

SCHEDULE A

ITEMIZED RECEIPTS

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

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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

9
2
0
2
0
0
3
4
4
4
9

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

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)