

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

DEC 5 10 27 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

C00236596	101998	P 275
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 11/3/98 in the State of CALIFORNIA

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>10/15/98</u> through <u>11/23/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>			\$ 73,645.68
(b) Cash on Hand at Beginning of Reporting Period		\$ 49,702.42	
(c) Total Receipts (from Line 19)		\$ 12,343.27	\$ 70,510.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 62,045.69	\$ 144,156.32
7. Total Disbursements (from Line 30)		\$ 13,471.97	\$ 95,582.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 48,573.72	\$ 48,573.72
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 202-694-1100
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	<i>Helen Pollak</i>	Date 12/3/98

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

--	--	--	--	--	--	--	--	--	--

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 10/15/98 TO 11/23/98	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individuals/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	7,230.-	49,643.-
ii.	Unitemized	3,015.-	17,585.-
A.	Total	10,245.-	67,248.-
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions	10,245.-	67,248.-
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	2,000.-	2,000.-
17.	Other Federal Receipts (Dividends, Interest, etc.)	98.27	1,262.64
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts	12,343.27	70,510.64
20.	Total Federal Receipts	12,343.27	70,510.64
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures	471.97	17,282.60
c.	Total Operating Expenditures	471.97	17,282.60
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	13,000.-	76,500.-
24.	Independent Expenditures (Use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26.	Loan Repayments Made		
27.	Loans Made		
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees		
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contribution Refunds		1,800.-
29.	Other Disbursements		
30.	Total Disbursements	13,471.97	95,582.60
31.	Total Federal Disbursements	13,471.97	95,582.60
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	10,245.-	67,248.-
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans)(subtract line 33 from 32)	10,245.-	67,248.-
35.	Total Federal Operating Expenditures	471.97	17,282.60
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures	471.97	17,282.60

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 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)

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
HELEN ADELBERG, MD 16821 OAK VIEW DRIVE ENCINO, CA 91436	SELFEMPLOYED	10/29/98	500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PHYSICIAN	Aggregate Year-to-Date > \$ 532.-	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHYLLIS ARONSON 4230 VALLEY MEADOW ROAD ENCINO, CA 91436	N/A	10/29/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 537.-	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GABRIELLA BASHNER P.O. BOX 280045 NORTHRIDGE, CA 91328	N/A	10/26/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 581.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NETTIE BECKER 2292 CENTURY HILL LOS ANGELES, CA 90067	NETTIE BECKER ESCROW	10/26/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ESCROW OFFICER	Aggregate Year-to-Date > \$ 1,081.-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CAROLE BOLDTIN 19244 LASSEN STREET NORTHRIDGE, CA 91324	N/A	10/29/98	515.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 557.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARILYN COHEN 19501 WEBBURN COURT TARZANA, CA 91356	N/A	10/29/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 615.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LEA PURWIN D'AGOSTINO 10660 WILSHIRE BLVD #1507 LOS ANGELES, CA 90024	CITY OF LOS ANGELES	11/6/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 603.-	

SUBTOTAL of Receipts This Page (optional)

1,090.-

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 5
FOR LINE NUMBER 11(0)(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)

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
ERIS FIELD 9884 CARMENITA AVE BEVERLY HILLS, CA 90210	N/A	10/70/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 530.-	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ROBERTA J. FIRESTONE 16741 RAYEN STREET NORTHRIDGE, CA 91343	SELFEMPLOYED	10/24/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PSYCHO THERAPIST	Aggregate Year-to-Date > \$ 559.-	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DIANE P. GLAZER 601 MOUNTAIN DRIVE BEVERLY HILLS, CA 90210	RETIRED	10/28/98	1,000.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ATTORNEY	Aggregate Year-to-Date > \$ 2,000.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
HELENE GREENFIELD 2795 McCONNELL DRIVE LOS ANGELES, CA 90064	RETIRED	10/26/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ACCOUNTANT	Aggregate Year-to-Date > \$ 581.-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
LEE HAUSNER 11601 WILSHIRE BLVD #2370 LOS ANGELES, CA 90025	SELFEMPLOYED	10/26/98	500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PSYCHOLOGIST	Aggregate Year-to-Date > \$ 500.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ADA HORWICH 524 N. REXFORD DRIVE BEVERLY HILLS, CA 90210	KENDAH & ASSOC EDUC. CONSULTANTS	10/29/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SOCIAL WORKER	Aggregate Year-to-Date > \$ 1,103.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
NANCY R. KIEMENS 4400 NOGALES DRIVE TARZANA, CA 91356	N/A	10/26/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 1,133.-	

