

CITIZENS FOR WATERS
555 South Flower Street; Suite 4510 • Los Angeles, California
(213) 489-4792 - Office • (213) 489-4818 - Fax

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM
2000 APR 13 11:05

April 14, 2000

Federal Elections Commission
999 E Street, N.W.
Washington, D.C. 20463

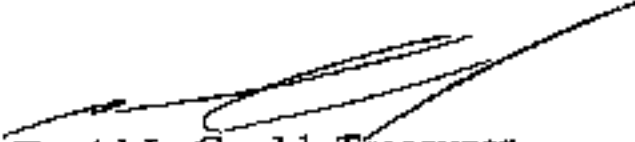
TO WHOM IT MAY CONCERN:

Attached is our Filing Report for "Citizens for Waters," FEC #C00167585, covering the period of February 17, 2000 through March 31, 2000. Please note that this report covers activity for the Primary Election for 2000 and the General Election for 2000.

Best efforts were used to obtain missing information. If additional information becomes available we will file amendments.

Thank you for your understanding and cooperation.

Sincerely yours,


David L. Gould, Treasurer
CITIZENS FOR WATERS

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

USE FEC MAILING LABEL OR TYPE OR PRINT

| | | |
|--|-------------------------|--|
| 1. NAME OF COMMITTEE (in full) CITIZENS FOR WATERS | | |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 555 South Flower Street, Suite 4510 | | 2. FEC IDENTIFICATION NUMBER C00167585 |
| CITY, STATE and ZIP CODE Los Angeles, CA 90071 | STATE/DISTRICT CA/35 | 3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

4. TYPE OF REPORT

| | |
|---|---|
| <input checked="" type="checkbox"/> April 15 Quarterly Report | <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) |
| <input type="checkbox"/> July 15 Quarterly Report | election on _____ in the State of _____ |
| <input type="checkbox"/> October 15 Quarterly Report | <input type="checkbox"/> Thirtieth day report following the General Election on _____ |
| <input type="checkbox"/> January 31 Year End Report | _____ in the State of _____ |
| <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Termination Report |

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 5. Covering Period <u>02/17/2000</u> through <u>03/31/2000</u> | | |
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(a)) | 62,154.00 | 80,404.00 |
| (b) Total Contribution Refunds (from Line 20(d)) | 1,000.00 | 1,000.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) | 61,154.00 | 79,404.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | 7,931.75 | 27,884.19 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | 0.00 | 0.00 |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | 7,931.75 | 27,884.19 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | 106,835.90 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 6,000.00 | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20469
Toll Free 800-424-9530
Local 202-375-3120

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 David L. Gould | |
| Signature of Treasurer | Date 4-14-00 |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U. S. C. p437g.

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

| Name of Committee (in full) CITIZENS FOR WATER | Report Covering the Period: | |
|---|---------------------------------|-----------------------------------|
| | From: 02/17/2000 To: 03/31/2000 | |
| I. RECEIPTS | COLUMN A Total This Period | COLUMN B Calendar Year-To-Date |
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (Use Schedule A) | 14,750.00 | |
| (ii) Unitemized | 1,404.00 | |
| (iii) Total of contributions from individuals | 16,154.00 | 30,904.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 46,000.00 | 49,500.00 |
| (d) The Candidate | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i)-(iv), (b), (c) and (d)) | 62,154.00 | 80,404.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate | 0.00 | 0.00 |
| (b) All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOANS (add 13(a) and (b)) | 0.00 | 0.00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) | 0.00 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 51.32 | 71.78 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | 62,205.32 | 80,475.78 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES | 7,931.75 | 27,884.19 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES | 0.00 | 0.00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate | 0.00 | 0.00 |
| (b) Of All Other Loans | 0.00 | 0.00 |
| (c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) | 0.00 | 0.00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs) | 1,000.00 | 1,000.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) | 1,000.00 | 1,000.00 |
| 21. OTHER DISBURSEMENTS | 3,476.00 | 3,476.00 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) | 12,407.75 | 32,360.19 |
| III. CASH SUMMARY | | |
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | \$ | 57,038.33 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16) | \$ | 62,205.32 |
| 25. SUBTOTAL (add Line 23 and Line 24) | \$ | 119,243.65 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) | \$ | 12,407.75 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) | \$ | 106,835.90 |

