

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

FRIENDS OF LIZ HOLTZMAN

ADDRESS (number and street) ☐ Check if different than previously reported.

99 HUDSON ST., 4th FL

CITY, STATE and ZIP CODE

NY NY 10013

STATE/DISTRICT

US SENATE/NY

2. FEC IDENTIFICATION NUMBER

C00110999

3. IS THIS REPORT AN AMENDMENT?

☐ YES

☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☒ January 31 Year End Report

☐ July 31 Mid-Year Report (Non-election Year Only)

☐ Twelfth day report preceding

(Type of Election)
election on 1 in the State of N.Y.

☐ Thirtieth day report following the General Election on

in the State of

☐ Termination Report

This report contains
activity for

☒ Primary Election

☐ General Election

☐ Special Election

☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
10/96 through 12/31/91		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	250,125.00	250,125.00
(b) Total Contribution Refunds (from Line 20(d))	-	-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	250,125.00	250,125.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	66,102.40	66,102.40
(b) Total Offsets to Operating Expenditures (from Line 14)	-	-
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	66,102.40	66,102.40
8. Cash on Hand at Close of Reporting Period (from Line 27)	- 7,203.04	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	7,203.04	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

MARY CHEASTY KORNMAN

Signature of Treasurer

Mary Cheasty Kornman

Date

Jan. 31, 1991

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) FRIENDS OF LIZ HOLTZMAN		Report Covering the Period: From: 10/90 To: 12/31/91	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)		170,625.00	
(ii) Unitemized		-	
(iii) Total of contributions from individuals		170,625.00	170,625.00
(b) Political Party Committees		-	
(c) Other Political Committees (such as PACs)		79,520.00	79,520.00
(d) The Candidate		-	
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		250,125.00	250,125.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.		-	-
13. LOANS:			
(a) Made or Guaranteed by the Candidate		-	-
(b) All Other Loans		-	-
(c) TOTAL LOANS (add 13(a) and (b))		-	-
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		-	-
15. OTHER RECEIPTS (Dividends, Interest, etc.)		-	-
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		250,125.00	250,125.00
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		66,102.40	66,102.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.		191,225.64	191,225.64
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		-	-
(b) Of All Other Loans		-	-
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		-	-
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		-	-
(b) Political Party Committees		-	-
(c) Other Political Committees (such as PACs)		-	-
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		-	-
21. OTHER DISBURSEMENTS		-	-
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21).		257,328.04	257,328.04
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$ -	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$ 250,125.00	
25. SUBTOTAL (add Line 23 and Line 24)		\$ 250,125.00	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).		\$ 257,328.04	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25).		\$ -7,203.04	

9202003441

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 42
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Donald Feuerstein 1 New York Plaza New York, NY 10004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Salomon Occupation Attorney Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 10/25/90	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Fidelity Investments 82 Devonshire Street Boston, MA 02109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/25/90	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code David McCutcheon 180 Locust Avenue Rye, NY 10580 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 10/25/90	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Lu Esther Hertz 9 Beacon Hill Road Port Washington, NY 11050 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 10/25/90	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Robert Spiegel 770 Lexington Avenue New York, NY Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 10/25/90	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Morris Krayer 30 Rockefeller Plaza 20th Floor New York, NY 10012 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 10/26/90	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Bruce Rabb 7 Hanover Square New York, NY 10004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 10/27/90	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9202003442

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE **2** OF **42**
FOR LINE NUMBER
11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Sharon Meadows 12 E. 49th Street New York, NY 10017 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer FIRST BOSTON Occupation Financial Services Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 10/29/90	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Graubard, Mollen, Horowitz 600 3rd Avenue New York, NY 10016 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/30/90	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Lawrence Davis 17 Dock Lane Port Washington, NY 11050 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/31/90	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Sandra Alworth 55 Water Street New York, NY 10041 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Citicorp Securities Occupation Financial Services Aggregate Year-to-Date > \$	Date (month, day, year) 11/1/90	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code Roberta Connolly 200 East 82nd Street New York, NY 10028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/1/90	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Herb Event One Tower Bridge, 11th Floor W. Conshohocken, PA 19428 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Miller Anderson, Sherrard Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11/1/90	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Miles Berger 180 N. La Salle Street Chicago, IL 60601 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hartman Financial Occupation Financial Services Aggregate Year-to-Date > \$	Date (month, day, year) 11/2/90	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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PAGE **3** OF **42**
FOR LINE NUMBER
11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code <u>Lord, Day + Lord Barrett Smith</u> <u>1675 Broadway</u> <u>New York, NY 10019</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/2/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>B. Full Name, Mailing Address and ZIP Code <u>Shepard Broad Trust</u> <u>2925 Aventura Boulevard #303</u> <u>N. Miami Beach, FL 33180</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/2/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>C. Full Name, Mailing Address and ZIP Code <u>Daniel Wassong</u> <u>565 Broadhollow Road</u> <u>Farmingdale, NY 11735</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Del Laboratories</u> Occupation</p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/2/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>D. Full Name, Mailing Address and ZIP Code <u>Emmanuel Sella</u> <u>767 Fifth Avenue</u> <u>New York, NY 10153</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Amivest Corporation</u> Occupation</p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/5/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>E. Full Name, Mailing Address and ZIP Code <u>Merrill Lynch Capital</u> <u>North Tower, World Financial Center</u> <u>New York, NY 10281</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) <u>11/6/90</u></p>	<p>Amount of Each Receipt this Period <u>\$5,000.00</u></p>
<p>F. Full Name, Mailing Address and ZIP Code <u>Peter Van Dyke</u> <u>100 East Pratt Street</u> <u>Baltimore, MD 21202</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>T. Rowe Price Associates</u> Occupation</p> <p>Aggregate Year-to-Date > \$ <u>200</u></p>	<p>Date (month, day, year) <u>11/6/90</u></p>	<p>Amount of Each Receipt this Period <u>\$200.00</u></p>
<p>G. Full Name, Mailing Address and ZIP Code <u>Napolean Brandford</u> <u>23 Windsor Avenue</u> <u>Kensington, CA 94707</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Griegsby + Company</u> Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/7/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER
11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

FRIENDS of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Morton Olshan 654 Madison Avenue New York, NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Janoff and Olshan Occupation Real Estate Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/7/90	Amount of Each Receipt this Period \$ 1000.00
B. Full Name, Mailing Address and ZIP Code Judith Peck 110 East 82nd Street New York, NY 10028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/7/90	Amount of Each Receipt this Period \$ 500.00
C. Full Name, Mailing Address and ZIP Code Patricia Titus 91 West Shore Trail Spata, NJ Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/7/90	Amount of Each Receipt this Period \$ 500.00
D. Full Name, Mailing Address and ZIP Code Morris Amitay 4712 Sunflower Road South Orange, NJ 07079 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/8/90	Amount of Each Receipt this Period \$ 1,000.00
E. Full Name, Mailing Address and ZIP Code Merlease Leasing Corporation World Financial Center, South Tower New York, NY 10281 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/8/90	Amount of Each Receipt this Period \$ 5,000.00
F. Full Name, Mailing Address and ZIP Code Alexander Anagnos 151 East 60th Street New York, NY 10022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer American Securities Corp. Occupation Financial Services Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/9/90	Amount of Each Receipt this Period \$ 1,000.00
G. Full Name, Mailing Address and ZIP Code Judith Davidson 148 Valley Forge Place Orangeburg, NY 10962 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/9/90	Amount of Each Receipt this Period \$ 1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9202003445

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 5 OF 42
FOR LINE NUMBER
11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of Liz HOLTZMAN

A. Full Name, Mailing Address and ZIP Code

Margaret Griesmer
174 Prescott Street
Reading, MA 01867

Name of Employer

Info. Requested

Date (month,
day, year)

11/9/90

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500

B. Full Name, Mailing Address and ZIP Code

Frederick Smith
784 Park Avenue
New York, NY 10021

Name of Employer

Info. Requested

Date (month,
day, year)

11/9/90

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000

C. Full Name, Mailing Address and ZIP Code

David Steinmann
1185 Park Avenue, #4H
New York, NY 10128

Name of Employer

Info. Requested

Date (month,
day, year)

11/9/90

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000

D. Full Name, Mailing Address and ZIP Code

Peter Soloyon
American Express Tower
New York, NY 10285

Name of Employer

Shearson, Lehman,
HuttonDate (month,
day, year)

11/10/90

Amount of Each
Receipt this Period

\$250.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Financial Services

Aggregate Year-to-Date > \$ 250

E. Full Name, Mailing Address and ZIP Code

Frances Katz
1010 Fifth Avenue
New York, NY 10028

Name of Employer

None

Date (month,
day, year)

