

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION COMMISSION
JUL 20 5 34 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. C00264101 060498
ROBERT J HERRERA
RECERRA FOR CONGRESS
P O BOX 26878
LOS ANGELES CA 90026

2. FEC IDENTIFICATION NUMBER

3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- July 15 Quarterly Report
- October 15 Quarterly Report 30-Day Post-Election Report following the General Election
on _____ in the State of _____
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only) Termination Report


This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A	COLUMN B
5-14-98 through 6-30-98	This Period	Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$ 14,600.00	\$ 118,968.40
(b) Total Contribution Refunds (from Line 20(d))	-0-	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$ 14,600.00	\$ 118,468.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$ 11,354.31	\$ 53,355.03
(b) Total Offsets to Operating Expenditures (from Line 14)	\$ 270.00	\$ 540.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$ 11,084.31	\$ 52,815.03
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$ 266,868.71	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	

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
Robert J. Herrera

Signature of Treasurer  Date
7-15-98

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
Becerra for Congress	From:	To:
	5-14-98	6-30-98
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) _____	2750.00	
(ii) Unitemized _____	500.00	
(iii) Total of contributions from individuals _____	3250.00	36300.00
(b) Political Party Committees _____	-0-	-0-
(c) Other Political Committees (such as PACs) _____	11350.00	82668.40
(d) The Candidate _____	-0-	-0-
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) _____	14600.00	118968.40
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES _____	-0-	-0-
13. LOANS:		
(a) Made or Guaranteed by the Candidate _____	-0-	-0-
(b) All Other Loans _____	-0-	-0-
(c) TOTAL LOANS (add 13(a) and (b)) _____	-0-	-0-
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) _____	270.00	540.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) _____	1440.31	2173.11
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) _____	16310.31	121681.51
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES _____	11354.31	53355.03
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES _____	-0-	-0-
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate _____	-0-	-0-
(b) Of All Other Loans _____	-0-	-0-
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) _____	-0-	-0-
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees _____	-0-	500.00
(b) Political Party Committees _____	-0-	-0-
(c) Other Political Committees (such as PACs) _____	-0-	-0-
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) _____	-0-	500.00
21. OTHER DISBURSEMENTS _____	5100.00	10800.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) _____	16454.31	64655.03
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD _____	\$ 267,012.71	
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) _____	\$ 16,310.31	
25. SUBTOTAL (add Line 23 and Line 24) _____	\$ 283,323.02	
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) _____	\$ 16,454.31	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) _____	\$ 266,868.71	

SCHEDULE A

ITEMIZED RECEIPTS

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)
Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code David H. Miller 4600 Tapestry Drive Fairfax, VA 22032	Name of Employer Federal Legislative Associates	Date (month, day, year) 5-20-98	Amount of Each Receipt this Period 500.00
	Occupation Lobbyist	Aggregate Year-To-Date > \$ 500.00	
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Claudia M. James 1101 G Street, NW #900 East Washington, DC 20001	Name of Employer Podesta & Associates	Date (month, day, year) 5-27-98	Amount of Each Receipt this Period 500.00
	Occupation Lawyer	Aggregate Year-To-Date > \$ 1000.00	
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Mc Mahon & Associates Joseph Mc Mahon 1924 N Street, NW Washington, DC 20036	Name of Employer Sole Proprietor	Date (month, day, year) 5-27-98	Amount of Each Receipt this Period 250.00
	Occupation Attorney	Aggregate Year-To-Date > \$ 250.00	
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Robert P. Will 1825 Eye Street, NW #920 Washington, DC 20006	Name of Employer Will & Mays	Date (month, day, year) 5-27-98	Amount of Each Receipt this Period 500.00
	Occupation Attorney	Aggregate Year-To-Date > \$ 500.00	
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Terri Davis 703 Kings Court Alexandria, VA 22302	Name of Employer Not Employed	Date (month, day, year) 6-01-98	Amount of Each Receipt this Period 500.00
	Occupation Home Maker	Aggregate Year-To-Date > \$ 500.00	
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Santos Diaz 1608 Ponce de Leon Ave., #500 Santurce, PR 00909	Name of Employer DRC Computers	Date (month, day, year) 6-01-98	Amount of Each Receipt this Period 500.00
	Occupation President	Aggregate Year-To-Date > \$ 500.00	
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-To-Date > \$	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	2750.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Education Assn. PAC 1201 16th Street, NW Washington, DC 20036		5-18-98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \geq \$ 500.00	
B. Full Name, Mailing Address and ZIP Code National Air Traffic Controllers Assn. PAC 1150 16th St., NW Suite 701 Washington, DC 20036		5-18-98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \geq \$ 500.00	
C. Full Name, Mailing Address and ZIP Code Bristol-Myers Squibb Company Employee PAC 345 Park Avenue New York, NY 10154		5-20-98	100.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \geq \$ 100.00	
D. Full Name, Mailing Address and ZIP Code Bell South FBD PAC 1155 Peachtree St., NE Atlanta, GA 30367		5-20-98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \geq \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Transamerica PAC 500 Montgomery Street San Francisco, CA 94111		5-20-98	1000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \geq \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Brown & Williamson Tobacco Employee PAC P.O. Box 35090 Louisville, KY 40232		5-20-98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \geq \$ 500.00	
G. Full Name, Mailing Address and ZIP Code IBEW COPE 1125 15th Street, NW Washington, DC 20005		5-27-98	3000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \geq \$ 5000.00	

