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# Women's Alliance For Israel

A POLITICAL ACTION COMMITTEE

RECEIVED FROM  
FEDERAL ELECTION  
COMMISSION MAIL ROOM  
APR 16 12 45 PM 1997

April 8, 1998

Ms. Melissa Hurd  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

Identification Number: C00236598

Reference: Mid-Year (1/1/97 - 6/30/97) and  
Year End (7/1/97 - 12/31/97) Reports

Dear Ms. Hurd:

As per my conversation with you yesterday, please be informed that  
Women's Alliance for Israel is a volunteer organization.

We have no office space or permanent staff. Our expenses are all included  
on the report.

Enclosed are the above Mid-Year and Year End Reports with employers  
listed where there is an occupation; otherwise, our members are  
homemakers and donating their time to help our group work.

Thank you very much. If you have any further questions, please contact me  
at my home phone number, (818) 784-0674.

Sincerely,

  
Elaine Robinson  
President

Enclosures

cc: John D. Gibson  
Helen Pollak

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE OR CANDIDATE		FEDERAL ELECTION COMMISSION SIGN IN ROOM	
C00236396	120597	P 2450MM	APR 13 12 45 PM '98
HELEN POLLAK WOMEN'S ALLIANCE FOR ISRAEL 8306 WILSHIRE BLVD #1579 BEVERLY HILLS		CA 90211	
2. FEC IDENTIFICATION NUMBER		C 00236596	
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)			

## 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:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- 12-Day Pre-Election Report for the \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_
- (b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period		This Period	Calendar Year-to-Date
7/1/97 through 12/31/97			
6. (a)	Cash on Hand January 1, 19		\$ 31,181.43
(b)	Cash on Hand at Beginning of Reporting Period	\$ 71,449.74	
(c)	Total Receipts (from Line 19)	\$ 37,112.33	\$ 105,957.72
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 108,562.07	\$ 137,139.15
7.	Total Disbursements (from Line 30)	\$ 34,916.39	\$ 63,493.47
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 73,645.68	\$ 73,645.68
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-9420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	
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		HELEN POLLAK	
Signature of Treasurer		Date	
		1/30/98	

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 3X  
(revised 9/93)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE **WOMEN'S ALLIANCE FOR ISRAEL**

REPORT COVERING PERIOD  
FROM **7/1/97** TO **12/31/97**

	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	29,106.-	77,321.-	11400
ii. Unitemized	6,193.-	26,054.-	11600
iii. Total (add i and ii) >	35,299.-	103,375.-	11800
b. Political Party Committees			119
c. Other Political Committees (such as PACs)			116
d. Total Contributions (add a ii, b and c) >	35,299.-	103,375.-	119
12. Transfers From Affiliated/Other Party Committees			2
13. All Loans Received			3
14. Loan Repayments Received			4
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	1,000.-	1,000.-	5
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			6
17. Other Federal Receipts (Dividends, Interest, etc.)	813.33	1,682.72	7
18. Transfers from Nonfederal Account for Joint Activity			8
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	37,112.33	105,957.72	9
20. Total Federal Receipts (subtract line 16 from line 19) >	37,112.33	105,957.72	20
<b>II Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21000
ii. Non-Federal Share			21500
b. Other Federal Operating Expenditures	6,416.39	22,493.47	210
c. Total Operating Expenditures (add a i, a ii, and b) >	6,416.39	22,493.47	210
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	28,500.-	41,000.-	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			280
b. Political Party Committees			285
c. Other Political Committees (such as PACs)			290
d. Total Contribution Refunds (add a, b and c) >			290
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	34,916.39	63,493.47	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	34,916.39	63,493.47	31
<b>III Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	35,299.-	103,375.-	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from line 32)	35,299.-	103,375.-	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	6,416.39	22,493.47	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from line 35) >	6,416.39	22,493.47	37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 17  
FOR LINE NUMBER 11(A)

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)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code ADELBERG, HELEN 16311 VENTURA BLVD, SUITE 650 ENCINO, CA. 91436	Name of Employer RETIREED Occupation PHYSICIAN Aggregate Year-to-Date > \$ 400.00	Date (month, day, year) 12/16/97	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code AGRAN, LIBBIE 2751 MC CONNELL DRIVE LOS ANGELES, CA 90064	Name of Employer LIBBIE AGRAN FINANCIAL SERVICES Occupation FINANCIAL ADVISOR Aggregate Year-to-Date > \$ 700.00	Date (month, day, year) 12/12/97	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code ALBERT, ELAINE H. 120 GREENFIELD AVE. LOS ANGELES, CA. 90049	Name of Employer JEWISH COMMUNITY RELATIONS COMMITTEE Occupation ATTORNEY Aggregate Year-to-Date > \$ 332.00	Date (month, day, year) 12/12/97	Amount of Each Receipt this Period 147.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code ALTURA, FLORENCE 117 NORTH DOHENY DR. No. 907 LOS ANGELES, CA. 90069	Name of Employer Occupation HOMEMAKER Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 10/20/97	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code ARONSON, PHYLLIS 4230 VALLEY MEADOW ROAD ENCINO, CA 91436	Name of Employer Occupation HOMEMAKER Aggregate Year-to-Date > \$ 580.00	Date (month, day, year) 8/11/97 10/20/97	Amount of Each Receipt this Period 15.00 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code BASHNER, GABRIELLA P.O. BOX 280045 NORTHRIDGE, CA. 91328	Name of Employer Occupation HOMEMAKER Aggregate Year-to-Date > \$ 722.00	Date (month, day, year) 1/3/97 8/6/97 10/20/97 12/12/97	Amount of Each Receipt this Period 500.00 15.00 20.00 22.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code BECKER, NETTIE 2292 CENTURY HILL LOS ANGELES, CA. 90067	Name of Employer NETTIE BECKER ESCROW Occupation ESCROW COMPANY Aggregate Year-to-Date > \$ 893.00	Date (month, day, year) 8/6/97 8/15/97 12/2/97	Amount of Each Receipt this Period 15.00 15.00 22.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