11/11/90

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Not Employed

Aggregate Year-to-Date > \$ 1000

F. Full Name, Mailing Address and ZIP Code

James O'Keefe
16 South Road
Bronxville, NY 10708

Name of Employer

Info. Requested

Date (month,
day, year)

11/11/90

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500

G. Full Name, Mailing Address and ZIP Code

Neil Goldstein
70 Glenview Road
South Orange, NJ 07079

Name of Employer

Info. Requested

Date (month,
day, year)

11/12/90

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **6** OF **42**
FOR LINE NUMBER
11(a)(i)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Harold Groom 88 Albion Road Wellesley, MA 02181 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Merrill Lynch Occupation Financial Services Aggregate Year-to-Date > \$ 500.	Date (month, day, year) 11/12/90	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Charles Klein 112 East 95th Street New York, NY 10128 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation i Aggregate Year-to-Date > \$ 1000.	Date (month, day, year) 11/12/90	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Joseph Barnes 11 Park Avenue New York, NY 10016 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Barnes + Darby Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Eli Braha 2990 Norwood / Linden Boulevard Deal, NJ 07723 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code William Howell 100 Gold Street New York, NY 10292 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Prudential Bache Occupation Financial Services Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$ 1000.00
F. Full Name, Mailing Address and ZIP Code Margaret Howell 100 Gold Street New York, NY 10292 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer i Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$ 1,000.00
G. Full Name, Mailing Address and ZIP Code Joel Moser 100 Gold Street New York, NY 10292 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Prudential Bache Occupation Financial Services Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$ 1,000.00

SUBTOTAL of Receipts This Page (optional)

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SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **7** OF **42**
FOR LINE NUMBER
11(a)(i)

Contributions From Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Purcell Graham + Company 61 Broadway New York, NY 10006		11/13/90	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allen Counts 74 Trinity Place New York, NY 10006	Info. Requested	11/14/90	\$4000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Del Priore 1320 Liberty Avenue New York, NY 10006	Info. Requested	11/14/90	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Dennison 375 Park Avenue New York, NY 10152	Info Requested	11/14/90	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1000.	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Karl Fossum 501 East 87th Street #11B New York, NY 10128	Info. Requested	11/14/90	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1000.	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gates Taxi Corporation 30-17 40th Avenue Long Island City, NY 11101		11/14/90	\$125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Calvin Grigsby 1 World Trade Center #1535 New York, NY 10048		11/14/90	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$1000	

SUBTOTAL of Receipts This Page (optional)

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9202003448

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Contributions From Individuals / Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Gulf Taxi Corporation 30-17 40th Avenue Long Island City, NY 11101 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$125.00
B. Full Name, Mailing Address and ZIP Code Linden Maintenance Corporation 134-02 23rd Avenue Flushing, NY 11354 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Patricia Lipkin 1385 Avenue of the Americas New York, NY 10021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Howard Mackey 74 Trinity Place #1207 New York, NY 10006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Peter Mullen 919 Third Avenue New York, NY 10022 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Park Taxi Corporation 30-17 40th Avenue Long Island City, NY 11101 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$125.00
G. Full Name, Mailing Address and ZIP Code Jack Parker 104-70 Queens Boulevard Forest Hills, NY 11375 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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Contributions From Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Premium Taxi Corporation 30-17 40th Avenue Long Island City, NY 11101</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 11/14/90</p>	<p>Amount of Each Receipt this Period \$125.00</p>
<p>B. Full Name, Mailing Address and ZIP Code William Rosenwald 122 East 42nd Street New York, NY 10168</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/14/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Seward and Kissell 1 Battery Park Plaza New York, NY 10004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/14/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Steven Weiss One New York Plaza New York, NY 10004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Weiss Rod & Green Occupation Attorney Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 10/24/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

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92020034450

SCHEDULE A

ITEMIZED RECEIPTS

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Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code STANLEY THOMASHOW 5112 Second Avenue Brooklyn, NY 11232	Name of Employer Maaco Body Shop	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 1000	
B. Full Name, Mailing Address and ZIP Code Vivian Altman 1 World Trade Center, #1535 New York, NY 10048	Name of Employer Griegsby Banford & Powell	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Services	Aggregate Year-to-Date > \$ 1000	
C. Full Name, Mailing Address and ZIP Code Seymour Cohn 100 William Street New York, NY 10038	Name of Employer Sylvan Lawrence Co.	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate	Aggregate Year-to-Date > \$ 1000	
D. Full Name, Mailing Address and ZIP Code Blaine Fogg 919 Third Avenue New York, NY 10022	Name of Employer Skadden, Arps Slate	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500	
E. Full Name, Mailing Address and ZIP Code John Hobbs 466 Lexington Avenue New York, NY 10017	Name of Employer Scunison Assoc	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000	
F. Full Name, Mailing Address and ZIP Code Jeffrey Kinsell 93 La Espiral Orinda, CA 94563	Name of Employer	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500	
G. Full Name, Mailing Address and ZIP Code Landonne Corporation 24 West 60th Street New York, NY 10023	Name of Employer	Date (month, day, year) 11/15/90	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 > \$	

SUBTOTAL of Receipts This Page (optional)

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92020034451

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ITEMIZED RECEIPTS

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Contributions from Individuals / Persons

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NAME OF COMMITTEE (in Full)

FRIENDS of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Martin London 1285 Avenue of the Americas New York, NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Paul Weiss Rifkind Occupation Attorney Aggregate Year-to-Date > \$ 500.	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$ 500.00
B. Full Name, Mailing Address and ZIP Code Michael Haze 55 East 52nd Street New York, NY 10055 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer First Boston 55 East 52 St Occupation Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$ 500.00
C. Full Name, Mailing Address and ZIP Code Patrice Mitchell 74 Trinity Place New York, NY 10006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Pryor, Gouan, Counts & Co. Occupation Vice President Aggregate Year-to-Date > \$	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$ 1,000.00
D. Full Name, Mailing Address and ZIP Code Nab Construction Corporation 112-20 14th Avenue College Point, NY 11356 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$ 1,000.00
E. Full Name, Mailing Address and ZIP Code Daniel Rose 895 Park Avenue New York, NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Rose Associates Occupation Principal Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$ 1,000.00
F. Full Name, Mailing Address and ZIP Code Joanna Rose 895 Park Avenue New York, NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer None Occupation not employed Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$ 1,000.00
G. Full Name, Mailing Address and ZIP Code Bernard Schwartz 600 Third Avenue New York, NY 10021 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Loral Corporation Occupation CEO Aggregate Year-to-Date > \$	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$ 1,000.00

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92020034452

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of Liz HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Daniel Stoller 919 Third Avenue New York, NY 10022 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Skadden, Arps et. al. Occupation Attorney Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/15/90	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Daniel Brodsky 425 West 59th Street New York, NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Brodsky Organization Occupation Principal Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Adrien De Wind 1285 Avenue of the Americas New York, NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Paul Weiss et al. Occupation Attorney Aggregate Year-to-Date > \$ 200	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and ZIP Code Herman Fialkov Route 110 Farmingdale, NY 11735 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Poly Ventures Occupation executive Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Christ Gatzonis Electrical Contractors 23-24 Steinway Street Astoria, NY 11105 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$10,000.00
F. Full Name, Mailing Address and ZIP Code James Morgan Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$ 1000.00
G. Full Name, Mailing Address and ZIP Code Carole O'Blenes 131 East 93rd Street New York, NY 10028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Proskauer, Rose et. al. Occupation Attorney Aggregate Year-to-Date > \$	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$100.00

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SCHEDULE A

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Contributions from Individuals / Persons

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NAME OF COMMITTEE (in Full)

FRIENDS of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code
Samuel Ramirez
61 Broadway, #2924
New York, NY 10006

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Samuel A. Ramirez
& Co.

Occupation
Principal

Date (month,
day, year)

11/16/90

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1000.

B. Full Name, Mailing Address and ZIP Code
Nina Rosenwald
122 East 42nd Street
New York, NY 10017

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Info. Requested

Occupation

Date (month,
day, year)

11/16/90

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1000.

C. Full Name, Mailing Address and ZIP Code
Lewis Rudin
345 Park Avenue
New York, NY 10154

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Rudin Management
Co.

