REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

DEC 5 1 02 PM '94

1. NAME OF COMMITTEE (in full)
INTERNATIONAL LADIES' GARMENT WORKERS' UNION CAMPAIGN COMMITTEE

ADDRESS (number and street) [ ] Check if different than previously reported
1710 BROADWAY

CITY, STATE and ZIP CODE
NEW YORK, NY 10019

2. FEC IDENTIFICATION NUMBER
C00004861

3. [X] This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
PRIOR TO 1/01/94

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

30 DAY POST GENERAL 12/08/94
Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[ ] May 20	[ ] September 20	[ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [X] NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 10/20/94 through 11/28/94		
6. (a)	Cash on Hand January 1, 19 94		$ 1,727,545.67
(b)	Cash on Hand at Beginning of Reporting Period	$ 1,755,746.05	
(c)	Total Receipts (from Line 19)	$ 18,068.20	$ 347,550.34
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 1,773,814.25	$ 2,075,096.01
7.	Total Disbursements (from Line 30)	$ 12,140.55	$ 313,422.31
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 1,761,673.70	$ 1,761,673.70
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-	

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
IRWIN SOLOMON

Signature of Treasurer
[signature]

Date
11/30/94

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

FEC FORM 3X
(revised 9/93)

FE4AN101

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