF COMMITTEE (In Full)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Viets 78 South Main Street Suffield, CT 06078	Self-Employed Occupation Physician	10/19/2000	\$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
B. Full Name, Mailing Address and Zip Code Clinton Vince 5015 Overlook Road Washington, DC 20016-1991	Name of Employer Verner, Edipfert, Bernhard et. Occupation Attorney	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
C. Full Name, Mailing Address and Zip Code Jean Weigert 5 Nila's Way Simsbury, CT 06070-	Name of Employer Retired Occupation Mendell & Blau PC	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$400.00
D. Full Name, Mailing Address and Zip Code Wilson Wilde 5 Dodge Drive West Hartford, CT 06107	Name of Employer Hartford Steam Boiler Occupation President & CEO	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$1000.00
E. Full Name, Mailing Address and Zip Code Alfred Wilke 124 Higley Road West Granby, CT 06090	Name of Employer Occupation Retired	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$750.00
F. Full Name, Mailing Address and Zip Code Victor Winogradow 22 Saxon Woods Road Avon, CT 06001-	Name of Employer Decorative Screen Printers Occupation President	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
G. Full Name, Mailing Address and Zip Code Mary Ellen Wohl 41 Powell Street Brookline, MA 02146	Name of Employer Childrens Hospital Occupation Doctor	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$200.00

SUBTOTAL of Receipts This Page (optional)	\$3200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information reported 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) Johnson for Congress			
A. Full Name, Mailing Address and Zip Code William Worcester Box 358 Washington Dept, CT 06794 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 10/28/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Frank Zona 125 Richmond Street Dorchester, MA 02124- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Information Requested Occupation	Date (month, day, year) 10/29/2000 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation	Date (month, day, year) / / Aggregate Year-to-Date ->	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$750.00
TOTAL This Period (last page this line number only)	\$35425.00

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedule: for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER 11 (b)		

Any information copied from such Reports and statements may not be valid 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)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code COLTSBROOK REPUBLICAN TOWN CMTE. John Miller 113 Sandy Brook Road Winsted, CT 06098 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	10/20/2000	
Aggregate Year-to-Date ->		\$100.00	
B. Full Name, Mailing Address and Zip Code Roxbury Republican Town Comm. P.O. Box 251 Roxbury, CT 06783- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	11/01/2000	
Aggregate Year-to-Date ->		\$100.00	
C. Full Name, Mailing Address and Zip Code Salisbury Republican Town Committee P.O. Box 501 Salisbury, CT 06068 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	11/01/2000	
Aggregate Year-to-Date ->		\$100.00	
D. Full Name, Mailing Address and Zip Code Thomaston Republican Town Committee P.O. Box 254 Thomaston, CT 06787 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$250.00
	Occupation	10/19/2000	
Aggregate Year-to-Date ->		\$250.00	
E. Full Name, Mailing Address and Zip Code Washington Rep. Town Committee P.O. Box 272 Washington Dpt, CT 06794 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	10/20/2000	
Aggregate Year-to-Date ->		\$100.00	
F. Full Name, Mailing Address and Zip Code WOODBURY REP. TOWN COMMITTEE P.O. Box 255 Woodbury, CT 06798 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$100.00
	Occupation	10/31/2000	
Aggregate Year-to-Date ->		\$100.00	
G. Full Name, Mailing Address and Zip Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Aggregate Year-to-Date ->			

SUBTOTAL of Receipts This Page (optional)	\$750.00
TOTAL This Period (last page this line number only)	\$750.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of tax Detailed Summary Page