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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)

CITIZENS FOR WATERS C00167585

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|--|---|---------------------------------------|--|
| Aris Anagnos 8124 W. Third Street #200 Los Angeles, CA 90048 | | 02/17/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code Dwayne C. Andross P.O. Box 1470 Locust, IL 62525 | Name of Employer Archer Daniels Midland Company | Date (month, day, year) 03/31/2000 | Amount of Each Receipt This Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation President Emeritus | Aggregate Year-to-Date > \$ 500.00 | |
| C. Full Name, Mailing Address and ZIP Code Willie Grace Campbell 800 West First Street, #1508 Los Angeles, CA 90013 | Name of Employer None | Date (month, day, year) 02/17/2000 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation Retired | Aggregate Year-to-Date > \$ 250.00 | |
| D. Full Name, Mailing Address and ZIP Code Johnnie Cochran Jr. 2373 N. Hobart Boulevard Los Angeles, CA 90027 | Name of Employer Self-Employed | Date (month, day, year) 02/25/2000 | Amount of Each Receipt This Period 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation Attorney | Aggregate Year-to-Date > \$ 1,000.00 | |
| E. Full Name, Mailing Address and ZIP Code Roland L. Coleman Jr. 4041 Via Marison #210 Los Angeles, CA 90042 | Name of Employer Wilson, Elser, Moskowitz et al. | Date (month, day, year) 02/18/2000 | Amount of Each Receipt This Period 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation Attorney | Aggregate Year-to-Date > \$ 1,000.00 | |
| F. Full Name, Mailing Address and ZIP Code Kobie B. Conner 4239 McClung Drive Los Angeles, CA 90008 | Name of Employer | Date (month, day, year) 02/18/2000 | Amount of Each Receipt This Period 350.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ 350.00 | |
| G. Full Name, Mailing Address and ZIP Code Harold A. Dawson 3281 Kingedale Dr. SW Atlanta, GA 30311 | Name of Employer Dawson Company | Date (month, day, year) 03/07/2000 | Amount of Each Receipt This Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation President | Aggregate Year-to-Date > \$ 250.00 | |

SUBTOTAL of Receipts This Page (optional)

3,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions From Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (2/17/2000 - 03/31/2000)

PAGE 2 OF 5
FOR LINE NUMBER 11 (a) (1)

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)

