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 (in full)

C00141747 120696 . P 252
RUSSELL S HOLDSTEIN + ANDREA SPIEGEL
NORTHERN CALIFORNIANS FOR GOOD GOVERNMENT
601 VAN NESS AVE #28
SAN FRANCISCO CA 94102-3262

RECEIVED
FEDERAL ELECTION COMMISSION
MAIL ROOM
MAR 24 12 03 PM '97

2. FEC IDENTIFICATION NUMBER
C00141747

3. [X] 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:

[ ] February 20	[ ] June 20	[ ] October 20
[X] 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 2-1-1997 through 2-28-1997		
6. (a) Cash on Hand January 1, 19 97		$ 5,240.16
(b) Cash on Hand at Beginning of Reporting Period	$ 12,363.50	
(c) Total Receipts (from Line 19)	$ 17,396.88	$ 29,284.94
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 29,760.38	$ 34,525.10
7. Total Disbursements (from Line 30)	$ 1,893.28	$ 6,658.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 27,867.10	$ 27,867.10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY 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 202-219-3420

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
RUSSELL S. HOLDSTEIN

Signature of Treasurer
[signature]

Date
3-9-97

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)

FE8AN068

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

(revised 1/1/91)

NAME OF COMMITTEE: Northern California for Good Government

REPORT COVERING PERIOD FROM 2-1-1997 TO: 2-28-1997

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	$ 17,357.00	$ 29,232.00	11(a)i
ii. Unitemized			11(a)
iii. Total (add i and ii) ➤			11(a)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤			11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	$ 39.88	$ 52.94	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	$ 17,396.88	$ 29,284.94	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	$ 17,396.88	$ 29,284.94	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)
ii. Non-Federal Share			21(a)
b. Other Federal Operating Expenditures	$ 1,893.28	$ 6,658.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	$ 1,893.28	$ 6,658.00	21(c)
22. Transfers to Affiliated/Other Party Committees	-0-	-0-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees			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. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	$ 1,893.28	$ 6,658.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	$ 1,893.28	$ 6,658.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

FE6AN096

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 5

FOR LINE NUMBER 19

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)

NORTHERN CALIFORNIANS FOR GOOD GOVERNMENT

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Morton Friedkin 300 Grand Avenue Oakland, CA 94610 Other (specify):	SELF REAL ESTATE Aggregate Year-to-Date $ 1,500.	2-5-97	$ 1,500.
Mr. Don Friend 625 Howard St. #310 San Francisco, CA 94105 Other (specify):	SELF ATTORNEY Aggregate Year-to-Date $ 1,000.	2-5-97	$ 1,000.
C. Mr. Robert Friend 625 Howard St. San Francisco, CA 94105 Other (specify):	HOWARD PROPERTIES, INC VICE PRESIDENT Aggregate Year-to-Date $ 1,000.	2-5-97	$ 1,000.
D. Dr. Art Gauss 450 Sutter #1415 San Francisco, CA 94108-4003 Other (specify):	SELF ORTHODONTIST Aggregate Year-to-Date $ 1,000.	2-5-97	$ 1,000.
E. F. Mr. Richard Goldman One Bush St. #9 San Francisco, CA 94104 Other (specify):	SELF BUSINESSMAN-INS. Aggregate Year-to-Date $ 1,000.	2-5-97	$ 1,000.
F. Mr. Russell Holdstein 2 Buckeye Way Kentfield, CA 94904 Other (specify):	SELF BUSINESSMAN Aggregate Year-to-Date $ 1,000.	2-5-97	$ 1,000.
G. Mr. Bert Tonkin 268 Lombard St San Francisco, CA 94133 Other (specify):	WESTERN EXHIBITORS, INC MGR CONVENTIONS & TRADE SHOWS Aggregate Year-to-Date $ 1,500.	2-5-97	$ 1,500.

SUBTOTAL of Receipts This Page (optional) ..... $ 8,000.00

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

FOR LINE NUMBER 19

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NAME OF COMMITTEE (In Full)

