

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the

FOR LINE NUMBER

t1(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in Full)
Runbeck for Congress **c00325670**

A. Full Name, Mailing Address and ZIP Code Whitney, Helen 1900 Foshay Tower 821 Marquette Av Minneapolis MN 55402 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Self Occupation Homemaker Aggregate Year-to-Date > \$300.00	Date (month, day, year) 8/24/2000	Amount of Each Receipt this Period \$300.00
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B. Full Name, Mailing Address and ZIP Code Whitney, J Kimball 559 Harrington Rd Wayzata MN 55391 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Whitney Management Occupation Exec. Aggregate Year-to-Date > \$300.00	Date (month, day, year) 8/24/2000	Amount of Each Receipt this Period \$300.00
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C. Full Name, Mailing Address and ZIP Code Whitney, Wheelock, Mr. 1900 Foshay Tower 821 Marquette Ave. Minneapolis MN 55402 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Whitney Management Occupation Retired Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 5/19/2000	Amount of Each Receipt this Period \$500.00
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Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
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Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
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Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
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Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
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SUBTOTAL of Receipts This Page (optional)	\$1,100.00
TOTAL This Period (last page this line number only)	\$65,649.00