SUBTOTAL of Receipts This Page (optional)

1,575.-

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 15
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 committees.

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
MILDRED KRAMER 1506 S. BENTLEY #206 LOS ANGELES, CA 90025	N/A	10/29/98	500.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	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
TRANA LABOWE 12614 HESBY STREET VALLEY VILLAGE, CA 91607	N/A	11/10/98	200.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	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
PHYLLIS LENT 5013 CALVIN AVE TARZANA, CA 91356	N/A	11/6/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation RETIRED	Aggregate Year-to-Date > \$ 278.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CAROL LEVIN 16324 CELINDA PLACE ENCINO, CA 91436	SELFEMPLOYED	11/6/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INVESTOR	Aggregate Year-to-Date > \$ 581.-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ESTHER LIBERMAN 12547 HUSTON ST NORTH HOLLYWOOD, CA 91607	N/A	10/29/98	1,000.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 1,044.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LINDA LUBITZ 12558 THE VISTA LOS ANGELES, CA 90049	RETIRED	10/26/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REALTOR	Aggregate Year-to-Date > \$ 1,051.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HARRIET MARTIN 12395 RIDGE CIRCLE LOS ANGELES, CA 90049	N/A	11/18/98	30.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 280.-	

SUBTOTAL of Receipts This Page (optional)

1,775.-

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 11(4)(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)

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
JEANNE REYNOLDS 324 S. LINDEN DRIVE BEVERLY HILLS, CA 90212	N/A	10/29/98	200.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	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
ELAINE ROBINSON 4811 ENCINO TERRACE ENCINO, CA 91316	N/A	10/26/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 1,315.-	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LOIS ROSEN P.O. BOX 491216 LOS ANGELES, CA 90049	N/A	10/26/98 10/29/98	15.- 1,000.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 1,015.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FLORENCE ROSENBERG 2687 RASIL LANE LOS ANGELES, CA 90077	RETIRED	10/29/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PHYSICIAN	Aggregate Year-to-Date > \$ 515.-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WALTER ROTH 1467 23rd STREET MANHATTAN BEACH, CA 90266	CHARLES DUNNE COMPANY	10/29/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE BROKER	Aggregate Year-to-Date > \$ 613.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BARBARA J. SCHWARTZ 246 N. KENTER AVE LOS ANGELES, CA 90049	FRED SANDS REALTORS	11/6/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE BROKER	Aggregate Year-to-Date > \$ 215.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LORETTA H. SKINE 5301 ALDEA AVE ENCINO, CA 91316	N/A	10/29/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 237.-	

SUBTOTAL of Receipts This Page (optional)

1,290.-

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 5
FOR LINE NUMBER 11 (9)(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)