1,391.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 2 OF 17  
FOR LINE NUMBER 1191

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NAME OF COMMITTEE (in Full)

**WOMEN'S ALLIANCE FOR ISRAEL**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BERGER, EDITH 5113 BLUEBELL AVE. N. HOLLYWOOD, CA. 91607	Occupation: <b>HOMEMAKER</b>	8/11/97	500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>545.-</b>		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BERKE, ELAINE M 17009 COTT PLACE ENCINO, CA 91436	BERKE MGT CO.	10/27/97	500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>MANAGEMENT</b>	Aggregate Year-to-Date > \$ <b>500.-</b>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BLAGRUND, ESTHER 510 LESLIE LANE BEVERLY HILLS, CA. 90210	Occupation: <b>HOMEMAKER</b>	8/4/97 9/18/97 12/12/97 12/16/97	140.- 15.- 22.- 125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>302.-</b>		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BOLOTIN, CAROLE 19244 LASSEN STREET NORTH RIDGE, CA. 91324	Occupation: <b>HOMEMAKER</b>	8/11/97 10/20/97 12/12/97	15.- 80.- 522.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>1,177.-</b>		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BOTNEY, ELEANOR 4235 BAYLE DRIVE TARZANA, CA. 91356	Occupation: <b>HOMEMAKER</b>	9/18/77	30.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>530.-</b>		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHERNICK, JOYCE 2425 OLYMPIC BLVD. SANTA MONICA, CA. 90404	Occupation: <b>HOMEMAKER</b>	12/2/97	1,000.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>1045.-</b>		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
COHEN, BEVERLY FOUR SEASONS HOTEL 300 S. DOHENY DRIVE, 16TH FLOOR LOS ANGELES, CA. 90048	Occupation: <b>HOMEMAKER</b>	7/3/97	100.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <b>312.-</b>		

SUBTOTAL of Receipts This Page (optional)

**3,049.-**

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 3 OF 17  
FOR LINE NUMBER 11(9)

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**NAME OF COMMITTEE (In Full)**

**WOMEN'S ALLIANCE FOR ISRAEL**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
COHEN, MARILYN 19501 WEEBURN COURT TARZANA, CA. 91356		8/15/97	15.-
		9/19/97	30.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	10/20/97	20.-
		Aggregate Year-to-Date > \$ <b>325.-</b>	
B. Full Name, Mailing Address and ZIP Code COLKER, DVORAH 2721 SOUTH BEVERLY DRIVE LOS ANGELES, CA. 90034		7/15/97	500.-
		8/6/97	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	10/20/97	20.-
		Aggregate Year-to-Date > \$ <b>595.-</b>	
C. Full Name, Mailing Address and ZIP Code D'AGOSTINO, LEA PURWIN 10660 WILSHIRE BLVD., #1507 LOS ANGELES, CA. 90024			
	CITY OF LOS ANGELES	10/27/97	500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>ATTORNEY</b>		
		Aggregate Year-to-Date > \$ <b>618.-</b>	
D. Full Name, Mailing Address and ZIP Code DAVIS, DIANE 4605 LANKERSHIM #305 NORTH HOLLYWOOD, CA. 91602			
		10/20/97	20.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>TALENT FRANSEL AGENT</b>	11/11/97	125.-
		12/2/97	22.-
		Aggregate Year-to-Date > \$ <b>212.-</b>	
E. Full Name, Mailing Address and ZIP Code EDELMAN, JOANN 4727 ARCOLA AVE TOLUCA LAKE, CA. 91602			
	HOMWORKS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>INTERIOR DESIGNER</b>	9/19/97	215.-
		Aggregate Year-to-Date > \$ <b>333.-</b>	
F. Full Name, Mailing Address and ZIP Code ELLIOTT, ARLYNE 16342 TUDOR DRIVE ENCINO, CA 91436			
		8/4/97	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	9/18/97	15.-
		10/20/97	20.-
		12/16/97	147.-
		Aggregate Year-to-Date > \$ <b>342.-</b>	
G. Full Name, Mailing Address and ZIP Code ELMAN, BARBARA 19233 WELLS DRIVE TARZANA, CA. 91356			
	WEST HILLS ANESTHESIA CARE GROUP	1/97	100.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>EXEC DIR. MED CORP</b>	12/31/97	125.-
		Aggregate Year-to-Date > \$ <b>225.-</b>	

SUBTOTAL of Receipts This Page (optional)