CITIZENS FOR WAIVERS CU01G7585

| | | | |
|---|---|---|--|
| A. Full Name, Mailing Address and ZIP Code Sandra Farrington Domingue 6238 Ems Ave Los Angeles, CA 90047 | Name of Employer City of LA Dept of Bldg & Safety | Date(month, day, year) 02/25/2000 03/03/2000 Returned | Amount of Each Receipt this Period 250.00 (250.00) Item - NSF |
| | Occupation Building Mechanical Inspector | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 0.00 |
| B. Full Name, Mailing Address and ZIP Code Gus Gill 13952 Bora Bora Wy # 215 Marina Del Rey, CA 90292 | Name of Employer Charles Drew University | Date(month, day, year) 02/25/2000 | Amount of Each Receipt this Period 250.00 |
| | Occupation Physician | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 250.00 |
| C. Full Name, Mailing Address and ZIP Code Robert Guillaume 1901 Avenue of the Stars, #1450 Los Angeles, CA 90067 | Name of Employer Self Employed | Date(month, day, year) 02/25/2000 | Amount of Each Receipt this Period 300.00 |
| | Occupation Actor | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 300.00 |
| D. Full Name, Mailing Address and ZIP Code Pamela Harioy 7043 S. La Cienega Blvd. Los Angeles, CA 90045 | Name of Employer Advance Educational & Training Serv | Date(month, day, year) 03/07/2000 | Amount of Each Receipt this Period 1,000.00 |
| | Occupation Training Consultant | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 |
| E. Full Name, Mailing Address and ZIP Code Nyahlushin Getsochev Hammond 2659 Shannon Rd. Los Angeles, CA 90027 | Name of Employer L.A. Comm. Redevelopment Agency | Date(month, day, year) 02/25/2000 | Amount of Each Receipt this Period 1,000.00 |
| | Occupation Project Manager | Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 |
| F. Full Name, Mailing Address and ZIP Code Christopher Hammond 854 W. Adams Boulevard Los Angeles, CA 90007 | Name of Employer Capital Vision Equities | Date(month, day, year) 02/25/2000 03/15/2000 Returned 03/29/2000 | Amount of Each Receipt this Period 1,000.00 (1,000.00) Item - NSF 1,000.00 |
| | Occupation President | Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 |
| G. Full Name, Mailing Address and ZIP Code Maria B. Herman 600 Ranley Way Los Angeles, CA 90049 | Name of Employer Fun Furniture Inc. | Date(month, day, year) 02/25/2000 | Amount of Each Receipt this Period 250.00 |
| | Occupation President | Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 250.00 |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 3,800.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (02/17/2000 - 04/30/2000)

PAGE 3 OF 5
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (in Full)

CITIZENS FOR WATERS C00167585

| A. Full Name, Mailing Address and ZIP Code | Name of Employer Information requested | Date(month, day, year) | Amount of Each Receipt this Period |
|---|---|------------------------|------------------------------------|
| Noel N. Jones 9903 Santa Monica Blvd., #503 Beverly Hills, CA 90212 | Occupation Bishop | 02/25/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | 500.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
| Mac Armster Kendall 2628 Lisa Dr. S.W. Atlanta, GA 30311 | Occupation Educator | 03/07/2000 | 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | 250.00 | |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
| Marilyn Kizziah 107 Foxtail Dr. Santa Monica, CA 90402 | Occupation | 02/25/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | 250.00 | |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
| Patricia Ann Lewis 24130 Westown Avenue #C Harbor City, CA 90710 | Occupation Speech Professor | 02/17/2000 | 150.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | see below | |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
| name as above | Occupation | 03/16/2000 | 200.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | 350.00 | |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
| Mashantucket Pequot Tribal Nation P.O. Box 3008 Mashantucket, CT 06309 | Occupation | 03/16/2000 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | 1,000.00 | |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
| Keith Evans Matsuo 3035 E. Echo Hill Way Orange, CA 92867 | Occupation | 02/25/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | 250.00 | |

SUBTOTAL of Receipts This Page (optional)

2,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s)
for each category of the
Detailed Summary Page
(02/17/2000 - 03/31/2000)

PAGE OF
4 5
FOR LINE NUMBER
11 (a) (i)

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NAME OF COMMITTEE (in Full)