Any information copied 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)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code American Institute of Certified Public Accountants Effective Log Comm 201 Plaza Three Jersey City, NJ 07311-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$3500.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period \$2500.00</p>
<p>B. Full Name, Mailing Address and Zip Code American Ambulance Assoc Federal PAC 1301 Connecticut Ave., NW Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code American Association of Clinical Urologists PAC 1111 Plaza Drive, #550 Schaumburg, IL 60173</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$1500.00</p>	<p>Date (month, day, year) 10/24/2000</p>	<p>Amount of Each Receipt this Period \$1500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Americans for Free Intl. Trade PAC 112 South West Street, #310 Alexandria, VA 22314</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$5000.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$5000.00</p>
<p>E. Full Name, Mailing Address and Zip Code American Institute of Architects PAC 1735 New York Ave, NW Washington, DC 20006</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$2500.00</p>	<p>Date (month, day, year) 11/02/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>F. Full Name, Mailing Address and Zip Code American Nurses Association PAC 600 Maryland Avenue, SW #100 Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$3000.00</p>	<p>Date (month, day, year) 10/27/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>G. Full Name, Mailing Address and Zip Code Amer Occupational Therapy Assoc Inc SAC P.O. Box 31220 4720 Montgomery Lane Bethesda, MD 20824-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/24/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$13000.00</p>
<p>TOTAL This Period (Last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of law detailed Summary Page

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NAME OF COMMITTEE (In Full)

Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code American Veterinary Medical Association PAC 1101 Vermont Ave NW Washington, DC 20005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 03/24/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code Anheuser-Busch Companies PAC Republic Place, Suite 200 Washington, DC 20006-3700</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$2000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Amer. Academy of Dermatology Association PO Box 4014 Schaumburg, IL 60168-4014</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 07/25/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code Arts and Humanities PAC One 53rd East Street New York, NY 10022-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 11/03/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Blue Pac Blue Cross/Blue Shield Assoc. PAC 1310 G Street NW 12th Floor Washington, DC 20005-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 11/03/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>F. Full Name, Mailing Address and Zip Code Boston Scientific Corp. PAC One Boston Scientific Place Natick, MA 01760-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 1/06/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>G. Full Name, Mailing Address and Zip Code CHUSHBAC 15 Mountain View Road Warren, NJ 07061-1615</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$3000.00</p>	<p>Date (month, day, year) 08/20/2000</p>	<p>Amount of Each Receipt this Period \$1300.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$6500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code Credit Union Legislative PAC 805 Fifteenth St NW Suite 300 Washington, DC 20005- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1000.00
	Occupation	10/30/2000	
	Aggregate Year-to-Date -> \$2300.00		
B. Full Name, Mailing Address and Zip Code Energy Research Corp. PAC 3 Great Pasture Road Danbury, CT 06813 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$2500.00
	Occupation	11/01/2000	
	Aggregate Year-to-Date -> \$2500.00		
C. Full Name, Mailing Address and Zip Code Emsign-Bickford Industries PAC 100 Grist Mill Road Simsbury, CT 06070 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$400.00
	Occupation	10/24/2000	
	Aggregate Year-to-Date -> \$400.00		
D. Full Name, Mailing Address and Zip Code American Academy of Otolaryngology One Prince Street Alexandria, VA 22314- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1000.00
	Occupation	10/25/2000	
	Aggregate Year-to-Date -> \$1000.00		
E. Full Name, Mailing Address and Zip Code Glaxo Wellcome Inc. PAC Five Moore Drive Research Triangle, NC 27709 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1000.00
	Occupation	10/20/2000	
	Aggregate Year-to-Date -> \$2000.00		
F. Full Name, Mailing Address and Zip Code Health Plan PAC of the Amer Assoc of Health Plans 1125 20th Street, NW #600 Washington, DC 20036- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1000.00
	Occupation	10/23/2000	
	Aggregate Year-to-Date -> \$1000.00		
G. Full Name, Mailing Address and Zip Code Hoffmann La Roche Inc Good Gov Comm 13001 I Street Suite 520 West Washington, DC 20005-3314 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period \$1000.00
	Occupation	10/27/2000	
	Aggregate Year-to-Date -> \$2500.00		