NORTHERN CALIFORNIANS FOR GOOD GOVERNMENT

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A.1 Mr. Melvin Tukman, 60 E. Sir Francis Drake Blvd., Larkspur, CA 94939 — Rec — Other (specify):	Name of Employer: SELF; Occupation: INVESTMENT MANAGER; Aggregate Year-to-Date > $ 1,000.	2-5-97	$ 1,000.
B. Mr. David Steirman, 628 42nd Ave, San Francisco, CA 94403-5034 — Rec — Other (specify):	Name of Employer: KESTEL INV MGR; Occupation: INVESTMENT MGR; Aggregate Year-to-Date > $ 360.	2-5-97	$ 360.00
C. Full Name, Mailing Address and ZIP Code: ALFRED A. AMKRAUT, 3358 KENNETH DR, PALO ALTO, CA 94303 — Receipt For: Primary, General, Other (specify):	Name of Employer: ; Occupation: RETIRED; Aggregate Year-to-Date > $ 100.	2-5-97	$ 100.00
D. Mrs. Roberta Bach, 4431 Deer Ridge Road, Danville, CA 94506 — Rec — Other (specify):	Name of Employer: ; Occupation: VOLONTEER; Aggregate Year-to-Date > $ 25.00	2-5-97	$ 25.00
E.1 Mr. Ronald Berman, 79 Berens Drive, Kentfield, CA 94904 — Rec — Other (specify):	Name of Employer: SELF; Occupation: ADMINISTRATIVE CONSULTANT; Aggregate Year-to-Date > $ 100.	2-5-97	$ 100.00
F.1 Dr. Richard Caplin, 90 Parker Ave., #306, San Francisco, CA 94118 — Rec — Other (specify):	Name of Employer: SELF; Occupation: PHYSICIAN; Aggregate Year-to-Date > $ 100.	2-5-97	$ 100.00
G.1 Dr. Elaine Dallman, 601 Van Ness Ave, San Francisco, CA 94102-3262 — Rec — Other (specify):	Name of Employer: SELF; Occupation: Co; Aggregate Year-to-Date > $ 100.	2-5-97	$ 100.00

SUBTOTAL of Receipts This Page (optional) ..... $ 1,785.00

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 3 OF 5

FOR LINE NUMBER 19

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NAME OF COMMITTEE (in Full)

NORTHERN CALIFORNIANS FOR GOOD GOVERNMENT

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Mr. & Mrs. Irwin Gibbs 1200 California St #18 D San Francisco, CA 94109-5075 Other (specify):	Name of Employer: GIBBS-McCORMICK, INC. Occupation: FOOD BROKER Aggregate Year-to-Date > $	2-5-97	$ 100.00
B. Mr. & Mrs Aaron Greenberg 5424 Fernhoff Rd. Oakland, CA 94619 Other (specify):	Name of Employer: SELF Occupation: ATTORNEY Aggregate Year-to-Date > $ 100.	2-5-97	$ 100.00
C. Dr. F. Carl Grumet 825 San Francisco Ct. Stanford, CA 94305 Other (specify):	Name of Employer: STANFORD UNIVERSITY Occupation: PROFESSOR Aggregate Year-to-Date > $ 50.00	2-5-97	$ 50.00
D. Mr. Lawrence Mansbach 15 Almenar Drive Greenbrae, CA 94904 Other (specify):	Name of Employer: MILLS-CARN. BAUTOVICH Occupation: REAL ESTATE CONSULTANT Aggregate Year-to-Date > $ 25.	2-5-97	$ 25.00
E. Ms. Barbara Masters 757 Albemarle St. El Cerrito, CA 94530 Other (specify):	Name of Employer: CA. ASSN. PUBLIC HOSPITALS Occupation: VICE PRESIDENT Aggregate Year-to-Date > $ 100.	2-5-97	$ 100.00
F. Mr. Alan Sternberg P.O. Box 895 Orinda, CA 94563-0895 Other (specify):	Name of Employer: SELF Occupation: ATTORNEY Aggregate Year-to-Date > $ 36.00	2-5-97	$ 36.00
G. Mr Richard Zukin 244 Park Lane Atherton, CA 94027 Other (specify):	Name of Employer: UNITED APARTMENT SERVICE CORP Occupation: REAL ESTATE CONSULT. Aggregate Year-to-Date > $ 50.00	2-5-97	$ 50.00

SUBTOTAL of Receipts This Page (optional) ..... $ 461.00

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 4 OF 5

FOR LINE NUMBER 19

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NAME OF COMMITTEE (In Full)

Northern Californians For Good Government

	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Mr. Noah Alper 1068 Spruce St Berkeley, CA 94707 Rec ☐ Other (specify):	Occupation: STUDENT Aggregate Year-to-Date > $ 36.00	2-12-97	$ 36.00
B. Dr. Stephen Hurst 2225 Forest View Avenue Hillsborough, CA 94010 Re ☐ Other (specify):	Name of Employer: SELF Occupation: PHYSICIAN Aggregate Year-to-Date > $ 50.00	2-12-97	$ 50.00
C. Dr & Mrs Melvin Rosen 16 Lower Dr. Mill Valley, CA 94941 R	Name of Employer: UC/MZH Occupation: PHYSICIAN Aggregate Year-to-Date > $ 25.00	2-12-97	$ 25.00
D. F Ms. Raquel Newman 44 Macondray Lane 6W San Francisco, CA 94133 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: SELF Occupation: CONSULTANT Aggregate Year-to-Date > $ 1,000	2-12,97	$ 1,000.
E. F Mr. Theodore Rosenberg P.O. Box 960 Daly City, CA 94017 Rece ☐ Other (specify):	Name of Employer: Occupation: RETIRED Aggregate Year-to-Date > $ 1,000	2-12,97	$ 1,000.
F. Ms. Madeleine Russell --~~PERSONAL~~ 3778 Washington St. San Francisco, CA 94118 Re ☐ Other (specify):	Name of Employer: Occupation: RETIRED Aggregate Year-to-Date > $ 2,000	2-12-97	$ 2,000.
Mr. Harold Zlot 1 Bush St. #1100 San Francisco, CA 94104 R ☐ Other (specify):	Name of Employer: SELF Occupation: INVESTMENT ADV Aggregate Year-to-Date > $ 1,000	2-12-97	$ 1,000.