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
RITA SINDER 15925 HIGH KNOLL ROAD ENCINO, CA 91436	JASIN CO.	11/6/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE BROKER	Aggregate Year-to-Date > \$ 1,069.-	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RENA SLOMOVIC 506 N. REXFORD DRIVE BEVERLY HILLS, CA 90210	J.S.I.	10/26/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation REAL ESTATE BROKER	Aggregate Year-to-Date > \$ 1,037.-	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BARBARA SOMMERS 723 N FOOTHILL ROAD BEVERLY HILLS, CA 90210	N/A	10/29/98	15.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 237.-	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RUTH STEELE 3949 LONG RIDGE SHERMAN OAKS, CA 91423	N/A	11/10/98	200.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 244.-	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MAXINE STERN 1494 MORAGA DRIVE LOS ANGELES, CA 90049	ML STERN & CO	10/26/98 11/18/98	125.- 100.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation INVESTOR	Aggregate Year-to-Date > \$ 313.-	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROSE TOREN 265 S. MAPLE BEVERLY HILLS, CA 90212	N/A	10/29/98	30.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 252.-	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BARBARA WEINBERG 409 DRURY LANE BEVERLY HILLS, CA 90212	N/A	10/20/98	1,000.-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation HOMEMAKER	Aggregate Year-to-Date > \$ 1,000.-	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

7,230.-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 16

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 CAMPAIGN TO RE-ELECT HENRY WAXMAN 7204 RAYBURN HOUSE OFFICE BLDG INDEPENDENCE BLVD WASHINGTON DC 20515 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): CHECK #1720 RETURNED ADVICE	Name of Employer Occupation Aggregate Year-to-Date > \$ 2,000.-	Date (month, day, year)	Amount of Each Receipt this Period 2,000.-
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)

TOTAL This Period (last page this line number only)

2,000.-

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE / OF /
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)

WOMEN'S ALLIANCE FOR ISRAEL

A. Full Name, Mailing Address and ZIP Code FIRST CHARTER BANK 265 BEVERLY DRIVE BEVERLY HILLS, CA 90212 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 10/31/98	Amount of Each Receipt this Period 98.27
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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)

TOTAL This Period (last page this line number only)

98.27

SCHEDULE B

ITEMIZED DISBURSEMENTS

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	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)	10/16/98 CHECK #1087	471.97
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)	
TOTAL This Period (last page this line number only)	471.97

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CAMPAIGN TO ELECT LOY SNEARY 40 MELVIN DOW 9 GREENWAY PLAZA, SUITE 2300 HOUSTON, TEXAS 77046	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/98 CHECK # 1486	1,000.-
CAMPAIGN TO ELECT GARY MILLER 721 SOUTH BREA CANYON ROAD #7 DIAMOND BAR, CA 91789	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/98 CHECK # 1488	1,000.-
CAMPAIGN TO RE-ELECT KIT BOND THE HONORABLE CHRISTOPHER "KIT" BOND 308 EAST HIGH STREET JEFFERSON, MO 65101	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/98 CHECK # 1489	2,500.-
CAMPAIGN TO RE-ELECT HOWARD BERMAN 10300 SEPULVEDA BLVD MISSION HILLS, CA 91345	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/98 CHECK # 1490	2,000.-
CAMPAIGN TO ELECT MARY BOND US HOUSE OF REPRESENTATIVES 324 CANNON HOUSE OFFICE BLDG 1ST INDEPENDENCE AVE SE WASHINGTON, DC 20515	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/98 CHECK # 1491	1,000.-
COMMITTEE TO RE-ELECT JAMES ROBIN THE HONORABLE JAMES E. ROBIN US HOUSE OF REPRESENTATIVES 502 CANNON HOUSE OFFICE BLDG. 1ST INDEPENDENCE, SE WASHINGTON, DC 20515	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/98 CHECK # 1493	2,500.-
COMMITTEE TO RE-ELECT DAVID DREIER THE HONORABLE DAVID DREIER US HOUSE OF REPRESENTATIVES 237 CANNON HOUSE OFFICE BLDG 1ST INDEPENDENCE SE WASHINGTON, DC 20515	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/98 CHECK # 1494	2,500.-
ASSEMBLY WOMAN GRACE NAPOLITANO FOR CONGRESS P.O. BOX 408 NORWALK, CA 90650	CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98 CHECK # 1495	500
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)

TOTAL This Period (last page this line number only)

13,000.-

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 12/2/98
<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	
 KRS	 12/5/98
PREPARER	DATE PREPARED