SUBTOTAL of Receipts This Page (optional)	\$7900.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code Human Rights Campaign Fund PAC 515 18th Street NW Suite 800 Washington, DC 20006- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/25/2000	
Aggregate Year-to-Date ->		\$6500.00	
B. Full Name, Mailing Address and Zip Code Humane USA PAC PO Box 19224 Washington, DC 20036- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/23/2000	
Aggregate Year-to-Date ->		\$250.00	
C. Full Name, Mailing Address and Zip Code International Paper PAC 1101 Pennsylvania Ave., NW Suite 200 Washington, DC 20004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/24/2000	
Aggregate Year-to-Date ->		\$3000.00	
D. Full Name, Mailing Address and Zip Code Intn'l Union of Operating Engineers 1125 seventeenth street, NW Washington, DC 20036- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/19/2000	
Aggregate Year-to-Date ->		\$500.00	
E. Full Name, Mailing Address and Zip Code Interventional Pain Physician PAC 2831 Lone Oak Road Paducah, KY 42003- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/24/2000	
Aggregate Year-to-Date ->		\$4000.00	
F. Full Name, Mailing Address and Zip Code Liberty Mutual Insurance PAC 175 Berkeley Street Boston, MA 02117 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/02/2000	
Aggregate Year-to-Date ->		\$2500.00	
G. Full Name, Mailing Address and Zip Code McKesson Employees PAC One Post Street, # 3200 San Francisco, CA 94104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/20/2000	
Aggregate Year-to-Date ->		\$1000.00	

SUBTOTAL of Receipts This Page (optional)	\$19750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code Metropolitan Life Insurance Co Employees PAC 1620 L Street NW Suite 800 Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 0/31/2000 \$2500.00	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and Zip Code Natl Assoc. of Social Workers Inc PAC 750 First Street NE Suite 700 Washington, DC 20002- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate year-to-Date ->	Date (month, day, year) 10/20/2000 \$500.00	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code National Council Farmers Co-Op PAC 50 F Street, NW, Suite 300 Washington, DC 20001 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/25/2000 \$1000.00	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Natl Assoc of Convenience Stores PAC 1605 King Street Alexandria, VA 22314 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/20/2000 \$3000.00	Amount of Each Receipt this Period \$3000.00
E. Full Name, Mailing Address and Zip Code National Restaurant Assoc. PAC 1200 17th Street, NW Washington, DC 20036-309 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/22/2000 \$1000.00	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Nat'l Society of Public Accountants PAC 1010 North Fairfax Street Alexandria, VA 22314 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 10/25/2000 \$500.00	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code National Telephone Cooperative Association PAC 44121 Wilson Blvd. 10th Floor Arlington, VA 22203- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 0/24/2000 \$1000.00	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)	\$7500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information printed from such reports and statements may not be said 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)			
Johnson for Congress			
A. Full Name, Mailing Address and Zip Code NATL UTILITY CONTRACTORS ASSOC 4310 Fairfax Drive Arlington, VA 22203 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/26/2000	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
B. Full Name, Mailing Address and Zip Code NWDA Political Action Committee P.O. Box 2219 Reston, VA 22090 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/20/2000	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
C. Full Name, Mailing Address and Zip Code National Beer Wholesalers PAC 1100 South Washington Street Alexandria, VA 22314-4494 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/20/2000	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
D. Full Name, Mailing Address and Zip Code National Association of Insurance and Financial Advisors PAC 2901 Telescar Court Falls Church, VA 22042- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/24/2000	\$2500.00
Aggregate Year-to-Date ->		\$2500.00	
E. Full Name, Mailing Address and Zip Code American Neurological Surgery PAC P.O.Box 136 Washington, DC 20044-0136 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/24/2000	\$2000.00
Aggregate Year-to-Date ->		\$2000.00	
F. Full Name, Mailing Address and Zip Code North Texas Comm. for Excellence in Gov. 2031 West Colorado Dallas, TX 75208- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/20/2000	\$1000.00
Aggregate Year-to-Date ->		\$1000.00	
G. Full Name, Mailing Address and Zip Code OPHTHPAC American Academy of Ophthalmology Inc. 1101 Vermont Avenue, NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/26/2000	\$2000.00
Aggregate Year-to-Date ->		\$3500.00	

