

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule PAGE OF
for each category of the 25 30
Detailed Summary Page FOR LINE NUMBER
11a1

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NAME OF COMMITTEE (In Full)
Gen Olson for United States Senate
FEC ID No. C0028451

9 4 0 2 0 0 9 1 4 3 0

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene Sit 6216 Braeburn Circle Edina, MN 55435	Sit Investment Associates, Inc.	03/16/94	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
James W. Smith 3858 Independence Road Maple Plain, MN 55391		03/25/94	50.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 50.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerome M. Soderberg #309 50 Groveland Terrace Minneapolis, MN 55403	Self-employed	02/22/94	100.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 100.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul E. Stark 735 Pleasant Street Excelsior, MN 55331	N/A	01/26/94	100.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 100.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Von Steinbergs 320 S. Ferndale Road Wayzata, MN 55391	Containment Tech.	03/30/94	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
Gilbert E. Stenberg 5800 St. Croix Ave., #220 Golden Valley, MN 55422-4483		01/26/94	50.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 50.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ralph Strangis 550 Norwest Center 90 South Seventh Street Minneapolis, MN 55402	Kaplan, Strangis & Kaplan	03/28/94	250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$ 250.00	

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