1,804.-

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

List separate schedule(s) for each category of the Detailed Summary Page

PAGE 4 OF 17  
FOR LINE NUMBER 11(9)

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NAME OF COMMITTEE (in Full)

**WOMEN'S ALLIANCE FOR ISRAEL**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<b>FARBER, JANET</b> 14134 MARGATE STREET VAN NUYS, CA 91401			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>10/2/97</b>	<b>125.-</b>
Aggregate Year-to-Date > \$ <b>225.-</b>			
<b>FELDMAN, MARLENE</b> 4400 JUBILO DRIVE TARZANA, CA. 91356			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>12/16/97</b>	<b>125.-</b>
Aggregate Year-to-Date > \$ <b>225.-</b>			
<b>FIRESTONE, ROBERTH</b> 16741 RAYEN STREET NORTHRIDGE, CA 91343			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>SELF</b>	Date (month, day, year) <b>8/11/97</b> <b>8/15/97</b> <b>10/20/97</b> <b>12/12/97</b> <b>12/16/97</b>	Amount of Each Receipt This Period <b>15.-</b> <b>150.-</b> <b>140.-</b> <b>22.-</b> <b>125.-</b>
Aggregate Year-to-Date > \$ <b>967.-</b>			
<b>FISCHER SHARON</b> 4669 ARIBA DRIVE TARZANA, CA 91356			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) <b>8/4/97</b> <b>9/18/97</b> <b>10/20/97</b> <b>12/2/97</b>	Amount of Each Receipt This Period <b>15.-</b> <b>30.-</b> <b>20.-</b> <b>22.-</b>
Aggregate Year-to-Date > \$ <b>825.-</b>			
<b>FLEKMAN, MARILYN S.</b> 2145 CENTURY WOODS WAY LOS ANGELES, CA. 90067			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) <b>7/15/97</b> <b>8/11/97</b> <b>12/16/97</b>	Amount of Each Receipt This Period <b>200.-</b> <b>15.-</b> <b>22.-</b>
Aggregate Year-to-Date > \$ <b>282.-</b>			
<b>FURMAN, LENORE</b> 2401 CENTURY HILL LOS ANGELES, CA. 90067			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>LENORE FURMAN INTERIORS</b>	Date (month, day, year) <b>11/25/97</b>	Amount of Each Receipt This Period <b>125.-</b>
Aggregate Year-to-Date > \$ <b>340.-</b>			
<b>GANZ, MAGDA</b> 1550 RISING GLEN ROAD LOS ANGELES, CA. 90067			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>INTERIOR DESIGNER</b>	Date (month, day, year) <b>8/6/97</b> <b>12/2/97</b>	Amount of Each Receipt This Period <b>15.-</b> <b>22.-</b>
Aggregate Year-to-Date > \$ <b>255.-</b>			

SUBTOTAL of Receipts This Page (optional)

**1,188.-**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 5 OF 17  
FOR LINE NUMBER 11(9)

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NAME OF COMMITTEE (In Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GIVEN, DORIS 10490 WILSHIRE BLVD. LOS ANGELES, CA. 90024			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HOMEMAKER	7/3/97	200.-
	Aggregate Year-to-Date > \$ 245.-		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GLAZER, DIANE P. 9440 SANTA MONICA BLVD # 610 BEVERLY HILLS, CA. 90210	SELF		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: ATTORNEY	7/9/97	500.-
	Aggregate Year-to-Date > \$ 1,000.-		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GLOBERSON, RUTH 720 N. FOOTHILL ROAD BEVERLY HILLS, CA. 90210	RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: ATTORNEY	8/15/97 12/12/97	15.- 125.-
	Aggregate Year-to-Date > \$ 285.-		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GOLDENFELD MAITEN, MARCIA 11693 SAN VICENTE BLVD # 239 LOS ANGELES, CA. 90049			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HOMEMAKER	8/11/97 10/20/97 11/11/97 12/2/97	15.- 20.- 200.- 22.-
	Aggregate Year-to-Date > \$ 357.-		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GOLDMAN, MAXINE 18293 KAREN DRIVE TARZANA, CA. 91356			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HOMEMAKER	12/13/97	125.-
	Aggregate Year-to-Date > \$ 225.-		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GOLDMAN, MERA LEE 1122 SAN YSIDRO DRIVE BEVERLY HILLS, CA. 90210	CITY OF BEVERLY HILLS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MAYOR MEMBER OF BEV. HILLS	10/20/97	20.-
	Aggregate Year-to-Date > \$ 220.-		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GOLDMAN, RHEBA 16219 QUEMADA ROAD ENCINO, CA. 91436			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: HOMEMAKER	9/19/97	140.-
	Aggregate Year-to-Date > \$ 265.-		

SUBTOTAL of Receipts This Page (optional)

1,382.-

TOTAL This Period (last page this line number only)



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE **6** OF **17**

FOR LINE NUMBER **11(9)**

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**NAME OF COMMITTEE (in Full)**