SUBTOTAL of Receipts This Page (optional)	\$19500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the attached primary page

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NAME OF COMMITTEE (In Full)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code PFIZER Inc PAC One Morningside Drive, North Attention: Carl Johnson Westport, CT 06880-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 11/31/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>B. Full Name, Mailing Address and Zip Code PRUDENTIAL INSURANCE CO PAC Prudential Plaza Newark, NJ 07101</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$2000.00</p>	<p>Date (month, day, year) 10/31/2000</p>	<p>Amount of Each Receipt this Period \$1000.00</p>
<p>C. Full Name, Mailing Address and Zip Code Pitney Bowes PAC 409 12th Street Suite 701 Washington, DC 20024-2194</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$500.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and Zip Code QuestPAC 1350 I Street, NW Suite 500 Washington, DC 20005-3305</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$1000.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code Realtors PAC 430 N. Michigan Avenue Chicago, IL 60611</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$6000.00</p>	<p>Date (month, day, year) 10/24/2000</p>	<p>Amount of Each Receipt this Period \$2000.00</p>
<p>F. Full Name, Mailing Address and Zip Code Radiology Advocacy Alliance PAC 1891 Preston White Drive Reston, VA 20190-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$4750.00</p>	<p>Date (month, day, year) 10/20/2000</p>	<p>Amount of Each Receipt this Period \$4750.00</p>
<p>G. Full Name, Mailing Address and Zip Code SIERRA CLUB 408 C Street NE Washington, DC 20002-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date -> \$550.00</p>	<p>Date (month, day, year) 10/19/2000</p>	<p>Amount of Each Receipt this Period \$500.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>\$10750.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Any information required 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)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code SIERRA CLUB 408 C Street NE Washington, DC 20002-	Name of Employer _____	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period \$94.82
	Occupation _____	Sierra Magazine Ad	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Aggregate Year-to-Date -> \$644.82		IN-KIND
B. Full Name, Mailing Address and Zip Code SKADDEN ARPS PAC 1440 New York Avenue, NW Washington, DC 20005	Name of Employer _____	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$1000.00
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Aggregate Year-to-Date -> \$1000.00		
C. Full Name, Mailing Address and Zip Code SMAC PAC P.O. Box 221230 Chantilly, VA 22022-	Name of Employer _____	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$4500.00
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Aggregate Year-to-Date -> \$4500.00		
D. Full Name, Mailing Address and Zip Code Southwest Airlines Co. Freedom Fund PO Box 36611 RDQ 4GA Dallas, TX 75235-	Name of Employer _____	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$1800.00
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Aggregate Year-to-Date -> \$1800.00		
E. Full Name, Mailing Address and Zip Code Spins PAC 6300 North River Road Suite 500 Rosemont, IL 60018-	Name of Employer _____	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period \$1000.00
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Aggregate Year-to-Date -> \$1000.00		
F. Full Name, Mailing Address and Zip Code The H & A Block PAC 4410 Main Street Kansas City, MO 64111	Name of Employer _____	Date (month, day, year) 11/02/2000	Amount of Each Receipt this Period \$500.00
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Aggregate Year-to-Date -> \$500.00		
G. Full Name, Mailing Address and Zip Code The Home Depot Better Government Committee 2727 Paces Ferry Road Atlanta, GA 30339	Name of Employer _____	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$500.00
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	Aggregate Year-to-Date -> \$500.00		

SUBTOTAL of Receipts This Page (optional)	\$8594.82
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code Taco PAC 6405 Metcalf Avenue, Suite 503 Shawnee Mission, KS 66202-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/20/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$1000.00
B. Full Name, Mailing Address and Zip Code Tenet Healthcare Corporation PAC 3820 State Street Santa Barbara, CA 93105-	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/27/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$2000.00
C. Full Name, Mailing Address and Zip Code Westvaco Political Action Committee Westvaco Building New York, NY 10171	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	10/20/2000	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$2000.00
D. Full Name, Mailing Address and Zip Code , ,	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code , ,	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code , ,	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code , ,	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	/ /	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$5000.00
TOTAL This Period (last page this line number only)	\$80494.82

