SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (In Full): EMILY's List

C00193433

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Fairbanks, Maslin, Maullin & Associates 2425 Colorado Ave., Suite 180 Santa Monica, CA 90404	Polling Surveys 24E	12/19/97 (P)	15,000.00	Lois Capps For Congress CA-22 H8CA22089 ☒ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures $15,000.00

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $

(c) TOTAL Independent Expenditures ..... $ 15,000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature

1-30-98
Date

Subscribed and sworn to before me this 30th day of January, 1998

My Commission expires: July 31, 2002

Renee D. Carroll
NOTARY PUBLIC

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