**WOMEN'S ALLIANCE FOR ISRAEL**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>GREENFIELD, HELENE</b> 2795 MC CONNELL DRIVE LOS ANGELES, CA. 90064		9/18/97 10/20/97	15.- 40.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>ACCOUNTANT</b>	Aggregate Year-to-Date > \$ <b>673.-</b>	
<b>GRINBERG, EDNA</b> 9255 DOHNEY ROAD LOS ANGELES, CA. 90069		8/15/97 11/25/97	15.- 125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$ <b>265.-</b>	
<b>HARRIS, ESTHER</b> 512 N. HILLCREST DRIVE BEVERLY HILLS, CA. 90210		12/12/97	125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$ <b>270.-</b>	
<b>HELLER, SANDRA</b> 707 N. FARING ROAD LOS ANGELES, CA. 90077	<b>SELF</b>	12/12/97 12/16/97	200.- 22.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>ART DEALER</b>	Aggregate Year-to-Date > \$ <b>222.-</b>	
<b>HERSCHER, DIANNE</b> 2443 CENTURY HILL PH LOS ANGELES, CA. 90067	<b>L + R TRAVEL CENTRE</b>	10/20/97	20.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>TRAVEL AGENT</b>	Aggregate Year-to-Date > \$ <b>580.-</b>	
<b>HIER, MARLENE</b> 1565 SO. EDRIS DRIVE LOS ANGELES, CA. 90035		8/4/97	125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$ <b>243.-</b>	
<b>HINDIN, MARION</b> 410 N. BRISTOL AVE. LOS ANGELES, CA. 90049		12/16/97	1,000.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$ <b>2,118.-</b>	

SUBTOTAL of Receipts This Page (optional) .....

**1,687.-**

TOTAL This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HORWICH, ADA 524 N. REXFORD DRIVE BEVERLY HILLS, CA. 90210	KENDALL + ASSOC. ED. CONSULTANTS	10/20/97 12/12/97	40.- 22.-
	Occupation: SOCIAL WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,180.-		
B. Full Name, Mailing Address and ZIP Code JAEGER, POLINA S. 1439 EDRIS DRIVE LOS ANGELES, CA 90035	ERNST & YOUNG	10/20/97	200.-
	Occupation: CPA		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.-		
C. Full Name, Mailing Address and ZIP Code KANDEL, BEVERLY 450 S. MAPLE DRIVE #104 BEVERLY HILLS, CA. 90212		12/2/97	125.-
	Occupation: HOMEMAKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225.-		
D. Full Name, Mailing Address and ZIP Code KENT, HANKA 18607 KIPTON PLACE TARZANA, CA. 91356		12/12/97	125.-
	Occupation: RETIRED TEACHER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 343.-		
E. Full Name, Mailing Address and ZIP Code KLAMER, SHARY 10537 CLEARWOOD COURT LOS ANGELES, CA. 90077	CITY OF LOS ANGELES	8/11/97 9/18/97 10/15/97 12/31/97	15.- 15.- 20.- 125.-
	Occupation: ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 275.-		
F. Full Name, Mailing Address and ZIP Code KLASKY, SANDRA L. 17323 CITRONIA STREET NORTHRIDGE, CA 91325		7/15/97 8/15/97 10/20/97	250.- 30.- 20.-
	Occupation: HOMEMAKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.-		
G. Full Name, Mailing Address and ZIP Code KLEMENS, NANCY R 4400 NOGALES DRIVE TARZANA, CA. 91356		8/6/97 9/18/97 10/20/97 11/17/97 12/12/97	15.- 30.- 20.- 500.- 22.-
	Occupation: HOMEMAKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 720.-		

SUBTOTAL of Receipts This Page (optional) ..... 1,574.-  
TOTAL This Period (last page this line number only) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (in Full)

**WOMEN'S ALLIANCE FOR ISRAEL**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>KOTLER, SHIRLEY</b> 10265 CENTURY WOODS DRIVE LOS ANGELES, CA. 90067			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>12/31/97</b>	<b>150.-</b>
	Aggregate Year-to-Date > \$ <b>300.-</b>		
<b>B. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>KURTZMAN, WILMA</b> 2131 CENTURY WOODS WAY LOS ANGELES, CA. 90067			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>8/11/97</b> <b>10/20/97</b> <b>12/16/97</b>	<b>15.-</b> <b>20.-</b> <b>22.-</b>
	Aggregate Year-to-Date > \$ <b>557.-</b>		
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>LAROWE, TRANA</b> 12614 HESBY NORTH HOLLYWOOD, CA. 91607			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>11/25/97</b>	<b>200.-</b>
	Aggregate Year-to-Date > \$ <b>400.-</b>		
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>LANDIS, ELAINE</b> 990 CORSICA DRIVE PACIFIC PALISADES, CA. 90272			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>9/18/97</b> <b>9/24/97</b> <b>12/12/97</b>	<b>15.-</b> <b>200.-</b> <b>22.-</b>
	Aggregate Year-to-Date > \$ <b>237.-</b>		
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>LANGE, LILLO</b> 2910 NEILSON WAY #307 SANTA MONICA, CA. 90405	<b>SELF</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>INTERPRETER</b>	<b>12/12/97</b>	<b>125.-</b>
	Aggregate Year-to-Date > \$ <b>250.-</b>		
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>LENT, PHYLLIS</b> 5013 CALVIN AVENUE TARZANA, CA. 91356			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>8/11/97</b> <b>9/19/97</b> <b>10/20/97</b> <b>12/16/97</b>	<b>15.-</b> <b>150.-</b> <b>20.-</b> <b>22</b>
	Aggregate Year-to-Date > \$ <b>252.-</b>		
<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<b>LERNER, SHIRLEY</b> 4401 NOGALES DRIVE TARZANA, CA. 91356			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>HOMEMAKER</b>	<b>9/18/97</b> <b>12/16/97</b>	<b>15.-</b> <b>200.-</b>
	Aggregate Year-to-Date > \$ <b>460.-</b>		