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

Any information copied from such reports and statements may not be used or cited 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)
Johnson for Congress

<p>A. Full Name, Mailing Address and Zip Code 601 Farmington Avenue LLC 601 Farmington Avenue New Britain, CT 06053-</p>	<p>Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 11/02/2000</p>	<p>Amount of Each Disbursement This Period \$1,100.00</p>
<p>B. Full Name, Mailing Address and Zip Code Unemployment Comp Administrator P.O. Box 2940 Hartford, CT 06104-</p>	<p>Purpose of Disbursement Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/25/2000</p>	<p>Amount of Each Disbursement This Period \$115.56</p>
<p>C. Full Name, Mailing Address and Zip Code American ViewPoint 300 N. Lee Street, Ste. 400 Alexandria, VA 22314-</p>	<p>Purpose of Disbursement Polling Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 11/06/2000</p>	<p>Amount of Each Disbursement This Period \$3,0250.00</p>
<p>D. Full Name, Mailing Address and Zip Code Cambridge Catering 1390 Hopwood Street Simsbury, CT 06070-</p>	<p>Purpose of Disbursement Fundraising: Food & beverage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 11/16/2000</p>	<p>Amount of Each Disbursement This Period \$1234.90</p>
<p>E. Full Name, Mailing Address and Zip Code Capitol Hill Club 300 First Street, SE Washington, DC 20003-</p>	<p>Purpose of Disbursement Fundraising: Food & beverage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 11/26/2000</p>	<p>Amount of Each Disbursement This Period \$300.00</p>
<p>F. Full Name, Mailing Address and Zip Code Lisa Carver 286 Garry Drive New Britain, CT 06052-</p>	<p>Purpose of Disbursement Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 11/15/2000</p>	<p>Amount of Each Disbursement This Period \$425.21</p>
<p>G. Full Name, Mailing Address and Zip Code Jaime Cheshire 5426 Richenbacher Avenue Apt. 302 Alexandria, VA 22304-</p>	<p>Purpose of Disbursement Reimbursement - Mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 11/26/2000</p>	<p>Amount of Each Disbursement This Period \$275.00</p>

SUBTOTAL of Disbursements This Page (optional)

\$13700.69

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Susan Christensen 1201 South Eads Street #1705 Arlington, VA 22202-	Reimbursement - Mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/2000	\$314.16
B. Full Name, Mailing Address and Zip Code Crooked Street 400 New Britain Ave Plainville, CT 06062-	Purpose of Disbursement Election night rally Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/2000	\$350.00
C. Full Name, Mailing Address and Zip Code Crooked Street 400 New Britain Ave Plainville, CT 06062-	Purpose of Disbursement Election night rally - food & bev Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/2000	\$3776.33
D. Full Name, Mailing Address and Zip Code Christopher Demko 1230 Mountain Road West Suffield, CT 06093-	Purpose of Disbursement Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/15/2000	\$1584.59
E. Full Name, Mailing Address and Zip Code New Britain Elks Lodge West Main Street New Britain, CT 06051-	Purpose of Disbursement Fundraising - Hall rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/29/2000	\$475.00
F. Full Name, Mailing Address and Zip Code Federal Express P.O.Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Express mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/16/2000	\$63.14
G. Full Name, Mailing Address and Zip Code Federal Express P.O.Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Express mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/06/2000	\$41.98

SUBTOTAL of Disbursements This Page (optional)