CITIZENS FOR WATERS C00167585

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---------------------------------------|--|
| Rita J. Miller 355 South Grand Avenue 35th Floor Los Angeles, CA 90071 | Kunger Tolles & Olson | 02/18/2000 | 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation Attorney Aggregate Year-to-Date > \$ 250.00 | | |
| B. Full Name, Mailing Address and ZIP Code William Nelson P.O. Box 76890 Los Angeles, CA 90076 | Name of Employer Angelus Holding Company Inc. | Date (month, day, year) 03/15/2000 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation Executive Aggregate Year-to-Date > \$ 500.00 | | |
| C. Full Name, Mailing Address and ZIP Code Joe Perez 3760 Kilroy Airport Way Suite 560 Long Beach, CA 90806 | Name of Employer | Date (month, day, year) 03/23/2000 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation Aggregate Year-to-Date > \$ 500.00 | | |
| D. Full Name, Mailing Address and ZIP Code James O. Robbline 3185 Nancy Creek Road N.W. Atlanta, GA 30327 | Name of Employer Cox Communications | Date (month, day, year) 03/07/2000 | Amount of Each Receipt this Period 250.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation CEO Aggregate Year-to-Date > \$ 250.00 | | |
| E. Full Name, Mailing Address and ZIP Code Lorraine Sheinberg P.O. Box 8180 Northridge, CA 91327 | Name of Employer None | Date (month, day, year) 02/15/2000 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation Homemaker Aggregate Year-to-Date > \$ 500.00 | | |
| F. Full Name, Mailing Address and ZIP Code Steven A. Teitelbaum 1301 20th St. Suite 350 Santa Monica, CA 90404 | Name of Employer | Date (month, day, year) 03/24/2000 | Amount of Each Receipt this Period 250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation Aggregate Year-to-Date > \$ 250.00 | | |
| G. Full Name, Mailing Address and ZIP Code Gretchen A. Wayne 10425 Kling St. North Hollywood, CA 91602 | Name of Employer None | Date (month, day, year) 02/25/2000 | Amount of Each Receipt this Period 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation Housewife Aggregate Year-to-Date > \$ 500.00 | | |
| SUBTOTAL of Receipts This Page (optional) | | | 2,750.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s)
for each category of the
Detailed Summary Page
(02/17/2000 - 03/31/2000)

PAGE OF
5 5
FOR LINE NUMBER
11 (a) (i)

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NAME OF COMMITTEE (In Full)

CITIZENS FOR WATERS C00167585

| | | | |
|---|---|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code Michael A. Wayne 10425 Kling Street North Hollywood, CA 91502</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p> | <p>Name of Employer Batjac Productions, Inc.</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date > \$ 500.00</p> | <p>Date(month, day, year) 02/25/2000</p> | <p>Amount of Each Receipt this Period 500.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Gail Zappa P.O. Box 5263 N. Hollywood, CA 91616</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p> | <p>Name of Employer Self Employed</p> <p>Occupation I.C.A.</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p> | <p>Date(month, day, year) 02/17/2000</p> | <p>Amount of Each Receipt this Period 1,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Michael A. Zuk 23325 Collins St. Woodland Hills, CA 91367</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p> | <p>Name of Employer</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 250.00</p> | <p>Date(month, day, year) 02/15/2000</p> | <p>Amount of Each Receipt this Period 250.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date(month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date(month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date(month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date(month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>SUBTOTAL of Receipts This Page (optional)</p> | | | <p>1,750.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | | | <p>14,750.00</p> |

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (02/17/2000 - 03/31/2000)

PAGE 1 OF 4
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)

CITIZENS FOR WATERS 000167585

| | | | |
|---|-----------------------------|-------------------------|------------------------------------|
| A. Full Name, Mailing Address and ZIP Code AFM Tempo Political Contributions Committee 1501 Broadway New York, NY 10036 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/07/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | | 500.00 |
| B. Full Name, Mailing Address and ZIP Code American Federation of Teachers Comm. of Political Education 555 New Jersey Ave. N.W. Washington, DC 20001 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/03/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | | 1,000.00 |
| C. Full Name, Mailing Address and ZIP Code American Nurses Association PAC 600 Maryland Avenue, S.W. #100 West Washington, DC 20024-2571 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 02/17/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | | 1,000.00 |
| D. Full Name, Mailing Address and ZIP Code ATLA PAC - Association of Trial Lawyers PAC 1050 31st Street NW Washington, DC 20007 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/06/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | | see below |
| E. Full Name, Mailing Address and ZIP Code same as above | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/06/2000 | 5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | | 5,500.00 |
| F. Full Name, Mailing Address and ZIP Code CWA-Cope PCC 501 3rd St. N.W. Washington, DC 20001 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 02/28/2000 | 2,500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | | 2,500.00 |
| G. Full Name, Mailing Address and ZIP Code Drive Political Fund 25 Louisiana Avenue N.W. Washington, DC 20001 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/07/2000 | 5,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ | | 5,000.00 |
| SUBTOTAL of Receipts This Page (optional) | | | 15,500.00 |
| TOTAL This Period (last page this line number only) | | | |