Occupation
Real Estate

Date (month,
day, year)

11/16/90

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1000

D. Full Name, Mailing Address and ZIP Code
Muriel Siebert
44 Madison Avenue
New York, NY 10022

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Muriel Siebert + Company

Occupation
Principal

Date (month,
day, year)

11/16/90

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1000

E. Full Name, Mailing Address and ZIP Code
David Washburn
1285 Avenue of the Americas
New York, NY 10019

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Paul Weiss Rifkind

Occupation
Attorney

Date (month,
day, year)

11/16/90

Amount of Each
Receipt this Period

\$250.00

Aggregate Year-to-Date > \$ 250

F. Full Name, Mailing Address and ZIP Code
Emily Young
100 Gold Street
New York, NY 10038

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Prudential Bache

Occupation
Financial Services

Date (month,
day, year)

11/16/90

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1000

G. Full Name, Mailing Address and ZIP Code
Christine Hillgendorff
PO Box 252, St Marks Lane
Islip, NY 11751

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer
Prudential Bache

Occupation
Financial Services

Date (month,
day, year)

11/17/90

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$

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SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Contributions from Individuals / Persons

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NAME OF COMMITTEE (in Full)

Friends of Liz HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Alan Wiegand 838 West End Avenue New York, NY 10025 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Prudential Bache Occupation Financial Services Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/18/90	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Mark Alcott 1285 Avenue of the Americas New York, NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Paul, Weiss, Rifkind Occupation Attorney Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code American Securities Corporation 80 Pine Street New York, NY 10005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$4,000.00
D. Full Name, Mailing Address and ZIP Code Richard Fisher 299 Park Avenue New York, NY 10171 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Fisher Brothers Occupation Real Estate Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Margaret Guarino 492 Henry Street, #5B Brooklyn, NY 11231 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info. Requested Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Andrew Heiskell Time-Life Building, #4345 New York, NY 10020 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Time, Inc. Occupation Chairman, Ret. Aggregate Year-to-Date > \$ 500	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Howard Hirsch 13 Leonard Drive Morganville, NJ 07751 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Info Requested Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$1,000.00

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92020034455

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ITEMIZED RECEIPTS

Use separate schedule(s)
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Walter Kicinski 1285 Avenue of the Americas New York, NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Paine Webber Occupation Financial Services Aggregate Year-to-Date > \$ 150	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$150.00
B. Full Name, Mailing Address and ZIP Code Emily Landau 299 Park Avenue New York, NY 10171 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Fisher Brothers Occupation Real Estate Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$ 1,000.00
C. Full Name, Mailing Address and ZIP Code Rick Lemmons 32710 West Barrett Drive Westlake Village, CA 91361 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Requested Occupation Aggregate Year-to-Date > \$ 250	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$ 250.00
D. Full Name, Mailing Address and ZIP Code Midwood Securities Inc. 11 Broadway New York, NY 10004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code G.L. Miller 55 East 52nd Street New York, NY 10055 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer First Boston Occupation Financial Services Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$ 1,000.00
F. Full Name, Mailing Address and ZIP Code P.G. Corbin + Company 1411 Walnut Street #1225 Philadelphia, PA 19103 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$ 2,000.00
G. Full Name, Mailing Address and ZIP Code Harry Pinson 1148-5th Avenue #10C New York, NY 10128 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Requested Occupation Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$1,000.00

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92020034456

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Friends of Liz HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code <u>Karen Purson</u> <u>1148 5th Avenue #10C</u> <u>New York, NY 10128</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Info. Requested</u></p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/19/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>B. Full Name, Mailing Address and ZIP Code <u>Arthur Schankler</u> <u>241 East 86th Street, #11A</u> <u>New York, NY 10128</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Info Requested</u></p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ <u>125</u></p>	<p>Date (month, day, year) <u>11/19/90</u></p>	<p>Amount of Each Receipt this Period <u>\$125.00</u></p>
<p>C. Full Name, Mailing Address and ZIP Code <u>William Schlichting</u> <u>1285 Avenue of the Americas</u> <u>New York, NY 10019</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Paine Webber</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date > \$ <u>100</u></p>	<p>Date (month, day, year) <u>11/19/90</u></p>	<p>Amount of Each Receipt this Period <u>\$100.00</u></p>
<p>D. Full Name, Mailing Address and ZIP Code <u>Robert Sheehan</u> <u>919 Third Avenue, 33rd Floor</u> <u>New York, NY 10022</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Skadden, Arps et al</u></p> <p>Occupation <u>Lawyer</u></p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/19/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>E. Full Name, Mailing Address and ZIP Code <u>Anthony Sirna</u> <u>784 Park Avenue</u> <u>New York, NY 10021</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Requested</u></p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/19/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>F. Full Name, Mailing Address and ZIP Code <u>WR Lazard, Laidlaw + Mead, Inc.</u> <u>14 Wall Street</u> <u>New York, NY 10005</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) <u>11/19/90</u></p>	<p>Amount of Each Receipt this Period <u>\$10,000.00</u></p>
<p>G. Full Name, Mailing Address and ZIP Code <u>Cora T. Walker</u> <u>270 Lenox Avenue</u> <u>New York, NY 10027</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Walker & Bailey</u></p> <p>Occupation <u>Lawyer</u></p> <p>Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/19/90</u></p>	<p>Amount of Each Receipt this Period <u>\$100.00</u></p>

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92020034457

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Robert Evan Ward 1285 Avenue of the Americas New York, NY 10019</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Paine Webber</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 500</p>	<p>Date (month, day, year) 11/19/90</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Wood, Williams, Rafalsky 11 Hanover Square New York, NY 10005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/19/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Aida Alvarez 405 51st Street New York, NY 10022</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Richard Bain American Express Tower New York, NY 10285</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Shearson, Lehman Hutton</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$ 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Antoinette Bain 78 Wilson Avenue Rowayton, CT 06853</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation not employed</p> <p>Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$ 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Berger + Steingut 600 Madison Avenue New York, NY 10022</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Law Firm</p> <p>Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$ 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Anthony Brian 110 Maiden Lane New York, NY 10005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer A.F. Brian + Company</p> <p>Occupation Trader</p> <p>Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>

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SCHEDULE A

ITEMIZED RECEIPTS

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Peter Brian 110 Maiden Lane New York, NY 10005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer A.F. Brian + Company Occupation Trader Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Hugh Carey 200 Park Avenue New York, NY 10166 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Whitman & Ransom Occupation Attorney Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Chase Manhattan Corporation 1 Chase Manhattan Plaza New York, NY 10081 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$2,000.00
D. Full Name, Mailing Address and ZIP Code Martin Edelman 299 Park Avenue New York, NY 10171 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Fisher Brothers Occupation Real Estate Aggregate Year-to-Date > \$ 1600	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$ 1,000.00
E. Full Name, Mailing Address and ZIP Code Kenneth Fisher 300 East 56th Street New York, NY 10171 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Fisher & Fisher Occupation Attorney Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$ 1,000.00
F. Full Name, Mailing Address and ZIP Code Elliott Kattan 290 Norwood/Linden Boulevard Deal, NJ 07723 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer K.B. Realty Occupation Real Estate Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Arthur Liman 1285 Avenue of the Americas New York, NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Paul Weiss Rifkind Occupation Attorney Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$1,000.00

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92020034459

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code
Mitchell, Titus + Company
2 Park Avenue
New York, NY 10016

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

11/20/90

\$3,000.00

Aggregate Year-to-Date > \$

B. Full Name, Mailing Address and ZIP Code
Shea and Gould
1251 Avenue of the Americas
New York, NY 10020

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

11/20/90

\$ 1,000.00

Aggregate Year-to-Date > \$ 1000

C. Full Name, Mailing Address and ZIP Code
Elizabeth Varet
45-50 Livingston Avenue
Riverdale, NY 10471

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

11/20/90

\$ 1,000.00

Aggregate Year-to-Date > \$ 1000

D. Full Name, Mailing Address and ZIP Code
Pearl Hack
110 East 59th Street
New York, NY 10022

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

11/26/90

\$250.00

Aggregate Year-to-Date > \$ 250.

E. Full Name, Mailing Address and ZIP Code
Ernest Rubenstein
1285 Avenue of the Americas
New York, NY 10019

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

11/26/90

\$100.00

Aggregate Year-to-Date > \$ 100

F. Full Name, Mailing Address and ZIP Code
Cambridge Investments, Ltd.
591 Redwood Highway #2275
Mill Valley, CA 94941

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

11/27/90

\$1,000.00

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code
Rego Stan Maintenance Corporation
45-16 Vernon Boulevard
Long Island City, NY 11101

