REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)
Human Rights Campaign
1101 14th Street, NW Suite 200

ADDRESS (number and street) — Check if different than previously reported

Washington, DC 20005

CITY, STATE and ZIP CODE

2. FEC IDENTIFICATION NUMBER
C00235853

3. This committee qualified as a multicandidate cmte DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) — April 15 Quarterly Report

— July 15 Quarterly Report

October 15 Quarterly Report

— January 31 Year End Report

— July 31 Mid Year Report (Non-Election Year Only)

— Termination Report

Monthly Report Due On:

— February 20	— June 20	— October 20
— March 20	— July 20	— November 20
— April 20	— August 20	— December 20
— May 20	— September 20	— January 31

— Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

X Thirtieth day report following the General Election on 11/5/96 in the State of DC

(b) Is this Report an Amendment? X YES — NO

SUMMARY

5. Covering Period 10/17/96 through 11/25/96

		COLUMN A This Period	COLUMN B Calendar Year-To-Date
6.	(a) Cash on Hand January 1, 1996		$ 84,120.88
	(b) Cash on Hand at Beginning of Reporting Period	$ 66,857.26	
	(c) Total Receipts (from Line 19)	$ 78,163.04	$ 734,428.59
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 145,020.30	$ 818,549.47
7.	Total Disbursements (from Line 30)	$ 121,801.39	$ 795,330.56
8.	Cash on Hand at Close of Period (subtract Line 7 from 6(d))	$ 23,218.91	$ 23,218.91
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and /or Schedule D)	$ 0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

For more info contact:
Federal Election Comm
999 E. Street, NW
Washington DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Elizabeth Birch

Signature of Treasurer

Date 4/25/97

NOTE: Submission of false, erroneous, or incomplete info may subject the person signing to penalties of 2 U.S.C. 437g.

FEC FORM 3X