

SCHEDULE A

ITEMIZED RECEIPTS

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**Friends of Mark Warner
c/o Leslie Kerman**

9602020120

A. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Cohn, Alan S. 19 Velvet Valley Court Owings Mills MD 21117	Health Enterprises	11/21/95	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996 Primary	Occupation Executive	Aggregate Year-To-Date > \$ 1,000.00	
B. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Collier Jr., Earl M. 2027 Hillier Place Washington DC 20009	Vitas Healthcare	11/27/95	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996 Primary	Occupation President	Aggregate Year-To-Date > \$ 250.00	
C. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Collis, Lisa D. 505 S. Lee Street Alexandria VA 22314		12/7/95	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996 Primary	Occupation Homemaker	Aggregate Year-To-Date > \$ 1,000.00	
D. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Collis, Lisa D. 505 S. Lee Street Alexandria VA 22314		12/7/95	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996 General	Occupation Homemaker	Aggregate Year-To-Date > \$ 2,000.00	
E. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Collis, Virginia E. 17346 Holmes Drive Brookings OR 97415		8/19/95	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996 Primary	Occupation Retired	Aggregate Year-To-Date > \$ 1,000.00	
F. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Collis, William J. 17346 Holmes Drive Brookings OR 97415	Self-employed	11/20/95	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996 Primary	Occupation Consultant	Aggregate Year-To-Date > \$ 1,000.00	
G. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Connolly, Peter M. 4925 46th Street, N.W. Washington DC 20016	Kotzen & Naftalin	11/30/95	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996 Primary	Occupation Attorney	Aggregate Year-To-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (Optional).....	\$5,750.00
TOTAL This Period (last page this line number only).....	