SUBTOTAL of Receipts This Page (optional)

**1,191.-**

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 9 OF 17  
FOR LINE NUMBER 11(9)

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**NAME OF COMMITTEE (in Full)**

**WOMEN'S ALLIANCE FOR ISRAEL**

A. Full Name, Mailing Address and ZIP Code <i>LEVINE, DEANIE C. 347 SO. LUCERNE BLVD LOS ANGELES, CA 90020</i>	Name of Employer  Occupation <i>HOMEMAKER</i>	Date (month, day, year) <i>12/23/97</i>	Amount of Each Receipt this Period  <i>200.-</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>400.-</i>		
B. Full Name, Mailing Address and ZIP Code <i>LEVINE, JOAN 10724 WILSHIRE BLVD LOS ANGELES, CA 90024</i>	Name of Employer  Occupation <i>HOMEMAKER</i>	Date (month, day, year) <i>9/24/97 10/27/97 12/2/97</i>	Amount of Each Receipt this Period  <i>30.- 40.- 125.-</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>295.-</i>		
C. Full Name, Mailing Address and ZIP Code <i>LEWITT, KIM 16633 VENTURA BLVD. 11TH FLOOR ENCINO, CA. 91436</i>	Name of Employer  Occupation <i>HOMEMAKER</i>	Date (month, day, year) <i>9/19/97 10/27/97</i>	Amount of Each Receipt this Period  <i>125.- 125.-</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>250.-</i>		
D. Full Name, Mailing Address and ZIP Code <i>LIBERMAN, ESTHER 12547 HUSTON STREET NORTH HOLLYWOOD, CA 91607</i>	Name of Employer  Occupation <i>HOMEMAKER</i>	Date (month, day, year) <i>12/12/97</i>	Amount of Each Receipt this Period  <i>1,000.-</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>2,000.-</i>		
E. Full Name, Mailing Address and ZIP Code <i>LINDELL-LEVY, ROCHELLE 3457 RED ROSE DRIVE ENCINO, CA. 91436</i>	Name of Employer  Occupation <i>HOMEMAKER</i>	Date (month, day, year) <i>9/18/97 12/2/97 12/16/97</i>	Amount of Each Receipt this Period  <i>30.- 125.- 22.-</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>322.-</i>		
F. Full Name, Mailing Address and ZIP Code <i>LIPPMAN, JOAN 17163 ADLON ROAD ENCINO, CA 91436</i>	Name of Employer <i>RETIRED</i>  Occupation <i>OFFICE MANAGER</i>	Date (month, day, year) <i>8/6/97 10/20/97 12/20/97</i>	Amount of Each Receipt this Period  <i>15.- 20.- 22.-</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>242.-</i>		
G. Full Name, Mailing Address and ZIP Code <i>LOFFMAN, SONIA 17173 STRAWBERRY DRIVE ENCINO, CA. 91436</i>	Name of Employer  Occupation <i>HOMEMAKER</i>	Date (month, day, year) <i>8/15/97 11/25/97</i>	Amount of Each Receipt this Period  <i>30.- 500.-</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ <i>530.-</i>		

SUBTOTAL of Receipts This Page (optional)

*2,409.-*

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LUBITZ, LINDA 12558 THE VISTA LOS ANGELES, CA. 90049	RETIRED	8/4/97 8/11/97 9/18/97 10/20/97 12/12/97	15.- 30.- 30.- 20.- 22.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REALTOR	Aggregate Year-to-Date > \$ 1,162.-	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LUCOFF, TRUDY 323 SAN VICENTE BLVD. NO. 4 SANTA MONICA, CA. 90402			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	9/18/97	155.-
Aggregate Year-to-Date > \$ 200.-			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LUTIN, EVELYN 12473 PROMONTORY ROAD LOS ANGELES, CA. 90049	VOLUNTEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COMMUNITY SERVICE	12/2/97	125.-
Aggregate Year-to-Date > \$ 225.-			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARTIN, HARRIET 12395 RIDGE CIRCLE LOS ANGELES, CA. 90049			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	8/6/97 9/19/97 10/20/97	15.- 30.- 20.-
Aggregate Year-to-Date > \$ 210.-			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARCUS, BARBARA A. 3153 ABINGTON BEVERLY HILLS, CA. 90210			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	12/2/97	100.-
Aggregate Year-to-Date > \$ 225.-			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MATHES, SYLVIA 2405 CENTURY HILL LOS ANGELES, CA. 90067			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	8/11/97	15.-
Aggregate Year-to-Date > \$ 620.-			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MATZA, ROCHELLE 4271 MOONCREST PLACE ENCINO, CA. 91436	CAVALERI RESTORATIONS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SALES	9/18/97 10/20/97 12/12/97	30.- 20.- 22.-
Aggregate Year-to-Date > \$ 232.-			

