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Name of Committee (in full)
 > Friends of Schumer

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Pamela Harrison 185 Noye Lane Woodmere, NY 11598	Southaby's Occupation: Inventory Mgmt	11/04/96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	1000.00	
Wendi Harrison 185 Noye Lane Woodmere, NY 11598	Req. Inf. Occupation: Req. Inf.	11/04/96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	1000.00	
William Haseltine 2053 P. Street, N.W. Washington, DC 20007-2039	Dana Farber Cancer Institute Occupation: Physician	10/31/96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	1000.00	
William Hughes Hayden 245 Park Avenue New York, NY 10167	Bear Stearns Occupation: Investmt Banker	10/30/96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	1000.00	
Thomas J. Hayes 54 Crofts Lane Stamford, CT 06903	Beth Israel Medical Center Occupation: Exec. V.P.	10/24/96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	1000.00	
Gale E. Hayman 750 Lexington Avenue 16th Floor New York, NY 10022	Gale Hayman, Inc. Occupation: Founder	10/31/96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date	1000.00	

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....