SUBTOTAL of Receipts This Page (optional)	6100.00
TOTAL This Period (last page this line number only)	

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code Realtors PAC 430 N. Michigan Ave. Chicago, IL 60611 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6-01-98	
Aggregate Year-To-Date > \$		1000.00	
B. Full Name, Mailing Address and ZIP Code American Nurse Assn. PAC 600 Maryland Ave., SW #100 Washington, DC 20024 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6-01-98	
Aggregate Year-To-Date > \$		2000.00	
C. Full Name, Mailing Address and ZIP Code NARFE PAC 1533 New Hampshire Ave., NW Washington, DC 20036 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6-01-98	
Aggregate Year-To-Date > \$		2000.00	
D. Full Name, Mailing Address and ZIP Code Bears Stearns PAC 245 Park Avenue New York, NY 10167 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6-01-98	
Aggregate Year-To-Date > \$		500.00	
E. Full Name, Mailing Address and ZIP Code American Occupational Therapy Association PAC P.O. Box 31220 Bethesda, MD 20824 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	6-01-98	
Aggregate Year-To-Date > \$		500.00	
F. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Aggregate Year-To-Date > \$			
G. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Aggregate Year-To-Date > \$			

SUBTOTAL of Receipts This Page (optional)	5250.00
TOTAL This Period (last page this line number only)	11350.00

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NAME OF COMMITTEE (In Full)

Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code Committee to Re-Elect Esteban Torres to Congress 41 Rainbow Ridge Road Pomona, CA 91766	Name of Employer Reimbursement for Diplomatic Gifts	Date (month, day, year) 6-22-98	Amount of Each Receipt this Period 270.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	

SUBTOTAL of Receipts This Page (optional)	270.00
TOTAL This Period (last page this line number only)	270.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Home Savings of America 5700 N. Figueroa St. Los Angeles, CA 90042	Interest	5-21-98	51.98
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Home Savings of America 5700 N. Figueroa St. Los Angeles, CA 90042	Interest	6-22-98	62.37
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merrill Lynch 74-800 Highway 111 Indian Wells, CA 92210	Interest	6-30-98	1325.96
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date > \$	

SUBTOTAL of Receipts This Page (optional)	1440.31
TOTAL This Period (last page this line number only)	1440.31

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Veloz Consulting Group 131 Mountain View Ave. Montebello, CA 90640	<u>Fundraising Expenses</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-27-98	500.00
B. Full Name, Mailing Address and ZIP Code U.S. Postmaster 1525 N. Alvarado St. Los Angeles, CA 90026	<u>Postage</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-29-98	70.40
C. Full Name, Mailing Address and ZIP Code Pacific Bell Payment Center Van Nuys, CA 91388	<u>Office Phone</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-01-98	61.40
D. Full Name, Mailing Address and ZIP Code First of America - VISA P.O. Box 85180 Louisville, KY 40285	<u>See Attachment #1</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-01-98	1033.28
E. Full Name, Mailing Address and ZIP Code Public Storage 1776 Blake St. Los Angeles, CA 90031	<u>Storage Rental</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-01-98	118.00
F. Full Name, Mailing Address and ZIP Code Bell Atlantic P.O. Box 646 Baltimore, MD 21265	<u>Fax Line</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-01-98	26.77
G. Full Name, Mailing Address and ZIP Code Park-Sunset Building 1910 Sunset Blvd. Los Angeles, CA 90026	<u>May '98 Office Rent</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-01-98	186.00
H. Full Name, Mailing Address and ZIP Code Bell Atlantic P.O. Box 646 Baltimore, MD 21265	<u>Fax Line</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-01-98	18.19
I. Full Name, Mailing Address and ZIP Code Ramona Millan c/o Sheet Metal Workers' 9101 East Whittier Pico Rivera, CA 90660	<u>Donation for Funeral Exp.</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-02-98	500.00

SUBTOTAL of Receipts This Page (optional)	2514.04
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Bacerra for Congress FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Veloz Consulting Group 131 Mountain View Ave. Montebello, CA 90640	Fundraising Consultant Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-05-98	1000.00
Gateway 2000 P.O. Box 2000 North Sioux City, SD 57049	Computer & Monitor Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-15-98	2298.16
Comp USA 761 N. San Fernando Blvd. Burbank, CA 91502	Printer & Software Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-15-98	1894.33
Staples 3360 N. San Fernando Road Glendale, CA 90065	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-16-98	68.79
U.S. Postmaster 1525 N. Alvarado St. Los Angeles, CA 90026	7/9 Fundraiser Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-17-98	256.00
U.S. Postmaster 1525 N. Alvarado St. Los Angeles, CA 90026	7/9 Fundraiser Postage Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-18-98	55.00
Fraioli Inc. 80 F Street, NW #804 Washington, DC 20001	Fundraising Management Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-23-98	1972.70
Bell Atlantic P.O. Box 646 Baltimore, MD 21265	Fax Line Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-30-98	34.35
Cantrell / Cutter 1789 Olive Street Capital Hts., MD 20743	Stationary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-30-98	229.48

