48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of $1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL: DeFazio for Congress

ADDRESS (number and street): PO Box 1316

CITY, STATE, and ZIP CODE: Spfld OR 97477

2. NAME OF CANDIDATE: Peter DeFazio

3. OFFICE SOUGHT (State and District): OR 04

4. FEC IDENTIFICATION NUMBER

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 Employer / Occupation	Date (month, day, year)	Amount
A. Full Name, Mailing Address and ZIP Code: Corp for the Advancement of Psychiatry PAC, 1400 K St NW, Washington DC 20005	Name of Employer: / Occupation:	10/21/96	$1000
B. Full Name, Mailing Address and ZIP Code: Human Rights Campaign Fund PAC, 1101-14th St NW, Washington DC 20005	Name of Employer: / Occupation:	10/22/96	$1000
C. Full Name, Mailing Address and ZIP Code:	Name of Employer: / Occupation:		
D. Full Name, Mailing Address and ZIP Code:	Name of Employer: / Occupation:		
E. Full Name, Mailing Address and ZIP Code:	Name of Employer: / Occupation:		

SIGNATURE (optional):

DATE: 10/22/96

For further information contact:
Federal Election Commission
999 E Street, NW, Washington, DC 20463
Toll Free 800-424-9530, Local 202-219-3420

FEMAnoss

FEC FORM 6
(11/93)