SUBTOTAL of Receipts This Page (optional)

649.-

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (in Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MELLON, SALLY 5320 ALCOVE AVENUE VALLEY VILLAGE, CA 91607		12/2/97 12/12/97	125.- 125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$543.-	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MEYERS, HLA 29030 CLIFFSIDE DRIVE MALIBU, CA 90265		7/9/97	100.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$200.-	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOLDAYE, GERTRUDE 3200 BEL AIR DRIVE LAS VEGAS, NV. 89109		12/2/97	125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$315.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MORROW, MICHELE 861 HANLEY AVENUE LOS ANGELES, CA. 90049		10/20/97	125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$243	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOSTER, E. MURIEL 10452 LE CONTE AVE. LOS ANGELES, CA, 90024		9/18/97 10/20/97	15.- 40.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$555.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
POLLAK, HELEN 13524 CHANDLER BLVD VAN NUYS, CA. 91401		12/12/97	200.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$518.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
POSALSKI, GINA 1135 MAYBROOK DRIVE. BEVERLY HILLS, CA. 90210		12/2/97	125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	Aggregate Year-to-Date > \$270.-	

SUBTOTAL of Receipts This Page (optional)

980.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER 11(A)

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NAME OF COMMITTEE (in Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PRICE, BARBARA 1551 WILSHIRE BLVD LOS ANGELES, CA. 90024	LAW OFFICE OF IAN C. MALATESTA	10/20/97 12/31/97	20.- 125.-
	Occupation LEGAL ASSISTANT Aggregate Year-to-Date > \$ 270.-		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RAWITT, LOIS 23415 PALM DRIVE CALABASAS, CA 91302		8/11/97 9/18/97 10/20/97 12/12/97	230.- 60.- 20.- 22.-
	Occupation HOMEMAKER Aggregate Year-to-Date > \$ 650.-		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RETTIG, ARLENE 9470 HIDDEN VALLEY PLACE BEVERLY HILLS, CA 90210		10/20/97 12/2/97	540.- 22.-
	Occupation HOMEMAKER Aggregate Year-to-Date > \$ 562.-		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
REYNOLDS, JEAN S. 324 S. LINDEN DRIVE BEVERLY HILLS, CA. 90212	FTA MARKET CONSULTANTS		
	Occupation SPECIAL EVENT COORDINATOR Aggregate Year-to-Date > \$ 200.-	11/25/97	200.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBINSON, ELAINE 4811 ENCLINO TERRACE ENCLINO, CA. 91316		8/11/97 9/18/97 9/19/97 10/20/97	15.- 15.- 15.- 20.-
	Occupation HOMEMAKER Aggregate Year-to-Date > \$ 3,453.-		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROSEN, LOIS 266 S. CLIFFWOOD AVENUE LOS ANGELES, CA. 90049	ROSEN INVESTMENTS		
	Occupation REAL ESTATE Aggregate Year-to-Date > \$ 2,000.-	12/2/97	1,000.-
Receipt For: <input 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
ROSENBERG, FLORENCE L. 2687 BASIL LANE LOS ANGELES, CA. 90077	RETIRED		
	Occupation PHYSICIAN Aggregate Year-to-Date > \$ 500.-	2/28/97	500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

2,804.-

TOTAL This Period (last page this line number only)

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)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROSENBLUTH, MARGERY 3951 DIAMANTE PLACE ENCINO, CA. 91436	VOLUNTEER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VOLUNTEER FUNDRAISER Aggregate Year-to-Date > \$250.-	12/16/97	125.-
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROTH, WALTER 1467 23RD ST. MANHATTEN BEACH, CA. 90266	FRED SANDS COMMERCIAL R.E.	8/6/97 9/19/97 10/20/97 12/12/97	15.- 15.- 20.- 22.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE BROKER Aggregate Year-to-Date > \$617.-		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SAMUELS, ELANA 10384 NORTHVALE ROAD LOS ANGELES, CA. 90064			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER Aggregate Year-to-Date > \$325.-	8/28/97	125.-
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCHARF, ELSIE 224 B. BRISTOL AVENUE LOS ANGELES, CA. 90049			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER Aggregate Year-to-Date > \$225.-	9/24/97	125.-
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCHLICHTER, BARBARA 605 N. LINDEN DRIVE BEVERLY HILLS, CA. 90210			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER Aggregate Year-to-Date > \$587.-	12/16/97	22.-
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCHENFELD, ALICE 604 N. OAKHURST DRIVE BEVERLY HILLS, CA. 90210	ACADEMY MEG.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SECRETARY Aggregate Year-to-Date > \$1060.-	8/11/97	15.-
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SEIDEN, RIVKA 513 N. ARDEN BEVERLY HILLS, CA. 90210			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER Aggregate Year-to-Date > \$545.-	11/4/97	500.-

SUBTOTAL of Receipts This Page (optional) .....

984.-

TOTAL This Period (last page this line number only) .....



SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 14 OF 17  
FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (In Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SHAEN, FLORENCE ANNE 8912 SEPULVEDA BLVD NORTH HILLS, CA 91343		8/6/97 11/25/97	15.- 125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$310.-	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SHAPIRO, JUDY 505 N. HILLCREST ROAD BEVERLY HILLS, CA. 90216		12/12/97	100.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$245.-	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SHARPE, VIRGINIA 10543 GARWOOD PLACE LOS ANGELES, CA. 90024		10/20/97	20.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$210.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SILVER, CAROLE 264 S. CRESCENT DRIVE BEVERLY HILLS, CA. 90212		8/6/97 10/20/97 12/12/97	500.- 40.- 1,022.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$1,725.-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SILVERMAN, MIRIAM 4330 TAMOSHANTER TARZANA, CA. 91356		8/11/97 9/19/97 12/16/97	115.- 60.- 22.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$242.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SIMON, ROBERTA 108 GREENFIELD AVE. LOS ANGELES, CA. 90049		8/15/97	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$365.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SINDER, RITA 15925 HIGH KNOLL ROAD ENCINO, CA. 91436	JASIN CO.	8/11/97 9/19/97 10/20/97 12/12/97	15.- 1,000.- 20.- 22.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE BROKER	Aggregate Year-to-Date > \$2,953.-	

SUBTOTAL of Receipts This Page (optional)	3,091.-
TOTAL This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 15 OF 17  
FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (in Full)

**WOMEN'S ALLIANCE FOR ISRAEL**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SMITH, HARRIET 100 N. FULLER AVENUE LOS ANGELES, CA 90036	SELF		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation TRAVEL AGENT	9/18/97	200.-
	Aggregate Year-to-Date > \$ 200.-		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SMITH, PAMELA 5241 ROUND MEADOW ROAD HIDDEN HILLS, CA 91302			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	12/12/97	500.-
	Aggregate Year-to-Date > \$ 1,000.-		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SOMMERS, BARBARA 723 N. FOOTHILL ROAD BEVERLY HILLS, CA 90210			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	10/20/97 12/2/97	20.- 200.-
	Aggregate Year-to-Date > \$ 420.-		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SPIWAK, SARA 12678 MOUNTAIN CREST LANE BRENTWOOD, CA 90049			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	12/16/97	22.-
	Aggregate Year-to-Date > \$ 1,022.-		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEELE, RUTH 3949 LONGRIDGE SHERMAN OAKS, CA 91423			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	12/23/97	200.-
	Aggregate Year-to-Date > \$ 400.-		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STERN, MAXINE 1494 MORAGA DRIVE LOS ANGELES, CA 90049	M. W. STERN + CO.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INVESTMENT ADVISOR	11/25/97	125.-
	Aggregate Year-to-Date > \$ 325.-		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STONE, TONI 3133 BARBYDELL DRIVE LOS ANGELES, CA 90064	JEWISH COMMUNITY FOUNDATION		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation FUNDRAISER	8/6/97 9/18/97 10/20/97 12/2/97	15.- 15.- 20.- 22.-
	Aggregate Year-to-Date > \$ 822.-		

SUBTOTAL of Receipts This Page (optional)

1,339.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 16 OF 17  
FOR LINE NUMBER 11(9)

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NAME OF COMMITTEE (In Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (This Period)
SUGARMAN, FLORENCE 1615 STRADELLA ROAD LOS ANGELES, CA 90077			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	7/9/97	500.-
	Aggregate Year-to-Date	> \$500.-	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (This Period)
TOREN, ROSE 265 S. MAPLE BEVERLY HILLS, CA 90212			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	10/20/97 12/12/97	20.- 22.-
	Aggregate Year-to-Date	> \$557.-	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (This Period)
UNGAR, STELLA S. 2121 E. 1st ST. NO. 103 LONG BEACH, CA 90803			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	7/15/97 8/11/97 12/12/97	100.- 15.- 125.-
	Aggregate Year-to-Date	> \$240.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (This Period)
WESTON, MICHELLE 6321 ALONZO AVENUE ENCINO, CA 91335			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>SELFEMPLOYED</b>	9/18/97 10/20/97 12/12/97	15.- 20.- 22.-
	Aggregate Year-to-Date	> \$262.-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (This Period)
WINNICK, KAREN 355 N. SALT AIR AVENUE LOS ANGELES, CA 90049			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	12/12/97	1,000.-
	Aggregate Year-to-Date	> \$1,000.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (This Period)
WIVIOTT, SHARON 10601 WILSHIRE BLVD. 17 WEST LOS ANGELES, CA 90024			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	12/2/97	125.-
	Aggregate Year-to-Date	> \$225.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (This Period)
WOLENS, ORNA AMIR 814 N. ROXBURY DRIVE BEVERLY HILLS, CA 90210			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <b>HOMEMAKER</b>	11/20/97	500.-
	Aggregate Year-to-Date	> \$700.-	

SUBTOTAL of Receipts This Page (optional)

2,464.-

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 17 OF 17  
FOR LINE NUMBER 11(9)