SUBTOTAL of Receipts This Page (optional) 7808.82

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	3	3
FOR LINE NUMBER		
17		

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)

Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Office Phone	Date (month, day, year)	Amount of Each Disbursement This Period
Pacific Bell Payment Center Van Nuys, CA 91388	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-30-98	67.69
B. Full Name, Mailing Address and ZIP Code Park-Sunset Building 1910 Sunset Blvd. Los Angeles, CA 90026	Purpose of Disbursement June '98 Office Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-30-98	Amount of Each Disbursement This Period 186.00
C. Full Name, Mailing Address and ZIP Code Democratic National Committee 430 South Capitol St., SE Washington, DC 20003	Purpose of Disbursement Campaign Training Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-01-98	Amount of Each Disbursement This Period 150.00
D. Full Name, Mailing Address and ZIP Code California Floral Co. 100 S. Spring St. Los Angeles, CA 90012	Purpose of Disbursement Condolence Flowers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-30-98	Amount of Each Disbursement This Period 136.29
E. Full Name, Mailing Address and ZIP Code Total Unitemized Expenditures Under \$200	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 491.47
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Receipts This Page (optional)	1031.45
TOTAL This Period (last page this line number only)	11354.31

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Gloria Romero for Assembly P.O. Box 32398 Los Angeles, CA 90032	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-21-98	250.00
B. Full Name, Mailing Address and ZIP Code Friends of Barbara Boxer P.O. Box 641751 Los Angeles, CA 90064	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-28-98	Amount of Each Disbursement This Period 100.00
C. Full Name, Mailing Address and ZIP Code Citizens for an Educated America - No on 227 555 S. Flower St., #4510 Los Angeles, CA 90071	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-28-98	Amount of Each Disbursement This Period 800.00
D. Full Name, Mailing Address and ZIP Code No on 226 Committee 1510 J Street, Suite 115 Sacramento, CA 95814	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5-28-98	Amount of Each Disbursement This Period 1000.00
E. Full Name, Mailing Address and ZIP Code George Nakano for Assembly 1230 Crenshaw Blvd. #200 Torrance, CA 90501	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-01-98	Amount of Each Disbursement This Period 250.00
F. Full Name, Mailing Address and ZIP Code Gutierrez for Delegate 3317 Turner Lane Chevy Chase, MD 20815	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-05-98	Amount of Each Disbursement This Period 200.00
G. Full Name, Mailing Address and ZIP Code Shirley Baca for Congress P.O. Box 8348 Las Cruces, NM 88006	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-10-98	Amount of Each Disbursement This Period 1000.00
H. Full Name, Mailing Address and ZIP Code Inlee for Congress 679 Azalea NE Bainbridge, WA 98110	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-16-98	Amount of Each Disbursement This Period 500.00
I. Full Name, Mailing Address and ZIP Code Friends of Alex Rodriguez P.O. Box 180218 Boston, MA 02118	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6-24-98	Amount of Each Disbursement This Period 500.00

SUBTOTAL of Receipts This Page (optional)	4600.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Becerra for Congress

FEC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Janice Mahn for Congress P.O. Box 812 Torrance, CA 90508	Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-29-98	1000.00
B. Full Name, Mailing Address and ZIP Code Coyne for Congress 1065 Medfield Circle Rocky River, OH 44116	Purpose of Disbursement Check Lost Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) G-96	10-23-96	(500.00)
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	5100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Attachment #1

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)

Becerra for Congress

FBC ID No. C00264101

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Member's Dining Room H-117 U.S. Capitol Washington, DC 20515	Meeting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-22-98	12.50
B. Full Name, Mailing Address and ZIP Code Camacho's Cantina 100 Universal Center Drive City Walk - Suite 133 Universal City, CA 91608	Staff Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-01-98	238.81
C. Full Name, Mailing Address and ZIP Code Member's Dining Room H-117 U.S. Capitol Washington, DC 20515	Meeting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-06-98	20.80
D. Full Name, Mailing Address and ZIP Code Delta Air 422 N. La Cienega Blvd. Los Angeles, CA 90048	Campaign Speech Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-12-98	404.00
E. Full Name, Mailing Address and ZIP Code Total Unitemized Expenditures Under \$200	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		357.17
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Receipts This Page (optional)	1033.28
TOTAL This Period (last page this line number only)	

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7/15/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>ABW</i> PREPARER	 7/20/98 DATE PREPARED