

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER  
11A1

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**NAME OF COMMITTEE (In Full)**  
**Friends for Rick White**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Jan Ostrovsky 4474 E Mercer  Mercer Island WA 98040-	Name of Employer  Occupation Information requested	Date (month, day, year) 10/30/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Charles Palmerton 325 Eastlake E  Seattle WA 98109-	Name of Employer PEMCO Insurance Co  Occupation Exec	Date (month, day, year) 10/20/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 600.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Jeffrey Parnish, DDS 2844 W Lk Sammamish NE  Redmond WA 98052-5913	Name of Employer Self  Occupation Dentist	Date (month, day, year) 10/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Thaddeus Parry 27049 7th Pl S  Kent WA 98032-	Name of Employer  Occupation Retired	Date (month, day, year) 10/29/1998	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Larry Pinn 15306 NE 190th  Woodinville WA 98072-	Name of Employer Self  Occupation Consultant	Date (month, day, year) 10/30/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. David Pottruck 3501 Jackson Street  San Francisco CA 98116-	Name of Employer  Occupation Information requested	Date (month, day, year) 10/17/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Colleen Poulet 14976 Sobey Road  Saratoga CA 95070-	Name of Employer Adobe Systems  Occupation General Counsel	Date (month, day, year) 10/21/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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) .....