

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Friends of Giuliani Exploratory Committee

A. Full Name, Mailing Address and Zip Code Joseph Strazzeri PO Box 585 Fishers, NY 14433-	Name of Employer DiMarco Constructors Occupation Construction	Date (month, day, year) 08/31/1999	Amount of Each Receipt this Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$250.00		
B. Full Name, Mailing Address and Zip Code Steven Denning 16 Khakum Drive Greenwich, CT 06831-	Name of Employer General Atlantic Partners Occupation Partner	Date (month, day, year) 12/13/1999 11/12/99	Amount of Each Receipt this Period \$-1000.00 MEMO
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$-1000.00		
C. Full Name, Mailing Address and Zip Code Cynthia Lefferts 116 East 63rd Street New York, NY 10021-	Name of Employer Occupation Retired	Date (month, day, year) 11/12/1999	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		
D. Full Name, Mailing Address and Zip Code Morgan Cline 1101 Bloomfield Street Hoboken, NJ 07030-	Name of Employer Cline, Davis & Mann Occupation Chairman & CEO	Date (month, day, year) 12/14/1999	Amount of Each Receipt this Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$1000.00		
E. Full Name, Mailing Address and Zip Code Edgar Lewis 630 East Drive Sewickley, PA 15143-	Name of Employer Occupation Retired	Date (month, day, year) 11/10/1999	Amount of Each Receipt this Period \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$200.00		
F. Full Name, Mailing Address and Zip Code John Good 3417 Alabama Avenue Alexandria, VA 22305-1737	Name of Employer Allentown Family Dental LLC Occupation Partner	Date (month, day, year) 10/19/1999	Amount of Each Receipt this Period \$25.00 MEMO
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$25.00		
G. Full Name, Mailing Address and Zip Code Harvey Bazaar 13 Skyline Drive North Caldwell, NJ 07006-	Name of Employer Price Waterhouse Coopers Occupation CPA	Date (month, day, year) 12/17/1999	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$500.00		

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SUBTOTAL of Receipts This Page (optional)	\$2450.00
TOTAL This Period (last page this line number only)	