

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	3 / 3
					FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) sbca					
Full Name, Mailing Address, and ZIP Code Christine Sheehan 1515 Broadway 18th Floor New York NY 10036		Name of Employer MTV Networks		Date (month, day, year) 11/07/2000	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Senior VP, Marketing Development		Aggregate Year-to-Date > 5 250.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					250.00