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

11/27/90

\$250.00

Aggregate Year-to-Date > \$

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92020034460

SCHEDULE A

ITEMIZED RECEIPTS

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of Liz Holtzman

<p>A. Full Name, Mailing Address and ZIP Code <u>Rego Stan Maintenance Corporation</u> <u>45-16 Vernon Boulevard</u> <u>Long Island City, NY 11101</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) <u>11/27/90</u></p>	<p>Amount of Each Receipt this Period <u>\$250.00</u></p>
<p>B. Full Name, Mailing Address and ZIP Code <u>John Catsimatidis</u> <u>823 Eleventh Avenue</u> <u>New York, NY 10019</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Red Apple Group</u> Occupation <u>Chairman & CEO</u> Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) <u>11/28/90</u></p>	<p>Amount of Each Receipt this Period <u>\$2,000.00</u></p>
<p>C. Full Name, Mailing Address and ZIP Code <u>Margo Catsimatidis</u> <u>823 Eleventh Avenue</u> <u>New York, NY 10019</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$ <u>1000</u></p>	<p>Date (month, day, year) <u>11/28/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>D. Full Name, Mailing Address and ZIP Code <u>Grow-Kiewit - NAB</u> <u>71 West 23rd Street</u> <u>New York, NY 10010</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) <u>11/28/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>E. Full Name, Mailing Address and ZIP Code <u>Duqo Allegrretta</u> <u>458 Gregory Avenue</u> <u>Weehawken, NJ 07087</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u> Occupation <u>Financial Services</u> Aggregate Year-to-Date > \$ <u>100</u></p>	<p>Date (month, day, year) <u>12/15/90</u></p>	<p>Amount of Each Receipt this Period <u>\$100.00</u></p>
<p>F. Full Name, Mailing Address and ZIP Code <u>Gerard Baker</u> <u>657 Lakeside Drive</u> <u>Baldwin, NY 11510</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u> Occupation <u>Financial Services</u> Aggregate Year-to-Date > \$ <u>75</u></p>	<p>Date (month, day, year) <u>12/15/90</u></p>	<p>Amount of Each Receipt this Period <u>\$75.00</u></p>
<p>G. Full Name, Mailing Address and ZIP Code <u>Stanley Beckerman</u> <u>2 World Trade Center</u> <u>New York, NY 10048</u></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Shearson, Lehman</u> <u>Hotton</u> Occupation <u>Financial Services</u> Aggregate Year-to-Date > \$ <u>50</u></p>	<p>Date (month, day, year) <u>12/15/90</u></p>	<p>Amount of Each Receipt this Period <u>\$50.00</u></p>

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92020034461

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code James Bogorowski 831 Combene Lane Yardley, PA 19067 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code David Brooks 305-A Main Street Rosyln, NY 11576 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$75.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$75.00
C. Full Name, Mailing Address and ZIP Code John Calia 44 Saratoga Drive Manalapan, NJ 07726 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code William Cantelli Two World Trade Center New York, NY 10048 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Shearson, Lehman Hutton Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code Todd Carnevale 127 Christopher Street Montclair, NJ 07042 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code Stanley Cierniacki 633 Fairmont Avenue Westfield, NJ 07090 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$200.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$200.00
G. Full Name, Mailing Address and ZIP Code Peter Coleman Two World Trade Center New York, NY 10048 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Shearson, Lehman Hutton Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00

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SCHEDULE A

ITEMIZED RECEIPTS

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Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Alison Freiman American Express Tower New York, NY 10048</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 12/15/90</p>	<p>Amount of Each Receipt this Period \$ 50.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Michael Frey 56 Murray Hill Square New Providence, NJ 07974</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date (month, day, year) 12/15/90</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Edgar Geiger 385 Ocean Boulevard #5N Long Branch, NJ 07740</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 12/15/90</p>	<p>Amount of Each Receipt this Period \$ 50.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Priscilla Hancock 170 West 23rd Street, #5N New York, NY 10011</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/15/90</p>	<p>Amount of Each Receipt this Period \$ 75.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Stephen Hanley 280 Henderson Street, #16A Jersey City, NJ 07302</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 12/15/90</p>	<p>Amount of Each Receipt this Period \$ 50.00</p>
<p>F. Full Name, Mailing Address and ZIP Code D. Lee Hayes 480 Park Avenue New York, NY 10022</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 150.00</p>	<p>Date (month, day, year) 12/15/90</p>	<p>Amount of Each Receipt this Period \$ 150.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Timothy Hogan 18 Deepdale Drive Berkley Heights, NJ 07622</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date (month, day, year) 12/15/90</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92020034463

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER 11(a)(2)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of Liz Holtzman

A. Full Name, Mailing Address and ZIP Code Kathleen Larson 681 Kings Road Franklin Lakes, NJ 07417 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Maureen McCann 135 Bingham Avenue Rumson, NJ 07760 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$50.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code Diane McLaughlin 140 Garden Street Hoboken, NJ 07030 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$50.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and ZIP Code Francis Murphy 515 East 85th Street New York, NY 10028 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code Todd Norris 442 Hill Street Boonton, NJ 07005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code Michael O'Connor 8 Shoredate Drive Manhasset, NY 11030 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$50.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and ZIP Code Manuel Puella 2 World Trade Center New York, NY 10048 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Shearson Lehman Hutton Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

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92020034464

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER
11(a)(i)

Contributions From Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of Liz Holtzman

A. Full Name, Mailing Address and ZIP Code Michael Rubashkin 145 Mountain Avenue Summit, NJ 07901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$75.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$75.00
B. Full Name, Mailing Address and ZIP Code Frank Scaraggi 496 Park Street Upper Montclair, NJ 07043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$150.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$150.00
C. Full Name, Mailing Address and ZIP Code Jeffrey Schulsinger 2 Liberty Road Marlboro, NJ 07746 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code Richard Stack 90 Valley Road Glen Rock, NJ 07452 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code Joel Sternbach 227 Liberty Road Tappan, NJ 00983 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$75.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$75.00
F. Full Name, Mailing Address and ZIP Code Frank Vitiello 117 Ward Place South Orange, NJ 07079 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/15/90	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Joseph Filner 630 3rd Avenue New York, NY 10017 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer CPDI Occupation CPDI Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 12/17/90	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

9203465

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER 11(a)(i)

Contributions From Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Friends of Liz HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code <i>Richard Bellinger</i> <i>One Rapids Lane</i> <i>Greenwich, CT 06831</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>B. Full Name, Mailing Address and ZIP Code <i>Michael Brennan</i> <i>American Express Tower</i> <i>New York, NY 10285</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>C. Full Name, Mailing Address and ZIP Code <i>Raymond Carlson</i> <i>900 West End Avenue #2B</i> <i>New York, NY 10025</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>D. Full Name, Mailing Address and ZIP Code <i>James Collander</i> <i>24 Coleman Avenue West</i> <i>Chatham, NJ 07928</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>E. Full Name, Mailing Address and ZIP Code <i>Kathryn Engebretson</i> <i>1600 Market Street, #1330</i> <i>Philadelphia, PA 19103</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$250.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$250.00</i></p>
<p>F. Full Name, Mailing Address and ZIP Code <i>Gary Gray</i> <i>PO Box 156</i> <i>Lemont, PA 16851</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/26/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>G. Full Name, Mailing Address and ZIP Code <i>D. Lee Hayes</i> <i>480 Park Avenue</i> <i>New York, NY 10022</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>

SUBTOTAL of Receipts This Page (optional)

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9202034466

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals/Persons

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NAME OF COMMITTEE (in Full)

Friends of Liz HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code <i>Lewis Hodge 45 Lakewood Place Highland Park, IL 60035</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>B. Full Name, Mailing Address and ZIP Code <i>Moshe Karliner-Prager 230 Riverside Drive New York, NY 10025</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>INFORMATION REQUESTED</i></p> <p>Occupation</p> <p>Aggregate Year-to-Date <i>> \$25.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$25.00</i></p>
<p>C. Full Name, Mailing Address and ZIP Code <i>Richard Kolbo 15 Sycamore Station Decatur, GA 30030</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$250.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$250.00</i></p>
<p>D. Full Name, Mailing Address and ZIP Code <i>Andrew Lewinson 444 East 86th Street New York, NY 10028</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Lehman Brothers</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>E. Full Name, Mailing Address and ZIP Code <i>Reginald Lewis 9 West 57th Street, 48th Floor New York, NY 10019</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>T.L.C.B. Internat'l</i></p> <p>Occupation <i>Executive</i></p> <p>Aggregate Year-to-Date <i>> \$1,000.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$1,000.00</i></p>
<p>F. Full Name, Mailing Address and ZIP Code <i>Joseph Perticone 2 World Trade Center New York, NY 10048</i></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Shearson Lehman Hutton</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$500.00</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$500.00</i></p>
<p>G. Full Name, Mailing Address and ZIP Code <i>E. John Rosenwald 245 Park Avenue, 3rd Floor New York, NY 10017</i></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <i>Bear Stearns & Co.</i></p> <p>Occupation <i>Financial Services</i></p> <p>Aggregate Year-to-Date <i>> \$</i></p>	<p>Date (month, day, year) <i>12/20/90</i></p>	<p>Amount of Each Receipt this Period <i>\$10,000.00</i></p>

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92020034467

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER 11(a)(i)

Contributions from Individuals / Persons

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NAME OF COMMITTEE (in Full)

