

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) **Time Future Inc.** FEC ID No. **C00270736**

A. Full Name, Mailing Address and ZIP Code Elaine R. Wolfensohn 5305 North Prince Place Jackson, WY 83001 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Homemanager	06/02/98	1000.00
B. Full Name, Mailing Address and ZIP Code Marcia Aronoff 39 Columbia Terrace Weehawken, NJ 07087 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Environmental Defense Fund	06/01/98	1000.00
C. Full Name, Mailing Address and ZIP Code John Despres 5211 39th Street, N.W. Washington, DC 20015 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Despres Associates	06/04/98	1000.00
D. Full Name, Mailing Address and ZIP Code Gina Despres 5211 39th Street, N.W. Washington, DC 20015 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Capital Research & Management	06/04/98	1000.00
E. Full Name, Mailing Address and ZIP Code Mark Gasarch 200 East 87th Street New York, NY 10128 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self-employed	06/01/98	500.00
F. Full Name, Mailing Address and ZIP Code John Fabian 10 Highview Court Montville, NJ 07045 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Self-employed	06/01/98	1000.00
G. Full Name, Mailing Address and ZIP Code Bruce Bozzi 737 Park Avenue New York, NY 10021 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Palm Management Corp	06/29/98	500.00

SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	