

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (01/01/2000 - 06/30/2000)

PAGE 1 OF 1
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

FRIENDS OF SONNY BONO C002B7607

<p>A. Full Name, Mailing Address and ZIP Code MARION ROGERS RILEY 1130 SHENANDOAH RD. SAN MARINO, CA 91108</p>	<p>Name of Employer Occupation HOMEMAKER</p>	<p>Date(month, day, year) 03/02/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 1,000.00</p>		
<p>B. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>C. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		<p>3,000.00</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>1,000.00</p>
<p>TOTAL This Period (last page this line number only)</p>			<p>1,000.00</p>