SCHEDULE A

ITEMIZED RECEIPTS

Contributions From Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (3/2/2000 - 06/3/2000)

PAGE 2 OF 4
FOR LINE NUMBER 11 (c)

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)

CITIZENS FOR WATERS C00167585

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|------------------|-----------------------------|------------------------------------|
| Human Rights Campaign Fund PAC 919 18th Street N.W., Ste. 600 Washington, DC 20005 | | 03/31/2000 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ | 500.00 |
| B. Full Name, Mailing Address and ZIP Code I.R.E.W. C.O.P.E. 125 15th Street N.W. Washington, DC 20005 | | 02/25/2000 | 2,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ | see below |
| C. Full Name, Mailing Address and ZIP Code same as above | | 03/28/2000 | 2,500.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ | 5,500.00 |
| D. Full Name, Mailing Address and ZIP Code Machinists Non-Partisan Political League 9000 Machinist Place Upper Meriboro, MD 20772 | | 03/27/2000 | 2,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ | 2,000.00 |
| E. Full Name, Mailing Address and ZIP Code NOW/PAC: National Organization for Women PAC P.O. Box 7157 Washington, DC 20044 | | 07/25/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ | 1,000.00 |
| F. Full Name, Mailing Address and ZIP Code Realtors PAC 430 N. Michigan Avenue Chicago, IL 60611 | | 02/18/2000 02/28/2000 | 1,000.00 2,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ | 3,000.00 |
| G. Full Name, Mailing Address and ZIP Code Recording Industry Assn. of America 1330 Connecticut Ave. N.W. Suite 300 Washington, DC 20036 | | 03/07/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Occupation | Aggregate Year-to-Date > \$ | 0.00 |

SUBTOTAL of Receipts This Page (optional)

12,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s)
for each category of the
Detailed Summary Page
(02/17/2000 - 03/31/2000)

PAGE 3 OF 4
FOR LINE NUMBER 11 (c)

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)

CITIZENS FOR WATERS C00167585

| | | | |
|---|---------------------------------------|--------------------------|------------------------------------|
| A. Full Name, Mailing Address and ZIP Code Recording Industry Association of America Inc. PAC 1330 Connecticut Ave. N.W. Suite 300 Washington, DC 20036 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/20/2000 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| B. Full Name, Mailing Address and ZIP Code Seafarers Political Activity 5201 Auth Way Camp Springs, MD 20746 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/03/2000 | 500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 500.00 | | |
| C. Full Name, Mailing Address and ZIP Code The NEA Fund For Children & Public Education 201 16th Street N.W., Suite 421 Washington, DC 20035 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 02/25/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| D. Full Name, Mailing Address and ZIP Code Transport Workers Union PAC 30 West End Avenue New York, NY 10023 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/06/2000 | 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| E. Full Name, Mailing Address and ZIP Code U.A. Political Education Committee 901 Massachusetts Ave. N.W. Washington, DC 20001 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/16/2000 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| F. Full Name, Mailing Address and ZIP Code UAW V CAP 5000 E. Jefferson Detroit, MI 48212 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 02/28/2000 | 4,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ see below | | |
| G. Full Name, Mailing Address and ZIP Code same as above | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 02/28/2000 03/03/2000 | 4,000.00 1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify): | Aggregate Year-to-Date > \$ 9,000.00 | | |

SUBTOTAL of Receipts This Page (optional)

13,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (02/17/2000 - 03/31/2000)

PAGE 4 OF 4
FOR LINE NUMBER 11 (C)

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)

