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
Friends of Lois Capps
ADDRESS (number and street)
P.O. Box 23940
CITY, STATE, and ZIP CODE
Santa Barbara, CA 93121

2. NAME OF CANDIDATE
Lois Capps

3. OFFICE SOUGHT (State and District)
CA - 22

4. FEC IDENTIFICATION NUMBER
C00331389

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.

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
ALPA - PAC		2/20/98	1,000.
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
National Air Traffic Controllers Association 1150 - 17th Street, NW Suite 701 Washington, D.C. 20036		2/20/98	1,500.
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
American Hospital Association Political Action Committee 325 Seventh Street, N.W. Washington, D.C. 20004		2/20/98	1,000.
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
Judith Cosdon 4161 Cresta Avenue Santa Barbara, CA 93110	Self-employed	2/20/98	1,000.
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount

SIGNATURE (optional)

DATE 2/21/98

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)

FEC/ANT