48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of $1,000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL
Becerra for Congress

ADDRESS (number and street)
P.O. Box 261060

CITY, STATE, and ZIP CODE
Los Angeles, CA 90026

2. NAME OF CANDIDATE
Xavier Becerra

3. OFFICE SOUGHT (State and District)
30th CD - Calif.

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.

4. FEC IDENTIFICATION NUMBER
C00264101

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
Hector Flores 3354 Punta Del Esca Hacienda Hts., CA 91745	White Memorial Medical Center Occupation: Medical Doctor	10-30-98	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount

SIGNATURE (optional)
Robert J. Herrera

DATE
11-01-98

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

FEC FORM 6
(11/93)

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