

SCHEDULE A (FEC Form 3P) ITEMIZED RECEIPTS

| | | |
|---|--|-------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 674 / 5722 |
| | (check only one) | |
| <input type="checkbox"/> 16 19a | <input checked="" type="checkbox"/> 17a 19b | <input type="checkbox"/> 17b 20a |
| <input type="checkbox"/> 17c 20b | <input type="checkbox"/> 17d 20c | <input type="checkbox"/> 18 21 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
RUDY GIULIANI PRESIDENTIAL COMMITTEE, INC

| | | |
|---|---|---|
| A. | Full Name (Last, First, Middle Initial) DR. DONALD R. CARTER | Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7 |
| | Mailing Address 8200 E. BELLVIEW AVENUE SUITE 230C | Amount of Each Receipt this Period 500.00 |
| | City State Zip Code GREENWOOD VILLAGE CO 80111-2824 | CONTRIBUTION |
| | FEC ID number of contributing federal political committee. | Transaction ID: SA17.121254 |
| | Name of Employer Occupation SELF-EMPLOYED PHYSICIAN | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|--|---|
| B. | Full Name (Last, First, Middle Initial) DR. HARVEY L. CARTER, JR. | Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 0 / 2 0 0 7 |
| | Mailing Address 830 ERIC STREET | Amount of Each Receipt this Period 4600.00 |
| | City State Zip Code SHREVEPORT LA 71106-1506 | CONTRIBUTION |
| | FEC ID number of contributing federal political committee. | SEE REATTRIBUTION |
| | Name of Employer Occupation RETIRED | Transaction ID: SA17.134301 |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2300.00 | |

| | | |
|---|--|---|
| C. | Full Name (Last, First, Middle Initial) DR. HARVEY L. CARTER, JR. | Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 7 |
| | Mailing Address 830 ERIC STREET | Amount of Each Receipt this Period -2300.00 |
| | City State Zip Code SHREVEPORT LA 71106-1506 | CONTRIBUTION |
| | FEC ID number of contributing federal political committee. | [MEMO ITEM] REATTRIBUTION TO SPOUSE |
| | Name of Employer Occupation RETIRED | Transaction ID: SA17.134301B |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2300.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 5100.00 |
| TOTAL This Period (last page this line number only) | |