

**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			
<b>A. Full Name, Mailing Address and Zip Code</b> 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)	<b>Name of Employer</b> Information Requested Occupation Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> 10/22/2000 \$200.00	<b>Amount of Each Receipt this Period</b> \$200.00
<b>B. Full Name, Mailing Address and Zip Code</b> 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)	<b>Name of Employer</b> Purman Selz Capital Mngmt Occupation Money Manager Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> 10/19/2000 \$250.00	<b>Amount of Each Receipt this Period</b> \$250.00
<b>C. Full Name, Mailing Address and Zip Code</b> Virginia Morosani 184 Wigwam Road Litchfield, CT 06759 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Occupation Homemaker Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> 10/29/2000 \$250.00	<b>Amount of Each Receipt this Period</b> \$250.00
<b>D. Full Name, Mailing Address and Zip Code</b> 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)	<b>Name of Employer</b> Occupation Retired Aggregate Year to-Date ->	<b>Date (month, day, year)</b> 11/02/2000 \$500.00	<b>Amount of Each Receipt this Period</b> \$500.00
<b>E. Full Name, Mailing Address and Zip Code</b> Joseph Murphy 41 Grossett Road Riverside, CT 06878- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Self Employed Occupation Physician Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> 10/20/2000 \$250.00	<b>Amount of Each Receipt this Period</b> \$250.00
<b>F. Full Name, Mailing Address and Zip Code</b> Joannette Naman 507 Bolton Place Houston, TX 77024- Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Name of Employer</b> Self-Employed Occupation Consultant Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> 10/20/2000 \$250.00	<b>Amount of Each Receipt this Period</b> \$250.00
<b>G. Full Name, Mailing Address and Zip Code</b> 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)	<b>Name of Employer</b> M.J. Neiditz & Co. Occupation Real Estate Aggregate Year-to-Date ->	<b>Date (month, day, year)</b> 10/30/2000 \$350.00	<b>Amount of Each Receipt this Period</b> \$350.00

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