\$6610.20

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express P.O.Box 1140 Memphis, TN 38101-1140	Express mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/2000	\$339.36
Federal Express P.O.Box 1140 Memphis, TN 38101-1140	Express mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/2000	\$41.72
Hummel Distributing 850 Springfield Road Union, NJ 07083-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/2000	\$35719.87
Hummel Distributing 850 Springfield Road Union, NJ 07083-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/2000	\$2647.54
Hummel Distributing 850 Springfield Road Union, NJ 07083-	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/2000	\$9595.05
IRS Hartford, CT 06105-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/2000	\$151.33
IRS Hartford, CT 06105-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/13/2000	\$3586.74

SUBTOTAL of Disbursements This Page (optional)	\$52081.61
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 9
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
International Skating Center of CT 1375 Hopmeadow Street Simsbury, CT 06070-	Fundraising - event tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/2000	\$1290.00
B. Full Name, Mailing Address and Zip Code Jamestown Associates 3131 Princeton Avenue Bldg 4, Suite 216 Princeton, NJ 08540-	Purpose of Disbursement Media advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/25/2000	\$1064.00
C. Full Name, Mailing Address and Zip Code Jamestown Associates 3131 Princeton Avenue Bldg 4, Suite 216 Princeton, NJ 08540-	Purpose of Disbursement Media advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/2000	\$27243.00
D. Full Name, Mailing Address and Zip Code Jamestown Associates 3131 Princeton Avenue Bldg 4, Suite 216 Princeton, NJ 08540-	Purpose of Disbursement Mail production expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/24/2000	\$12868.00
E. Full Name, Mailing Address and Zip Code Jamestown Associates 3131 Princeton Avenue Bldg 4, Suite 216 Princeton, NJ 08540-	Purpose of Disbursement Media advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/06/2000	\$62901.50
F. Full Name, Mailing Address and Zip Code Nancy Johnson 141 South Mountain Drive New Britain, CT 06052-	Purpose of Disbursement Reimbursement - Travel expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/2000	\$515.00
G. Full Name, Mailing Address and Zip Code David Karvelas 4917 North 35th Street Arlington, VA 22207-	Purpose of Disbursement Reimbursement - Mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/26/2000	\$275.00

SUBTOTAL of Disbursements This Page (optional)

\$106156.50

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cheryl Lounsbury 125 Berlin Ave Southington, CT 06489-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/15/2000	\$820.89
B. Full Name, Mailing Address and Zip Code MCI P.O. Box 85853 Louisville, KY 40285-8553	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/2000	\$323.95
C. Full Name, Mailing Address and Zip Code Dan Mazzone 18 Standish Street Enfield, CT 06082-	Reimbursement - Mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/2000	\$300.00
D. Full Name, Mailing Address and Zip Code Morgan Meredith 445 Brookfield Corp. Drive Chantilly, VA 20151-	Fundraising: Consulting & Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/16/2000	\$6185.28
E. Full Name, Mailing Address and Zip Code Morrell Phillips & Co. 1253 Wilbur Cross Parkway Berlin, CT 06037-	Accounting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/13/2000	\$190.00
F. Full Name, Mailing Address and Zip Code New England Catering P.O. Box 208 Cornwall, CT 06753-	Fundraising - Food Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/2000	\$1347.00
G. Full Name, Mailing Address and Zip Code Margaret Patricelli 77 Hartford Road Simsbury, CT 06070	Food & beverage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/20/2000	\$1000.00 IN KIND

SUBTOTAL of Disbursements This Page (optional)	\$10167.12
TOTAL this Period (Last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied 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)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Patricelli Folly Farm 77 Hartford Road Simsbury, CT 06070	Fundraising - Food & Beverage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/2000	\$288.81
Robert Patricelli Folly Farm 77 Hartford Road Simsbury, CT 06070	Food & beverage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/2000	\$1000.00 IN KIND
People's Bank P.O. Box 18055 Bridgeport, CT 06601-	Credit card: Postage/supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/16/2000	\$2587.85
Prims Publishers Inc. 90 Middle Quarter Mall Southbury, CT 06488-	Newspaper advertising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/02/2000	\$782.25
Commissioner of Revenue Services P.O.Box 2931 Hartford, CT 06104-	Payroll taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/13/2000	\$326.22
SIERRA CLUB 408 C Street NE Washington, DC 20002-	Sierra Magazine Ad Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/2000	\$94.82 IN KIND
SNET P.O.Box 1861 New Haven, CT 06508-0901	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/26/2000	\$314.00