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NAME OF COMMITTEE (in Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WOLF, ELYSE 11400 W. OLYMPIC BLVD. 9TH FLOOR LOS ANGELES, CA. 90064		10/20/97	120.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>HOMEMAKER</i>	Aggregate Year-to-Date > \$ 365.-	
B. Full Name, Mailing Address and ZIP Code ZAHARONI, SUZANNE 1165 LOMA LINDA DRIVE BEVERLY HILLS, CA. 90210	Name of Employer SELF	Date (month, day, year) 12/12/97	Amount of Each Receipt this Period 125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>ATTORNEY</i>	Aggregate Year-to-Date > \$ 225.-	
C. Full Name, Mailing Address and ZIP Code ZALIS, ROSALIE 5251 WOODMAN AVENUE SHERMAN OAKS, CA. 91401	Name of Employer	Date (month, day, year) 12/21/97	Amount of Each Receipt this Period 500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>HOMEMAKER</i>	Aggregate Year-to-Date > \$ 1,133.-	
D. Full Name, Mailing Address and ZIP Code ZARITSKY, GAIL 2444 N. EDMONT ST. LOS ANGELES, CA. 90027	Name of Employer	Date (month, day, year) 12/23/97	Amount of Each Receipt this Period 125.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>HOMEMAKER</i>	Aggregate Year-to-Date > \$ 325.-	
E. Full Name, Mailing Address and ZIP Code ZIERING, MARYLIN 720 N. WALDAN DRIVE BEVERLY HILLS, CA. 90210	Name of Employer	Date (month, day, year) 8/6/97	Amount of Each Receipt this Period 250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>HOMEMAKER</i>	Aggregate Year-to-Date > \$ 250.-	
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)

1,120.-

TOTAL This Period (last page this line number only)

29,106.-

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 1  
FOR LINE NUMBER 15

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NAME OF COMMITTEE (in Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THE BEVERLY HILTON 9876 WILSHIRE BLVD BEVERLY HILLS, CA 90210	DEPOSIT REFUND		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	10/1/97	
	Aggregate Year-to-Date > \$ 1,000.-		1,000.-
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) .....

TOTAL This Period (last page this line number only) .....

1,000.-

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 1 OF 2  
FOR LINE NUMBER 21(b)

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NAME OF COMMITTEE (in Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A-1 COPY CAT PRINTING 16025 VENTURA BLVD #100 ENCINO, CA 91436	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1385 7/6/97	544.51
B. Full Name, Mailing Address and ZIP Code US POST OFFICE	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1386 7/18/97	320.-
C. Full Name, Mailing Address and ZIP Code UNITED POSTAL CENTERS 8306 WILSHIRE BLVD. BEVERLY HILLS, CA 90212	BOX RENTAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1387 7/18/97	179.50
D. Full Name, Mailing Address and ZIP Code A-1 COPY CAT PRINTING 16025 VENTURA BLVD #100 ENCINO, CA 91436	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1388 8/16/97	694.97
E. Full Name, Mailing Address and ZIP Code US POST OFFICE	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1390 8/22/97	325.-
F. Full Name, Mailing Address and ZIP Code REGENCY CLUB 10900 WILSHIRE BLVD. LOS ANGELES, CA 90024	EVENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1392 9/8/97	500.-
G. Full Name, Mailing Address and ZIP Code A-1 COPY CAT PRINTING 16025 VENTURA BLVD #100 ENCINO, CA 91436	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1393 9/26/97	460.06
H. Full Name, Mailing Address and ZIP Code REGENCY CLUB 10900 WILSHIRE BLVD. LOS ANGELES, CA 90024	EVENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1395 10/15/97	902.80
I. Full Name, Mailing Address and ZIP Code US POST OFFICE	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK # 1397 11/8/97	115.-

SUBTOTAL of Disbursements This Page (optional)

4,041.84

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 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. SENATE CAMPAIGN TO RE-ELECT TOM DASCHIE HART BLDG #509 2nd AND C STREETS NE WASHINGTON, DC 20510	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1388 8/13/97	5,000.-
U.S. SENATE CAMPAIGN TO RE-ELECT SAM BROWNBACK HART BLDG #303 2nd AND C STREETS NE WASHINGTON DC 20510	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1391 10/15/97	2,500.-
U.S. SENATE CAMPAIGN TO RE-ELECT BARBARA A. MILKULSKI HART BLDG #709 2nd AND C STREETS NE WASHINGTON, DC 20510	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1394 10/15/97	5,000.-
U.S. SENATE CAMPAIGN TO RE-ELECT BEN NIGHTHORSE CAMPBELL HART BLDG #380 2nd AND C STREETS NE WASHINGTON, DC 20510	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1398 11/10/97	2,500.-
U.S. SENATE BYRON DORGAN FOR SENATE HART BLDG #713 2nd AND C STREETS NE WASHINGTON, DC 20510	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1400 11/18/97	2,500.-
CAMPAIGN TO RE-ELECT CHARLES E. GRASSLEY HART BLDG #135 2nd AND C STREETS NE WASHINGTON, DC 20510	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1402 12/9/97	5,000.-
U.S. SENATE COMMITTEE TO RE-ELECT DANIEL INOUYE HART BLDG #722 2nd AND C STREETS NE WASHINGTON, DC 20510	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1406 12/16/97	3,000.-
FRIENDS OF JANE HARMAN US HOUSE OF REPRESENTATIVES 325 GANNON HOUSE OFFICE BLDG 1ST AND INDEPENDENCE AVE SE WASHINGTON, DC 20515	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CHECK #1407 12/16/97	3,000.-
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) .....


TOTAL This Period (last page this line number only) .....

28,500.-

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.

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