

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)(1)

Contributions from Individuals/Persons Other than 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 WEINER C00327742**

A. Full Name, Mailing Address and ZIP Code Albert Tortora 100 Neptune Avenue Brooklyn NY 11235	Name of Employer Empire Coach Occupation President	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate Year-to-Date > \$1,000.00		
A. Full Name, Mailing Address and ZIP Code Albert Erani 1000 Huyler Street Teterborough NJ 07608	Name of Employer A & E Stores Occupation Owner	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate Year-to-Date > \$1,000.00		
A. Full Name, Mailing Address and ZIP Code Sidney Gohelf 1341 East 22nd Street Brooklyn NY 11210	Name of Employer Occupation Professional Volunteer	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate Year-to-Date > \$50.00		
A. Full Name, Mailing Address and ZIP Code Robert Thomson 84-17 85th Drive Woodhaven NY 11421	Name of Employer Occupation Retired	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period \$30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate Year-to-Date > \$30.00		
A. Full Name, Mailing Address and ZIP Code Gail Bendheim 1 Parker Plaza Foxe Lee NJ 07024	Name of Employer Jewish Board of Family Services Occupation Child Psychologist	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate Year-to-Date > \$1,000.00		
A. Full Name, Mailing Address and ZIP Code Barbara Weiss 74 Cove Road Oyster Bay NY 11771	Name of Employer Occupation Homemaker	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period \$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$2,000.00		
A. Full Name, Mailing Address and ZIP Code Robert Bookman 325 Broadway, Suite 501 New York NY 10007	Name of Employer Pesetsky & Bookman Occupation Attorney	Date (month, day, year) 12/09/1999	Amount of Each Receipt this Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate Year-to-Date > \$500.00		

SUBTOTAL of Receipts This Page (optional) > \$5,580.00

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