CITIZENS FOR WATERS C00167585

| | | | |
|--|-----------------------------|-------------------------|------------------------------------|
| A. Full Name, Mailing Address and ZIP Code United Steelworkers of America Five Gateway Center Pittsburgh, PA 15222 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 03/07/2000 | |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | 5,000.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 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 |
| | Occupation | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ | | |

| | |
|---|-----------|
| SUBTOTAL of Receipts This Page (optional) | 5,000.00 |
| TOTAL This Period (last page this line number only) | 65,000.00 |

SCHEDULE A

ITEMIZED RECEIPTS

Other Receipts

Use separate schedule(s) for each category of the Detailed Summary Page (02/17/2000 - 03/31/2000)

PAGE 1 OF 1
FOR LINE NUMBER 15

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)

CITIZENS FOR WATERS C00167585

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
|--|------------------|---|------------------------------------|
| City National Bank 6th & Olive Streets Los Angeles, CA 90014 | Interest | 02/29/2000 | .8 .11 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date > \$ see below | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date(month, day, year) | Amount of Each Receipt this Period |
| same as above | Interest | 03/31/2000 | 33 .21 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | Occupation Aggregate Year-to-Date > \$ 71 .78 | |
| 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)

51 .32

TOTAL This Period (last page this line number only)

51 .32

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (02/17/2000 - 03/31/2000)

PAGE 1 OF 2
FOR LINE NUMBER 17

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)

CITIZENS FOR WATERS C00167585

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|--|--|---|--|
| Back on Broadway Catering 2024 Broadway Santa Monica, CA 90404 | Catering for fundraising event Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/09/2000 | 637.70 |
| B. Full Name, Mailing Address and ZIP Code Banco Popular P.O. Box 690966 Orlando, FL 32869-0966 | Purpose of Disbursement Credit Card Payment (See Below) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03/09/2000 | Amount of Each Disbursement this Period 674.89 |
| C. Full Name, Mailing Address and ZIP Code Hilton Hotels 333 O'Farrell Street San Francisco, CA 94102 | Purpose of Disbursement Hotel: Democratic Convention Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02/25/2000 | Amount of Each Disbursement this Period 305.89 MEND |
| D. Full Name, Mailing Address and ZIP Code Southwest Airlines Los Angeles International Airport Los Angeles, CA | Purpose of Disbursement Airfare: LAX-San Jose LAX, Domestic Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02/25/2000 | Amount of Each Disbursement this Period 559.00 MEXO |
| E. Full Name, Mailing Address and ZIP Code David S. Gould Company 555 S. Flower Street #4510 Los Angeles, CA 90071 | Purpose of Disbursement Credit Card Transaction Charges Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03/20/2000 | Amount of Each Disbursement this Period 214.00 |
| F. Full Name, Mailing Address and ZIP Code same as above | Purpose of Disbursement Office Expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03/09/2000 03/09/2000 | Amount of Each Disbursement this Period 40.00 532.93 |
| G. Full Name, Mailing Address and ZIP Code same as above | Purpose of Disbursement Political Reporting Services Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03/09/2000 | Amount of Each Disbursement this Period 1,959.00 |
| H. Full Name, Mailing Address and ZIP Code Groat Western Caterers 137 South Robertson Blvd., Ste. 104 Beverly Hills, CA 90211 | Purpose of Disbursement Event Catering Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 02/25/2000 | Amount of Each Disbursement this Period 500.00 |
| I. Full Name, Mailing Address and ZIP Code L.A. Vote 555 South Flower Street #4510 Los Angeles, CA 90071 | Purpose of Disbursement State Mailer (Primary election) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) 03/29/2000 | Amount of Each Disbursement this Period 1,000.00 |

SUBTOTAL of Disbursements This Page (optional)

5,538.52

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (02/17/2000 - 03/31/2000)