Friends of LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code <u>Mary Ann Rozsman</u> <u>7790 Landowne Drive</u> <u>Atlanta, GA 30360</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date <u>> \$1,000.00</u></p>	<p>Date (month, day, year) <u>12/20/90</u></p>	<p>Amount of Each Receipt this Period <u>\$1,000.00</u></p>
<p>B. Full Name, Mailing Address and ZIP Code <u>John Tillapaugh</u> <u>1623 Defcoors Walk NW</u> <u>Atlanta, GA 30318</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date <u>> \$250.00</u></p>	<p>Date (month, day, year) <u>12/20/90</u></p>	<p>Amount of Each Receipt this Period <u>\$250.00</u></p>
<p>C. Full Name, Mailing Address and ZIP Code <u>Everett Wrightsman</u> <u>1597 Sandpoint Drive</u> <u>Roswell, Ga 30075</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date <u>> \$500.00</u></p>	<p>Date (month, day, year) <u>12/20/90</u></p>	<p>Amount of Each Receipt this Period <u>\$500.00</u></p>
<p>D. Full Name, Mailing Address and ZIP Code <u>Sam Barsouny</u> <u>56 College Drive</u> <u>Jersey City, NJ</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date <u>> \$100.00</u></p>	<p>Date (month, day, year) <u>12/26/90</u></p>	<p>Amount of Each Receipt this Period <u>\$100.00</u></p>
<p>E. Full Name, Mailing Address and ZIP Code <u>Richard Bellinger</u> <u>One Rapids Lane</u> <u>Greenwich, CT 06831</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date <u>> \$100.00</u></p>	<p>Date (month, day, year) <u>12/26/90</u></p>	<p>Amount of Each Receipt this Period <u>\$100.00</u></p>
<p>F. Full Name, Mailing Address and ZIP Code <u>Michael Brennan</u> <u>American Express Tower</u> <u>New York, NY 10285</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Lehman Brothers</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date <u>> \$100.00</u></p>	<p>Date (month, day, year) <u>12/26/90</u></p>	<p>Amount of Each Receipt this Period <u>\$100.00</u></p>
<p>G. Full Name, Mailing Address and ZIP Code <u>Peter Brennan</u> <u>2 World Trade Center</u> <u>New York, NY 10048</u></p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer <u>Shearson Lehman Hutton</u></p> <p>Occupation <u>Financial Services</u></p> <p>Aggregate Year-to-Date <u>> \$75.00</u></p>	<p>Date (month, day, year) <u>12/26/90</u></p>	<p>Amount of Each Receipt this Period <u>\$75.00</u></p>

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92020034468

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 28 OF 42
FOR LINE NUMBER 11(g)(i)

CONTRIBUTIONS FROM INDIVIDUALS/PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Robert Brown 86 Ridge Acres Road Danan, CT 06820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$500.00	Date (month, day, year) 12/26/90	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Raymond Carlson 900 West End Avenue #28 New York, NY 10025 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$100.00	Date (month, day, year) 12/26/90	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code Christopher Cassell 50 West 90th Street New York, NY 10025 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$75.00	Date (month, day, year) 12/26/90	Amount of Each Receipt this Period \$75.00
D. Full Name, Mailing Address and ZIP Code James Collander 24 Coleman Avenue West Chatham, NJ 07928 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$150.00	Date (month, day, year) 12/26/90	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Matthew Dalton 600 W. Diversey, #1706 Chicago, IL 60614 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$75.00	Date (month, day, year) 12/26/90	Amount of Each Receipt this Period \$75.00
F. Full Name, Mailing Address and ZIP Code Philip DeNicola 3 Lexington Court Chatham, NJ 07928 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$75.00	Date (month, day, year) 12/26/90	Amount of Each Receipt this Period \$75.00
G. Full Name, Mailing Address and ZIP Code J. Patrick Dean 41 Cambridge Road Montclair, NJ 07042 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Lehman Brothers Occupation Financial Services Aggregate Year-to-Date > \$75.00	Date (month, day, year) 12/26/90	Amount of Each Receipt this Period \$75.00

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92020034469

SCHEDULE A

ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS/PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Mary Dinerman 9743 Sawyer Street Los Angeles, CA 90035</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$75.00</p>
<p>B. Full Name, Mailing Address and ZIP Code James Dolan Federated Investors Tower Pittsburgh, PA 15219</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Federated Investors</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$100.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Michael Fowler 7 Canterbury Lane Saint Davis, PA</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$100.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code John Garner 17482 Sherbrook Drive Tustin, CA 92680</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$75.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Robert Goss PO Box 82 Old Wick, NJ</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$75.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Patricia Greenfield Royce Hall Los Angeles, CA 90024</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer UCLA, Dept of Psychology</p> <p>Occupation Professor</p> <p>Aggregate Year-to-Date > \$100.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Kevin Haff 14 Cederhurst Avenue Pt Lookout, NY</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$75.00</p>

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ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS / PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Thomas Rossley 1325 North State Parkway #22F Chicago, IL 60610</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 50.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Brian Sheeran 20 Hoburg Place Montclair, NJ 07042</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 75.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Daniel Singer 115-4th Avenue #6B New York, NY 10003</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 75.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Jeffrey Susman 415 East 85th Street New York, NY 10028</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 50.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 50.00</p>
<p>E. Full Name, Mailing Address and ZIP Code John Wilson 24 Hanson Road Darien, CT 06820</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>F. Full Name, Mailing Address and ZIP Code First Albany Corporation 41 State Street, P.O. Box 52 Albany, NY 12201</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 1/2/91</p>	<p>Amount of Each Receipt this Period \$ 5,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Marvin Weisner 333 Beale Street San Francisco, CA 94101</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Post Office</p> <p>Occupation U.S. Mailman</p> <p>Aggregate Year-to-Date > \$ 25.00</p>	<p>Date (month, day, year) 1/2/91</p>	<p>Amount of Each Receipt this Period \$ 25.00</p>

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SCHEDULE A

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CONTRIBUTIONS FROM INDIVIDUALS/ PERSONS

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NAME OF COMMITTEE (in full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code John Laurino 11 Margaret Boulevard Merrick, NY 11566</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 75.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Andrew Levinson 444 East 86th Street New York, NY 10028</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Mark Douglas Marion 66 Clinton Place, #1A Hackensack, NJ 07601</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 75.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Therese Miller 310 A 22nd Street Union City, NJ 07087</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 75.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Nora Murphy 1601 Third Avenue, 31c West New York, NY 10128</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 75.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 75.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Joseph Perticone 2 World Trade Center New York, NY 10048</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Shearson Lehman Hutton</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code James Robinson 49 East 96th Street #7D New York, NY 10128</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Lehman Brothers</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 12/26/90</p>	<p>Amount of Each Receipt this Period \$ 500.00</p>

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CONTRIBUTIONS FROM INDIVIDUALS / PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Ultimate Service Station, Inc. 321 McGuinness Boulevard Brooklyn, NY 11222</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 1/4/91</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Edward Fitzpatrick 79 Leeward Road Darien, CT 06820</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Prudential Bache</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 1/7/91</p>	<p>Amount of Each Receipt this Period \$250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code James Gahan 25 South Drive Plandome, NY 11030</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Prudential Bache</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 1/7/91</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code L. B. Paton 8 East 96th Street, #12 B New York, NY 10128</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Prudential Bache</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 1/7/91</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code :</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer :</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code Katherine Bain 78 Wilson Avenue Rowayton, CT 06853</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer </p> <p>Occupation Student</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 1/16/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Thomas Schwarz 919 3rd Avenue New York, NY 10022</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Skadden Arps et. al.</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 1/16/91</p>	<p>Amount of Each Receipt this Period \$250.00</p>

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ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS/ PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code John Baldwin 55 East 52nd Street New York, NY 10055	Name of Employer First Boston	Date (month, day, year) 1/31/91	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Services	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Donald Carey 55 East 52nd Street New York, NY 10055	Name of Employer First Boston	Date (month, day, year) 1/31/91	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Services	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code DLJ Capital Corporation 140 Broadway New York, NY 10005	Name of Employer	Date (month, day, year) 1/31/91	Amount of Each Receipt this Period \$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code Donaldson, Lufkin, Jenrette, Inc. 140 Broadway New York, NY 10005	Name of Employer	Date (month, day, year) 1/31/91	Amount of Each Receipt this Period \$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code Michael Place 55 East 52nd Street New York, NY 10055	Name of Employer First Boston	Date (month, day, year) 1/31/91	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Services	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code Arthur Nicol 55 East 52nd Street New York, NY 10055	Name of Employer First Boston	Date (month, day, year) 1/31/91	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Financial Services	Aggregate Year-to-Date > \$ 1,000.00	