SUBTOTAL of Disbursements This Page (optional)	\$5393.95
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SNET P.O.Box 1861 New Haven, CT 06509-0901	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/02/2000	\$350.00
SNET Wireless P.O. Box 2563 New Haven, CT 06508-0901	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/2000	\$180.05
United Seniors in Action P.O. Box 280422 Hartford, CT 06126-	Program Ad Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/22/2000	\$250.00
Craig Taylor 13 High Hill Road Canton, CT 06019-2222	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/15/2000	\$3203.13
Craig Taylor 13 High Hill Road Canton, CT 06019-2222	Reimbursement- Mileage/supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/2000	\$1511.92
Terrapin Studios 652 Glenbrook Road Stamford, CT 06906-	Photography services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/26/2000	\$71.55
Michael Ward 817 Totoket Road Northford, CT 06477-	Wages Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/10/2000	\$1625.59

SUBTOTAL of Disbursements This Page (optional)	\$7192.24
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Michael Ward 817 Totoket Road Northford, CT 06477-	Reimbursement - Mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/10/2000	\$372.60
B. Full Name, Mailing Address and Zip Code Xerox Corp. P.O. Box 827598 Philadelphia, PA 19182-	Purpose of Disbursement Equipment rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/26/2000	\$309.24
C. Full Name, Mailing Address and Zip Code Xerox Corp. P.O. Box 827598 Philadelphia, PA 19182-	Purpose of Disbursement Equipment rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/24/2000	\$309.24
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	/ /	

SUBTOTAL of Disbursements This Page (optional)	\$991.08
TOTAL This Period (Last page this line number only)	\$202293.39

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shelley Moore Capito for Congress 902 VA Street East Charleston, WV 25301-	Contribution: House WV 2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
Jennifer Carroll for Congress P.O. Box 30322 Jacksonville, FL 32230-	Contribution: House FL 3 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/33/2000	\$1000.00
Brian Blibray for Congress 970 Seacoast Drive Suite 7 Imperial Beach, CA 91932-	Contribution: House CA 49 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
Cunneen for Congress 5339 Prospect Road #151 San Jose, CA 95129-	Contribution: House CA 15 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
Greenleaf for Congress 1555 Terwood Road Huntingdon Valley, PA 19006-	Contribution: House PA 13 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
Heather Wilson for Congress 1420 Carlisle NE Suite 108 Albuquerque, NM 87110-	Contribution: House NM 1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
Joan Johnson for Congress 126 East Main Street Bay Shore, NY 11706-	Contribution: House NY 2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$7000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

See appropriate instructions for each category of the detailed Summary Page

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NAME OF COMMITTEE (In Full)
 Johnson for Congress

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kuykendall for Congress 21311 Hawthorne Blvd. Suite 107 Torrance, CA 90503-	Contribution: House CA 36 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
Northrop for Congress 4008 Dutchman's Lane Louisville, KY 40207-	Contribution: House KY 3 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
Runbeck for Congress 1402 Concordia Avenue Saint Paul, MN 55104-	Contribution: House MN 4 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/2000	\$1000.00
National Republican Congressional Comm. 310 First Street, SE Washington, DC 20003-	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/2000	\$87500.00
Sixmons for Congress 12 Roosevelt Avenue Mystic, CT 06355-	Contribution: House CT 2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/2000	\$1000.00
Zimmer 2000 Inc. 3131 Princeton Pike Bldg 4 Suite 215 Trenton, NJ 08648-	Contribution: House NJ 12 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/2000	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$92500.00
TOTAL This Period (last page this line number only)	\$99500.00

