

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full): WELD FOR SENATE, INC. FEC ID# C00309583

96020082508

A. Full Name, Mailing Address and ZIP Code Mr. Douglas D. Abbey 3020 Pacific Ave San Francisco CA 94115		Name of Employer AMB	Date: 03-12-96	Amount of Each: 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Real Estate	Aggregate Year-to-Date > 250.00	
B. Full Name, Mailing Address and ZIP Code Mr. Christopher C. Abbott 1 Proctor Street Manchester MA 01944-1447		Name of Employer Putnam Investments	Date: 01-30-96	Amount of Each: 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Money Management	Aggregate Year-to-Date > 500.00	
C. Full Name, Mailing Address and ZIP Code Mr. John E. Abele 101 Fairhaven Hill Concord MA 01742		Name of Employer Boston Scientific Corp.	Date: 03-27-96	Amount of Each: 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Business	Aggregate Year-to-Date > 1000.00	
D. Full Name, Mailing Address and ZIP Code Mr. Richard Bruce Miller Abrams 300 Kent Street Brookline MA 02146		Name of Employer self-employed	Date: 03-13-96	Amount of Each: 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > 500.00	
E. Full Name, Mailing Address and ZIP Code Dr. David H. Abramson 101 Central Park West New York NY 10023		Name of Employer Self	Date: 01-11-96	Amount of Each: 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Physician	Aggregate Year-to-Date > 2000.00	
F. Full Name, Mailing Address and ZIP Code Dr. David H. Abramson 101 Central Park West New York NY 10023		Name of Employer Self	Date: 02-22-96	Amount of Each: 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Physician	Aggregate Year-to-Date > 2000.00	
G. Full Name, Mailing Address and ZIP Code Mr. Edward M. Abramson 750 Park Avenue New York NY 10021		Name of Employer Herrick Feinstein	Date: 01-31-96	Amount of Each: 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-to-Date > 1000.00	
SUBTOTAL of Receipts This Page (optional)>				\$5250.00
TOTAL This Period (last page this line number only)>			