PAGE 2 OF 2
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

CITIZENS FOR WATERS 000167505

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|--|---|--------------------------|---|
| Elaine Shamir 216 12th Street #6 Santa Monica, CA 90403 | Fundraising Services Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02/23/2000 | 1,000.00 |
| B. Full Name, Mailing Address and ZIP Code same as above | Purpose of Disbursement Parking Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02/25/2000 | 20.00 |
| C. Full Name, Mailing Address and ZIP Code The Regal Biltmore 506 S. Grand Avenue Los Angeles, CA 90071 | Purpose of Disbursement Fundraising Breakfast Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/09/2000 02/25/2000 | 250.04 194.56 |
| D. Full Name, Mailing Address and ZIP Code The Valetten, Ltd. P.O. Box 1306 Hermosa Beach, CA 90254 | Purpose of Disbursement Valet Parking for Fundraiser Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 02/25/2000 | 302.40 |
| E. Full Name, Mailing Address and ZIP Code Unitemized operating expenses (less than \$200) This Period: 02/17/2000 - 03/31/2000 | Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | 326.23 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement this Period |

SUBTOTAL of Disbursements This Page (optional)

2,393.23

TOTAL This Period (last page this line number only)

7,931.75

SCHEDULE B

ITEMIZED DISBURSEMENTS

Refunds of Contributions to Other Political Committees

Use separate schedule(s) for each category of line Detailed Summary Page 102/17/2000 - 03/31/2000

PAGE 1 OF 1
FOR LINE NUMBER 20 (c)

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NAME OF COMMITTEE (in Full)

CITIZENS FOR WATERS C00167585

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|---|---|-------------------------|---|
| Recording Industry Assn. of America 1330 Connecticut Ave. N.W. Suite 300 Washington, DC 20036 | Refund of 05/21/2000 Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/20/2000 | 1,000.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement this Period |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement this Period |
| SUBTOTAL of Disbursements This Page (optional) | | | 1,000.00 |
| TOTAL This Period (last page this line number only) | | | 1,000.00 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Disbursements

Use separate schedule(s) for each category of the Detailed Summary Page (02/17/2000 - 03/31/2000)

PAGE 1 OF 1
FOR LINE NUMBER 21

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)

CITIZENS FOR WATERS CD0167585

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|---|---|-------------------------|---|
| Great Western Caterers 137 South Robertson Blvd., Ste. 104 Beverly Hills, CA 90211 | Seminar Catering Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/16/2000 | 2,476.00 |
| B. Full Name, Mailing Address and ZIP Code L.A. Vote 555 South Flower Street #4510 Los Angeles, CA 90071 | State Mailer Stance (Juanita McDonald, CA) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | 03/29/2000 | 1,000.00 (in-kind) |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Date (month, day, year) | Amount of Each Disbursement this Period |

| | |
|---|----------|
| SUBTOTAL of Disbursements This Page (optional) | 3,476.00 |
| TOTAL This Period (last page this line number only) | 3,476.00 |

SCHEDULE D
(Revised 3/80)


DEBTS AND OBLIGATIONS
Excluding Loans
Debts Owed By the Committee

| Name of Committee (In Full) CITIZENS FOR WATER | Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|---|---|-----------------------------------|---------------------------|---|
| A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Friends of Marguerite Archie-Hudson 4115 Monteith Drive Los Angeles, CA 90043 | 6,000.00 | 0.00 | 0.00 | 6,000.00 |
| Nature of Debt (Purpose): Share of Mailing Cost | | | | |
| B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor | | | | |
| Nature of Debt (Purpose): | | | | |
| 1) SUBTOTALS This Period This Page (optional) | | | | 6,000.00 |
| 2) TOTAL This Period (last page this line only) | | | | 6,000.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) | | | | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | | | | 6,000.00 |

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.

| | |
|---|--------------------------------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> First Class Mail | POSTMARKED |
| <input checked="" type="checkbox"/> Registered/Certified Mail | POSTMARKED 4-14-00 |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt |
| <input type="checkbox"/> Received from the Senate Office of Public Records | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Postmarked and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing | |
|  PREPARER | 4-18-00 DATE PREPARED |