

SCHEDULE A

Itemized Receipts

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NAME OF COMMITTEE (in Full) JOHNSON FOR CONGRESS 2000 CD0369168

A. Full Name, Mailing Address and Zip Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey S. Lindner P.O. Box 518 Anahola, HI 96700	Occupation Requested	10/26	\$ 1,000.00
Receipt For: Primary General X Other (specify)	Aggregate Year-to-Date:	\$ 1,000.00	
B. Full Name, Mailing Address and Zip Code Michael D. Valentine 1884 Dondor Ave. Cincinnati, Ohio 45206-1459	Name of Employer Requested Occupation Requested	Date (month, day, year) 10/26	Amount of Each Receipt this Period \$ 1,000.00
Receipt For: Primary General X Other (specify)	Aggregate Year-to-Date:	\$ 1,000.00	
C. Full Name, Mailing Address and Zip Code Mrs. Henry L. Barbey 570 Park Ave. New York, NY 10021	Name of Employer None Occupation Housewife	Date (month, day, year) 10/26	Amount of Each Receipt this Period \$ 500.00
Receipt For: Primary General X Other (specify)	Aggregate Year-to-Date:	\$ 500.00	
D. Full Name, Mailing Address and Zip Code Edward H. Lin 126 E. 12th St., Apt. 3A New York, NY 10003-5805	Name of Employer Requested Occupation Requested	Date (month, day, year) 10/26	Amount of Each Receipt this Period \$ 250.00
Receipt For: Primary General X Other (specify)	Aggregate Year-to-Date:	\$ 250.00	
E. Full Name, Mailing Address and Zip Code Sally W. Pillsbury 1300 Brackets Point Rd. Wayzata, MN 55381	Name of Employer Self Occupation Investment Advisor-Retired	Date (month, day, year) 10/26	Amount of Each Receipt this Period \$ 500.00
Receipt For: Primary General X Other (specify)	Aggregate Year-to-Date:	\$ 750.00	
F. Full Name, Mailing Address and Zip Code Anne Hale Johnson 10600 Red Barn Ln. Potosi, MO 20854-1953	Name of Employer Requested Occupation Requested	Date (month, day, year) 10/26	Amount of Each Receipt this Period \$ 500.00
Receipt For: Primary General X Other (specify)	Aggregate Year-to-Date:	\$ 500.00	
G. Full Name, Mailing Address and Zip Code Robert T. Fuchs 236 C. Orinco Dr., P.O. Box 322 Brightwaters, NY 11816	Name of Employer Self Occupation Attorney	Date (month, day, year) 10/26	Amount of Each Receipt this Period \$ 100.00
Receipt For: Primary General X Other (specify)	Aggregate Year-to-Date:	\$ 350.00	
SUBTOTAL of Receipts This Page			\$ 3,600.00
TOTAL This Period (last page this line number only)			\$ 0.00