

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page	PAGE 12	OF 17
	FOR LINE NUMBER 11ai	

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NAME OF COMMITTEE (In Full)

Victory in New York

A. Full Name, Mailing Address and ZIP Code Greenwald, Patricia B. 830 Park Ave. New York, NY 10021		Name of Employer Homemaker	Date (month, day, year) 09/30/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date \Rightarrow \$	1,000.00
B. Full Name, Mailing Address and ZIP Code Edelman, Nancy Hertz 55 Hillside Rd. Rye, NY 10580		Name of Employer Homemaker	Date (month, day, year) 09/30/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date \Rightarrow \$	1,000.00
C. Full Name, Mailing Address and ZIP Code Fife, Barbara J. 25 Central Park W. New York, NY 10023		Name of Employer Baruch College	Date (month, day, year) 09/30/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Adminsitrator	Aggregate Year-To-Date \Rightarrow \$	1,000.00
D. Full Name, Mailing Address and ZIP Code Frary, Irene 211 Central Park W. New York, NY 10024		Name of Employer Homemaker	Date (month, day, year) 09/30/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date \Rightarrow \$	1,000.00
E. Full Name, Mailing Address and ZIP Code Gold, James S. 30 Rockefeller Plaza New York, NY 10020		Name of Employer Lazard Freres & Co.	Date (month, day, year) 09/30/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Managing Director	Aggregate Year-To-Date \Rightarrow \$	1,000.00
F. Full Name, Mailing Address and ZIP Code Halpern, Mimi 450 Clarkson Ave. Brooklyn, NY 11203		Name of Employer SUNY	Date (month, day, year) 09/30/98	Amount of Each Receipt this Period 10,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Scientist	Aggregate Year-To-Date \Rightarrow \$	10,000.00
G. Full Name, Mailing Address and ZIP Code Haseltine, William A. 3053 P St., N.W. Washington, D.C. 20007		Name of Employer Dana Farber Cancer Institute	Date (month, day, year) 09/30/98	Amount of Each Receipt this Period 10,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Physician	Aggregate Year-To-Date \Rightarrow \$	10,000.00

SUBTOTAL of Receipts This Page (optional)	25,000.00
TOTAL This Period (last page this line number only)	

RESEARCH