REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): Friends of Lois Capps

ADDRESS (number and street) ☐ Check if different than previously reported.
P.O. Box 23940

CITY, STATE and ZIP CODE: Santa Barbara, CA 93121
STATE/DISTRICT: CA-22

2. FEC IDENTIFICATION NUMBER: C00331389

3. IS THIS REPORT AN AMENDMENT? ☐ YES ☒ NO

4. TYPE OF REPORT

☐ 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)

☒ 12-Day Pre-Election Report for the General Election (Type of Election) election on Nov. 3rd in the State of California
☐ 30-Day Post-Election Report for the _____ (Type of Election) election on _____ in the State of _____
☐ Termination Report

This report contains activity for: ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period Oct. 1 through Oct.14

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	$ 130,351.00	$ 1,813,869.36
(b) Total Contribution Refunds (from Line 20(d))	$ 0.00	$ 1,608.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	$ 130,351.00	$ 1,812,261.36
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	$ 159,498.65	$ 1,718,761.94
(b) Total Offsets to Operating Expenditures (from Line 14)	$ 10.78	$ 3,394.68
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	$ 159,487.87	$ 1,715,367.26
8. Cash on Hand at Close of Reporting Period (from Line 27)	$ 292,993.52	
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 further information contact:
Federal Election Commission
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: DAVID POWDRELL

Signature of Treasurer: [signature]

Date: 10/21/98

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

FEC FORM 3
(revised 4/87)

FE6AN088