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ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS/PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Andrew O'Connell, Jr. 55 East 52nd Street New York, NY 10055</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer First Boston</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$1,000.00</p>	<p>Date (month, day, year) 1/31/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Rodman Patton 55 East 52nd Street New York, NY 10055</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer First Boston</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 1/31/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Edward Flynn 41 State Street Albany, NY 12208</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer First Albany Corporation</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 2/8/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Peter Barker 655 Hillside Terrace Pasadena, CA 91105</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Goldman, Sachs</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 2/11/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Kenneth Brady 85 Broad Street, 26th Floor New York, NY 10004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Goldman, Sachs</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 2/11/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code David Clapp 85 Broad Street, 26th Floor New York, NY 10004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Goldman, Sachs</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 2/11/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code John Corzine 25 Lenox Road Summit, NJ 07901</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Goldman, Sachs</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 2/11/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>

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Contributions From Individuals / Persons

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code

Eric Dobkin
85 Broad Street
New York, NY 10004

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Goldman, Sachs

Occupation

Financial Services

Aggregate Year-to-Date > \$1,000.00

Date (month,
day, year)

2/11/91

Amount of Each
Receipt this Period

\$1,000.00

B. Full Name, Mailing Address and ZIP Code

Alfred Carl Eckert
85 Broad Street, 26th Floor
New York, NY 10004

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Goldman, Sachs

Occupation

Financial Services

Aggregate Year-to-Date > \$1,000.00

Date (month,
day, year)

2/11/91

Amount of Each
Receipt this Period

\$1,000.00

C. Full Name, Mailing Address and ZIP Code

Peter Fahey
85 Broad Street
New York, NY 10004

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Goldman, Sachs

Occupation

Financial Services

Aggregate Year-to-Date > \$1,000.00

Date (month,
day, year)

2/11/91

Amount of Each
Receipt this Period

\$1,000.00

D. Full Name, Mailing Address and ZIP Code

Edward Fife
8-10 Fetter Lane
London EC4A 3DB

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Goldman, Sachs

Occupation

Financial Services

Aggregate Year-to-Date > \$1,000.00

Date (month,
day, year)

2/11/91

Amount of Each
Receipt this Period

\$1,000.00

E. Full Name, Mailing Address and ZIP Code

David George
85 Broad Street, 26th Floor
New York, NY 10004

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Goldman, Sachs

Occupation

Financial Services

Aggregate Year-to-Date > \$1,000.00

Date (month,
day, year)

2/11/91

Amount of Each
Receipt this Period

\$1,000.00

F. Full Name, Mailing Address and ZIP Code

Arthur Spector
85 Broad Street
New York, NY 10004

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Name of Employer

Goldman, Sachs

Occupation

Financial Services

Aggregate Year-to-Date > \$1,000.00

Date (month,
day, year)

2/11/91

Amount of Each
Receipt this Period

\$1,000.00

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > \$

Date (month,
day, year)

Amount of Each
Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

6
7
8
9
0
1
2
3
4
5

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE **36** OF **42**
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11(a)(i)

CONTRIBUTIONS FROM INDIVIDUALS/PERSONS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Lu Esther Mertz (Reattribution) 9 Beacon Hill Road Port Washington, NY 11050</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 10/25/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Lord, Day & Lord, Barrett, Smith 1675 Broadway (Reattribution) New York, NY 10019</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 11/2/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Morton Olshan (Reattribution) 654 Madison Avenue New York, NY 10021</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Jaroff + Olshan Occupation Real Estate</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 11/7/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Wood, Williams, Rafalsky (Reattribution) 11 Hanover Square New York, NY 10005</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 11/19/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Berger + Steingut (Reattribution) 600 Madison Avenue New York, NY 10022</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code Joseph Filner (Reattribution) 630 3rd Avenue New York, NY 10017</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer CPDI Occupation</p> <p>Aggregate Year-to-Date > \$2,000.00</p>	<p>Date (month, day, year) 12/17/90</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92020034477

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **37** OF **42**
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CONTRIBUTIONS FROM INDIVIDUALS/ PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Reginald Lewis (Reattribution) 9 West 57th Street New York, NY 10019 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Beatrice Occupation Executive Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 12/20/90	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Napolean Brandford (Reattribution) 23 Windsor Avenue Kensington, CA 94707 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Griegsby + Company Occupation Financial Services Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 11/7/90	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Frederick Smith (Reattribution) 784 Park Avenue New York, NY 10021 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 11/9/90	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code William Howell (Reattribution) 100 Gold Street New York, NY 10292 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Prudential Bache Occupation Financial Services Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Margaret Howell (Reattribution) 100 Gold Street New York, NY 10292 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Joel Maser (Reattribution) 100 Gold Street New York, NY 10292 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Prudential Bache Occupation Financial Services Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 11/13/90	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Katherine Bain 78 Wilson Avenue Rowayton, CT 06853 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Student Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 1/16/91	Amount of Each Receipt this Period \$1,000.00

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92020034478

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE **38** OF **42**
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Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Allen Counts (Reattribution) 74 Trinity Place Ny Ny 10006</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info. Requested</p> <p>Occupation 1</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/14/96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Dr. Karl Fossum (Reattribution) 501 East 87th # 11B Ny Ny 10128</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info. Requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/14/96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Calvin Grigsby (Reattribution) 1 World Trade Center #1535 Ny Ny 100 48</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Grigsby & Co.</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/14/96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Pamela Lipkiri (Reattribution) 1385 Ave. of Americas Ny Ny 10021</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Info Requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/14/96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Seymour Cohn (Reattribution) 100 William St. Ny Ny 10038</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sylvan Lawrence</p> <p>Occupation Real Estate</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/15/96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code John Hobbs (Reattribution) 466 Lexington Ave Ny Ny 10017</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Jennison Assoc</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/15/96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Patricia Mitchell (Reattribution) 74 Trinity Place Ny Ny 10006</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Pryor Govan Counts & Co</p> <p>Occupation V.P.</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/15/96</p>	<p>Amount of Each Receipt this Period 1000.00</p>

SUBTOTAL of Receipts This Page (optional)

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92020034479

SCHEDULE A

ITEMIZED RECEIPTS

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Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Daniel Rose (Reattribution) 895 Park Ave NY NY 10021</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Rox Associated</p> <p>Occupation Principal</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/15/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Joanna Rose (Reattribution) 895 Park Ave NY NY 10021</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer not employed</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/15/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code James Morgan (Reattribution) <Info. Requested></p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/16/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Richard Fisher (Reattribution) 299 Park Ave NY NY 10171</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Fisher Bros.</p> <p>Occupation Real Estate</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 11/19/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Emily Landau (Reattribution) 299 Park Ave NY NY 10171</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Fisher Bros.</p> <p>Occupation Real Estate</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/19/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code G.L. Miller (Reattribution) 55 E. 52 St. NY NY 10055</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer First Boston</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year) 11/19/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Cora T. Walker (Reattribution) 270 Lenox Ave. NY NY 10027</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Walker & Bailey</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/19/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>

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92020034480

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CONTRIBUTIONS FROM INDIVIDUALS/PERSONS

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code
Rodman Patton (Reattribution)
55 East 52nd Street
New York, NY 10055

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

FIRST BOSTON

Occupation

FINANCIAL SERVICES

Aggregate Year-to-Date **> \$2,000.00**

Date (month, day, year)

1/3/91

Amount of Each Receipt this Period

\$1,000.00

B. Full Name, Mailing Address and ZIP Code
Edward Flynn (Reattribution)
41 State Street
Albany, NY 12208

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

FIRST ALBANY CORPORATION

Occupation

FINANCIAL SERVICES

Aggregate Year-to-Date **> \$2,000.00**

Date (month, day, year)

2/8/91

Amount of Each Receipt this Period

\$1,000.00

C. Full Name, Mailing Address and ZIP Code
Peter Barker (Reattribution)
655 Hillside Terrace
Pasadena, CA 91105

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

GOLDMAN, SACHS

Occupation

FINANCIAL SERVICES

Aggregate Year-to-Date **> \$2,000.00**

Date (month, day, year)

2/11/91

Amount of Each Receipt this Period

\$1,000.00

D. Full Name, Mailing Address and ZIP Code
Kenneth Brady (Reattribution)
85 Broad Street, 26th Floor
New York, NY 10004

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

GOLDMAN, SACHS

Occupation

FINANCIAL SERVICES

Aggregate Year-to-Date **> \$2,000.00**

Date (month, day, year)

2/11/91

Amount of Each Receipt this Period

\$1,000.00

E. Full Name, Mailing Address and ZIP Code
David Clapp (Reattribution)
85 Broad Street
New York, NY 10004

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

GOLDMAN, SACHS

Occupation

FINANCIAL SERVICES

Aggregate Year-to-Date **> \$2,000.00**

Date (month, day, year)

2/11/91

Amount of Each Receipt this Period

\$1,000.00

F. Full Name, Mailing Address and ZIP Code
John Corzine (Reattribution)
25 Lenox Road
Summit, NJ 07901

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

GOLDMAN, SACHS

Occupation

FINANCIAL SERVICES

Aggregate Year-to-Date **> \$2,000.00**

Date (month, day, year)

