

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

7/126

FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
Florio for Senate Committee, Inc.

Full Name, Mailing Address, and ZIP Code John J. Lynch 36 Vista Drive Little Silver NJ . 07739	Name of Employer Treasurer's Best Efforts	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
	Occupation (blank)		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		

Full Name, Mailing Address, and ZIP Code Colleen M. McCann 100 Hiram Square New Brunswick NJ 08901	Name of Employer Consultant	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
	Occupation The MWW Group		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

Full Name, Mailing Address, and ZIP Code Stacey J. Mobley 141 Deer Valley Lane Wilmington DE 19807	Name of Employer DuPont	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
	Occupation Attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

Full Name, Mailing Address, and ZIP Code Alicia O'Donnell Walker 545 Clothier Springs Road Malvern PA 19355	Name of Employer Packard	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
	Occupation Senior Vice President		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		

Full Name, Mailing Address, and ZIP Code William P. Rebarick 4 McGuirk Lane West Orange NJ 07052	Name of Employer Silis Cummis et al.	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
	Occupation Administrative Director		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		

Full Name, Mailing Address, and ZIP Code M. Zev Rose 1741 Country Club Drive Cherry Hill NJ 08003	Name of Employer Sherman Silverstein Kuhl Rose Podolsky	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 250.00
	Occupation Attorney		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		

Full Name, Mailing Address, and ZIP Code George E. Scharpf 3 Beaver Dam Road Colts Neck NJ 07722	Name of Employer Amboy National Bank	Date (month, day, year) 08/16/1999	Amount of Each Receipt this Period 1000.00
	Occupation President & CEO		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	

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