

**SCHEDULE A  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 487 / 987  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Dole 2002 Committee, Inc.

**A.** Full Name (Last, First, Middle Initial) Mrs. Edith Lindner  
 Mailing Address 8555 Shawnee Run Road  
 City Cincinnati State OH Zip Code 45243  
 Date of Receipt 12 / 31 / 2001  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Name of Employer Homemaker Occupation Homemaker  
 Election Cycle-to-Date 1000.00  
 Receipt For:  Primary  General  
 Other (specify)   
 Transaction ID: 0117200242C271881455

**B.** Full Name (Last, First, Middle Initial) Mrs. Frances Lindner  
 Mailing Address 7725 Buckingham Lane  
 City Cincinnati State OH Zip Code 45243  
 Date of Receipt 12 / 31 / 2001  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Name of Employer Homemaker Occupation Homemaker  
 Election Cycle-to-Date 1000.00  
 Receipt For:  Primary  General  
 Other (specify)   
 Transaction ID: D117200242C271841455

**C.** Full Name (Last, First, Middle Initial) Mrs. Joann E. Lindner  
 Mailing Address 444 Torrence Court  
 City Cincinnati State OH Zip Code 45203  
 Date of Receipt 12 / 31 / 2001  
 Amount of Each Receipt this Period 1000.00  
 Receipt  
 Name of Employer Homemaker Occupation Homemaker  
 Election Cycle-to-Date 1000.00  
 Receipt For:  Primary  General  
 Other (specify)   
 Transaction ID: 0117200242C272121455

SUBTOTAL of Receipts This Page (optional) 3000.00  
 TOTAL This Period (last page this line number only)