

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
 Next Generation

A. Full Name, Mailing Address and Zip Code Matthew Guld 650 Fifth Avenue New York, NY 10019	Name of Employer Whole Securities	Date (Month day, Year) 11/12/97	Amount of Each Receipt this Period 1,000.00
	Occupation Investments		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
B. Full Name, Mailing Address and Zip Code Ronald J. Kramer 829 Park Avenue New York, NY 10021	Name of Employer	Date (Month day, Year) 11/12/97	Amount of Each Receipt this Period 1,000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
C. Full Name, Mailing Address and Zip Code Philip E. Berney 245 Park Avenue New York, NY 10167	Name of Employer Bear Stearns	Date (Month day, Year) 12/16/97	Amount of Each Receipt this Period 1,000.00
	Occupation Sr. Managing Dir.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
D. Full Name, Mailing Address and Zip Code Brad Coleman 7 World Trade Center New York, NY 10048	Name of Employer Salomon Brothers	Date (Month day, Year) 12/29/97	Amount of Each Receipt this Period 1,000.00
	Occupation Managing Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 1,000.00		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	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
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	4,000.00
TOTAL this Period (Last page this line number only).....>	20,000.00