SUBTOTAL of Receipts This Page (optional) ..... $ 5,111.00

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

FEBANK'98

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 5 OF 5

FOR LINE NUMBER 19

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NAME OF COMMITTEE (In Full)

Northern Californians For Good Government

A. Full Name, Mailing Address and ZIP Code Mrs. Carole Chaiken 1177 Estates Dr. Lafayette, CA 94549 Receipt For: ☐ Other (specify):	Name of Employer Occupation: HOUSEWIFE Aggregate Year-to-Date $ 1,000	Date (month, day, year): 2-14-97	Amount of Each Receipt this Period: $ 1,000.
B. Full Name, Mailing Address and ZIP Code Mr. Al Frank 2194 Constitution Dr. San Jose, CA 95124 Receipt For: ☐ Other (specify):	Name of Employer: SELF Occupation: ATTORNEY Aggregate Year-to-Date $ 1,000	Date (month, day, year): 2-14-97	Amount of Each Receipt this Period: $ 1,000.
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) ..... $ 2,000

TOTAL This Period (last page this line number only) ..... $17,357.

ESANCTB

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 30

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NAME OF COMMITTEE (In Full)
NORTHERN CALIFORNIANS FOR GOOD GOVERNMENT

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. PACIFIC BELL PAYMENT CENTER SACRAMENTO, CA 95887	PHONE (Disbursement for: Primary General Other (specify))	2-5-97	$29.89
B. BLUE CROSS P.O. B 7030 ANAHEIM, CA 92850	MED INS FOR ARS (Disbursement for: Primary General Other (specify))	2-5-97	$ 507.00
C. LAMORINDA PRESS P.O. B. 239 LAFAYETTE, CA 94549	STATIONARY (Disbursement for: Primary General Other (specify))	2-6-97	$ 117.37
D. DIRECT MAIL CENTER 1099 MARIPOSA ST SAN FRANCISCO, CA 94107-2519	MAILINGS FOR 1996 (Disbursement for: Primary General Other (specify))	2-7-97	$ 524.51
E. COTHRAN & JOHNSON Suite 545 1333 N. CALIFORNIA BL WALNUT CREEK, CA. 94596	YR END TAX (Disbursement for: Primary General Other (specify))	2-10-97	$ 272.00
F. Kinkos P.O. B. 8033 Ventura, CA 93002-8033	DUES LETTER COPIES (Disbursement for: Primary General Other (specify))	2-12-97	$ 59.48
G. WELLS FARGO BANK CHESTNUT ST SAN FRANCISCO, CA 94128	PETTY CASH (Disbursement for: Primary General Other (specify))	2-14-97	$ 100.00
H. DIRECT MAIL CENTER 1099 MARIPOSA ST SAN FRANCISCO, CA 94107-2519	BALANCE ON MAILING (Disbursement for: Primary General Other (specify))	2-26-97	$ 80.00
I. OFFICE DEPOT 655 HARRISON ST SAN FRANCISCO, CA 94107	PRINTER TONER + SUPPLIES (Disbursement for: Primary General Other (specify))	2-26-97	$ 95.11

SUBTOTAL of Disbursements This Page (optional) ..... $ 1,785.36

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

FEBAN060

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 30

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NAME OF COMMITTEE (In Full)

Northern Californians For Good Government

A. Full Name, Mailing Address and ZIP Code DIRECT MAIL CENTER 1099 MARIPOSA ST SAN FRANCISCO, CA 94107-[illegible]	Purpose of Disbursement GORTON POSTAGE - INVITATION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2-28-97	Amount of Each Disbursement This Period $ 96.00
B. Sprint P.O.B. 52242 Phoenix, AZ	Purpose of Disbursement PHONE Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 2-28-97	Amount of Each Disbursement This Period $ 11.92
C.	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) ..... $ 107.92

TOTAL This Period (last page this line number only) $1,893.28

FE6AH068

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.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 3-20-97
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER

3-24-97
DATE PREPARED

FEC FORM 70-2 (12/92)