2/11/91

Amount of Each Receipt this Period

\$1,000.00

G. Full Name, Mailing Address and ZIP Code
Erik Dobkin (Reattribution)
85 Broad Street
New York, NY 10004

Receipt For: ☐ Primary ☒ General
☐ Other (specify):

Name of Employer

GOLDMAN, SACHS

Occupation

FINANCIAL SERVICES

Aggregate Year-to-Date **> \$2,000.00**

Date (month, day, year)

2/11/91

Amount of Each Receipt this Period

\$1,000.00

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SCHEDULE A

ITEMIZED RECEIPTS

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Contributions from Individuals

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Richard Bain (Reattribution) American Exp. Tower NY NY 10285</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Shearson</p> <p>Occupation Financial Services</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Antoinette Bain (Reattribution) 78 Wilson Ave Roxbury, Ct. 06853</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Not Employed</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Martin Edelman (Reattribution) 299 Park Ave NY NY 10771</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Fisher Bros.</p> <p>Occupation Real Estate</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period 2000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Kenneth Fisher (Reattribution) 300 E. 56 St NY NY 10771</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Fisher & Fisher</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 1000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Shea & Gould (Reattribution) 1251 Ave. of Americas NY NY 10020</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Law Firm</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Margo Catsimachidis (Reattribution) 823 Eleventh Ave NY NY 10019</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Requested</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2000</p>	<p>Date (month, day, year) 11/28/90</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

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92020034482

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ITEMIZED RECEIPTS

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CONTRIBUTIONS FROM INDIVIDUALS / PERSONS

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NAME OF COMMITTEE (in full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Alfred Carl Eckert (Reattribution) 85 Broad Street, 26 th Floor New York, NY 10004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Goldman Sachs Occupation Financial Services Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 2/11/91	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Peter Fahey (Reattribution) 85 Broad Street New York, NY 10004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Goldman Sachs Occupation Financial Services Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 2/11/91	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Edward Fife (Reattribution) 8-10 Fetter Lane London EC4A 1DB Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Goldman Sachs Occupation Financial Services Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 2/11/91	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code David George (Reattribution) 85 Broad Street New York, NY 10004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Goldman Sachs Occupation Financial Services Aggregate Year-to-Date > \$	Date (month, day, year) 2/11/91	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Arthur Spector (Reattribution) 85 Broad Street New York, NY 10004 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Goldman Sachs Occupation Financial Services Aggregate Year-to-Date > \$ 2,000.00	Date (month, day, year) 2/11/91	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

3
4
3
4
3
0
0
2
9
2
0
0

SUBTOTAL of Receipts This Page (optional)

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170,625.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **4**
FOR LINE NUMBER **11c**

Contributions from Other Political Committees

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Fleet/Norstar PAC 56 East 42nd Street New York, NY 10017 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$4,000.00	Date (month, day, year) 11/14/90	Amount of Each Receipt this Period \$4,000.00
B. Full Name, Mailing Address and ZIP Code International Association of Firefighters PAC 225 Broadway New York, NY 10007 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$5,000.00
C. Full Name, Mailing Address and ZIP Code First Boston PAC 55 East 52nd Street New York, NY 10055 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$5,000.00
D. Full Name, Mailing Address and ZIP Code Morgan PAC 23 Wall Street New York, NY 10015 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/16/90	Amount of Each Receipt this Period \$5,000.00
E. Full Name, Mailing Address and ZIP Code Ernst and Young Committee for Good Government 277 Park Avenue New York, NY 10172 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$5,000.00
F. Full Name, Mailing Address and ZIP Code General Contractors Association PAC 60 East 42nd Street New York, NY 10165 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/19/90	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code ClipperShip Voluntary Political Fund 225 Franklin Street Boston, MA 02110 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 11/20/90	Amount of Each Receipt this Period \$2,000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

92020034484

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 2 OF 4
FOR LINE NUMBER 11C

Contributions from Other Political Committees

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

<p>A. Full Name, Mailing Address and ZIP Code Manufacturers Hanover Assn. for Responsible Government 270 Park Avenue New York, NY 10017</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 3,000.00</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$3,000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code PaineWebber Fund for Better Government 1285 Avenue of the Americas New York, NY 10019</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 11/20/90</p>	<p>Amount of Each Receipt this Period \$5,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code UFT Political Committee 260 Park Avenue South New York, NY 10010</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 12/12/90</p>	<p>Amount of Each Receipt this Period \$2,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Wertheim Schroeder & Co., PAC 787 Seventh Avenue New York, NY 10019</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date (month, day, year) 3/6/91</p>	<p>Amount of Each Receipt this Period \$1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Citicorp Voluntary Political Fund 1101 Pennsylvania Avenue, NW Washington, DC 20004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p>	<p>Date (month, day, year) 2/20/91</p>	<p>Amount of Each Receipt this Period \$5,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Action Fund of Shearson Lehman American Express Tower, WFC New York, NY 10285</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 4,500.00</p>	<p>Date (month, day, year) 1/16/91</p>	<p>Amount of Each Receipt this Period \$4,500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Action Fund of Shearson Lehman American Express Tower, WFC New York, NY 10285</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 4/10/91</p>	<p>Amount of Each Receipt this Period \$ 500.00</p>

SUBTOTAL of Receipts This Page (optional)

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92020034485

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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PAGE **3** OF **4**
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11C

Contributions from other Political Committees

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Dillon Read PAC 19 Rector Street New York, NY 10006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 1/24/91	Amount of Each Receipt this Period \$ 5,000.00
B. Full Name, Mailing Address and ZIP Code Goldman Sachs PAC 85 Broad Street New York, NY 10004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 2/11/91	Amount of Each Receipt this Period \$ 5,000.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

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TOTAL This Period (last page this line number only)

92020034406

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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FOR LINE NUMBER 11C

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code MorganPAC (Reattribution) 23 Wall Street New York, NY 10015 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10,000.00	Date (month, day, year) Amount of Each Receipt this Period \$ 5,000.00
B. Full Name, Mailing Address and ZIP Code Ernst + Young Committee for Good Government (Reattribution) 277 Park Avenue New York, NY 10172 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 7,000.00	Date (month, day, year) Amount of Each Receipt this Period \$ 2,000.00
C. Full Name, Mailing Address and ZIP Code PaineWebber Fund for Better Government 1285 Avenue of the Americas (Reattribution) New York, NY 10019 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 8,000.00	Date (month, day, year) Amount of Each Receipt this Period \$ 3,000.00
D. Full Name, Mailing Address and ZIP Code Action Fund of Shearson Lehman American Express Tower (Reattribution) New York, NY 10285 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000.00	Date (month, day, year) Amount of Each Receipt this Period \$ 1,500.00
E. Full Name, Mailing Address and ZIP Code Dillon Read PAC (Reattribution) 19 Rector Street New York, NY 10006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10,000.00	Date (month, day, year) Amount of Each Receipt this Period \$ 5,000.00
F. Full Name, Mailing Address and ZIP Code Goldman Sachs PAC (Reattribution) 85 Broad Street New York, NY 10004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10,000.00	Date (month, day, year) Amount of Each Receipt this Period \$ 5,000.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) Amount of Each Receipt this Period

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79,500.00

92020034487

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Sheila Levin 275 Central Park West, #2B New York NY 10024	Purpose of Disbursement Consulting Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/25/91	Amount of Each Disbursement This Period \$5207.33
B. Full Name, Mailing Address and ZIP Code Lord, Day, Lord, Barrett, Smith 1675 Broadway New York NY 10019	Purpose of Disbursement Reimbursed Meals Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/25/91	Amount of Each Disbursement This Period \$72.53
C. Full Name, Mailing Address and ZIP Code Malchow & Company 1611 Connecticut Ave, NW Washington DC 20009	Purpose of Disbursement Direct Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/3/91	Amount of Each Disbursement This Period \$8,955.98
D. Full Name, Mailing Address and ZIP Code Giske/Turet 95 Horatio Street #333 New York, NY 10014	Purpose of Disbursement Consulting Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/3/91	Amount of Each Disbursement This Period \$4,750.00
E. Full Name, Mailing Address and ZIP Code Marion Savory 129-51 134th St South Ozone Park, NY 11420	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/11/91	Amount of Each Disbursement This Period \$412.69
F. Full Name, Mailing Address and ZIP Code Rachel Jeck 155 West 81 St, #3F New York NY 10024	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/11/91	Amount of Each Disbursement This Period \$1,010.72
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code Malchow & Company 1611 Connecticut Ave, NW Washington DC 20009	Purpose of Disbursement Direct Mail Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/3/91	Amount of Each Disbursement This Period \$5,027.15
I. Full Name, Mailing Address and ZIP Code Federal Express 2650 Thousand Oaks Blvd #4400 Memphis, TN 38118	Purpose of Disbursement Security Deposit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/3/91	Amount of Each Disbursement This Period \$250.00

SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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PAGE 2 OF 5
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Jacqui Samuels 949 West End Avenue New York NY 10025	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$138.52
B. Full Name, Mailing Address and ZIP Code Jacqui Samuels 949 West End Avenue New York NY 10025	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$1,078.34
C. Full Name, Mailing Address and ZIP Code Giske/Toret 95 Horatio Street NY, NY 10014	Purpose of Disbursement Consulting Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$4,750.00
D. Full Name, Mailing Address and ZIP Code Malchow & Company 1611 Connecticut Ave, NW Washington DC 20009	Purpose of Disbursement Direct Mail Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$5,008.00
E. Full Name, Mailing Address and ZIP Code Sandra Guzman 445 West 23 St, #5F New York, NY 10023	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/26/91	Amount of Each Disbursement This Period \$318.00
F. Full Name, Mailing Address and ZIP Code Tina Stoll 4228 Arton Place, NW Washington DC 20016	Purpose of Disbursement Consulting Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/26/91	Amount of Each Disbursement This Period \$685.78
G. Full Name, Mailing Address and ZIP Code Norstar Bank 100 Church St New York, NY 10019	Purpose of Disbursement Payroll Withholding Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$1101.55
H. Full Name, Mailing Address and ZIP Code NYS Income Tax Processing Unit, Box 1970 Albany NY 12201-1970	Purpose of Disbursement NYS Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$279.81
I. Full Name, Mailing Address and ZIP Code Airline Stationery 284 Madison Ave New York NY 10017	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/5/91	Amount of Each Disbursement This Period \$90.30

SUBTOTAL of Disbursements This Page (optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Operating Expenditures

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code <i>Giske / Turet</i> <i>95 Horatio St. #333</i> <i>NY NY 10014</i>	Purpose of Disbursement <i>Consulting Fees</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/5/91</i>	Amount of Each Disbursement This Period <i>\$4750.00</i>
B. Full Name, Mailing Address and ZIP Code <i>Cadman Travel</i> <i>100 Pineapple Street</i> <i>Brooklyn NY 11201</i>	Purpose of Disbursement <i>Travel</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/20/91</i>	Amount of Each Disbursement This Period <i>\$82.00</i>
C. Full Name, Mailing Address and ZIP Code <i>Elizabeth Holtzman</i> <i>180 Bergen Street</i> <i>Brooklyn NY 11217</i>	Purpose of Disbursement <i>Reimbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/20/91</i>	Amount of Each Disbursement This Period <i>\$43.90</i>
D. Full Name, Mailing Address and ZIP Code <i>Leslie Cohn</i> <i>30 Wingate Drive</i> <i>Livingston, NJ 07039</i>	Purpose of Disbursement <i>Reimbursed Travel</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/20/91</i>	Amount of Each Disbursement This Period <i>\$351.30</i>
E. Full Name, Mailing Address and ZIP Code <i>Sheila Levin</i> <i>275 Central Park West</i> <i>New York, NY 10024</i>	Purpose of Disbursement <i>Reimbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/25/91</i>	Amount of Each Disbursement This Period <i>\$518.07</i>
F. Full Name, Mailing Address and ZIP Code <i>Darcy Bradbury</i> <i>1 Irving Place, #69</i> <i>New York NY 10003</i>	Purpose of Disbursement <i>Reimbursement</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/25/91</i>	Amount of Each Disbursement This Period <i>\$59.03</i>
G. Full Name, Mailing Address and ZIP Code <i>Michelle Carberry</i> <i>129-51 134 Street</i> <i>South Ozone Park NY 11420</i>	Purpose of Disbursement <i>Salary</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/25/91</i>	Amount of Each Disbursement This Period <i>\$112.24</i>
H. Full Name, Mailing Address and ZIP Code <i>Marion Savory</i> <i>629-51 134 St</i> <i>South Ozone Park NY 11420</i>	Purpose of Disbursement <i>Salary</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/25/91</i>	Amount of Each Disbursement This Period <i>\$949.18</i>
I. Full Name, Mailing Address and ZIP Code <i>Rachel Teck</i> <i>155 East 81 St. #3F</i> <i>NY NY 10024</i>	Purpose of Disbursement <i>Salary</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) <i>6/25/91</i>	Amount of Each Disbursement This Period <i>\$1401.21</i>

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5
FOR LINE NUMBER 17

Operating Expenses

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Elizabeth Holtzman 180 Bergen Street Brooklyn NY 11217	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/16/91	Amount of Each Disbursement This Period \$14.00
B. Full Name, Mailing Address and ZIP Code Cadman Travel 100 Pineapple St Brooklyn NY 11201	Purpose of Disbursement Air Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/16/91	Amount of Each Disbursement This Period \$142.00
C. Full Name, Mailing Address and ZIP Code Giske/Turet 95 Horatio Street #333 New York NY 10014	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/7/91	Amount of Each Disbursement This Period \$160.00
D. Full Name, Mailing Address and ZIP Code Rachel Jeck 155 West 81 St #3I New York NY 10024	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/18/91	Amount of Each Disbursement This Period \$229.50
E. Full Name, Mailing Address and ZIP Code Pam Elam 422 Second St #3 Brooklyn, NY 11215	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/18/91	Amount of Each Disbursement This Period \$222.37
F. Full Name, Mailing Address and ZIP Code Cadman Travel 100 Pineapple St Brooklyn NY 11201	Purpose of Disbursement Air Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/18/91	Amount of Each Disbursement This Period \$396.00
G. Full Name, Mailing Address and ZIP Code Elizabeth Holtzman 180 Bergen Street Brooklyn NY 11217	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/18/91	Amount of Each Disbursement This Period \$480.66
H. Full Name, Mailing Address and ZIP Code Marion Savory 129-51 134 Street South Ozone Park, NJ 11420	Purpose of Disbursement Payroll - Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$825.38
I. Full Name, Mailing Address and ZIP Code Rachel Jeck 155 West 81 St, #3I New York NY 10024	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$1,010.72

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Michelle Carberry 129-51 134 Street South Ozone Park, NY 11420	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/18/91	Amount of Each Disbursement This Period \$160.26
B. Full Name, Mailing Address and ZIP Code NYS Unemployment One Main St, Room 704 Brooklyn NY 11201	Purpose of Disbursement Unemployment Insurance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/18/91	Amount of Each Disbursement This Period \$141.28
C. Full Name, Mailing Address and ZIP Code Sheila Levin 275 Central Park West #2B NY, NY 10024	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/18/91	Amount of Each Disbursement This Period \$916.15
D. Full Name, Mailing Address and ZIP Code OSB Business Service 373 Broadway #C4 New York NY 10013	Purpose of Disbursement Bookkeeping Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/7/91	Amount of Each Disbursement This Period \$639.20
E. Full Name, Mailing Address and ZIP Code Sheila Levin 275 Central Park West New York NY 10024	Purpose of Disbursement Consulting Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$10,414.60
F. Full Name, Mailing Address and ZIP Code Birn's Telecommunications 233 West 17 Street New York NY 10011	Purpose of Disbursement Telephone Deposit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/23/91	Amount of Each Disbursement This Period \$437.50
G. Full Name, Mailing Address and ZIP Code Rachel Jeck 155 West 81 St, #3E New York, NY 10024	Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/26/91	Amount of Each Disbursement This Period \$1,010.72
H. Full Name, Mailing Address and ZIP Code David's Office Equipment 327 Canal St New York NY 10013	Purpose of Disbursement Furniture Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/91	Amount of Each Disbursement This Period \$1,498.43
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

66,102.40

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 18

TRANSFERS

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NAME OF COMMITTEE (In Full)

FRIENDS OF LIZ HOLTZMAN

A. Full Name, Mailing Address and ZIP Code Liz Holtzman for Senate 99 Hudson St., 4th Floor Ny Ny 10013	Purpose of Disbursement Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/13/91	Amount of Each Disbursement This Period 95,612.82
B. Full Name, Mailing Address and ZIP Code Liz Holtzman for Senate 99 Hudson St., 4th Floor Ny Ny 10013	Purpose of Disbursement Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/27/91	Amount of Each Disbursement This Period 95,612.82
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

191,225.64

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER _____
(Use separate schedules
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
FRIENDS OF LIZ HOLTZMAN				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor FRIENDS OF LIZ HOLTZMAN 99 Hudson St. NY NY 10013 (creditor)	—	7,203.04	—	7,203.04
Nature of Debt (Purpose): Reversal of Transfer				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				
2) TOTAL This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

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9 Hudson St.
NY, NY 10013

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