

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
 Voters For Choice Friends of Family Planning

ADDRESS (number and street) **1115 Massachusetts Ave**
NW
 Check if different than previously reported. (ACC) **Washington DC 20005**

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIP CODE

C00109355 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 20 (M3)	<input checked="" type="checkbox"/> Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report(Q1)		Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (M13)
July 15 Quarterly Report(Q2)	(c) 12-Day PRE-Election Report for the:		Primary (12P)	General (12G)	Runoff (12R)
October 15 Quarterly Report(Q3)			Convention (12C)	Special (12S)	
January 31 Quarterly Report(YE)		Election on			in the State of
July 31 Mid-Year Report(Non-election Year Only) (MY)	(d) 30-Day Post -Election Report for the:		General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)		Election on			in the State of

5. Covering Period 05 01 2002 through 05 31 2002

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 Maureen Britell

Signature of Treasurer Electronically Filed by Maureen Britell Date 05 20 2002

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name
Voters For Choice Friends of Family Planning

Report Covering the Period: From: ^{Month} 05 ^{Day} 01 ^{Year} 2002 To: ^{Month} 05 ^{Day} 31 ^{Year} 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^{Year} 2002		28572.10
(b) Cash on Hand at Beginning of Reporting Period	-2033.26	
(c) Total Receipts (from Line 19)	57858.82	164322.83
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	55825.56	192894.93
7. Total Disbursements (from Line 30)	48247.11	185316.48
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7578.45	7578.45
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)	13000.00	

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

Voters For Choice Friends of Family Planning

Report Covering the Period: From: ^{Month} 05 ^{Day} 01 ^{Year} 2002 To: ^{Month} 05 ^{Day} 31 ^{Year} 2002

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)	45755.44	
(ii) Unitemized	12103.38	
(iii) TOTAL (add Lines 11(a)(i) and (ii)	57858.82	145794.23
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	4160.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 32, page 4)	57858.82	149954.23
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	13000.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	1368.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	57858.82	164322.83
20. Total Federal Receipts (subtract Line 18 from Line 19)	57858.82	164322.83

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	39472.11	163291.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	39472.11	163291.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... ▶	0.00	250.00
29. Other Disbursements.....	8775.00	21775.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)..... ▶	48247.11	185316.48
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)..... ▶	48247.11	185316.48
<hr/>		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3).....	57858.82	149954.23
33. Total Contribution Refunds (from Line 28(d)).....	0.00	250.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32).....	57858.82	149704.23
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ▶	39472.11	163291.48
36. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	1368.60
37. Net Operating Expenditures (subtract Line 36 from Line 35)..... ▶	39472.11	161922.88

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 5 / 45

11a 11b 11c 12
 13 14 15 16 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)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)

A.

Mailing Address
Po Box 727
City State Zip Code
Memphis TN 38194

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 2

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period 1412.72

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 1412.72
Other

Transaction ID: SA11A1.8683

Full Name (Last, First, Middle Initial)

B.

Mailing Address
Po Box 727
City State Zip Code
Memphis TN 38194

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 0 2

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period 1500.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 2912.72
Other

Transaction ID: SA11A1.8728

Full Name (Last, First, Middle Initial)

C.

Mailing Address
Po Box 727
City State Zip Code
Memphis TN 38194

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 4 / 2 0 0 2

FEC ID number of contributing federal political committee. Amount of Each Receipt this Period 7000.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 9912.72
Other

Transaction ID: SA11A1.8682

SUBTOTAL of Receipts This Page (optional) ▶ **9912.72**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 45

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. Deborah Barile
Mailing Address requested
City State Zip Code

Date of Receipt
M M / D D / Y Y Y Y
05 / 27 / 2002

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.8838

Full Name (Last, First, Middle Initial)
B. Prudence Beidler
Mailing Address
20 S. Stone Gate Rd.
City State Zip Code
Lake Forest IL 60045

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2002

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 300.00

Transaction ID: SA11A1.8843

Full Name (Last, First, Middle Initial)
C. Sonya Burgher
Mailing Address
1120 Park Ave
City State Zip Code
Rochester NY 14610

Date of Receipt
M M / D D / Y Y Y Y
05 / 10 / 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Retired

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8863

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 7 / 45

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. Mark Cappello
Mailing Address requested
City State Zip Code

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 3 / 2 0 0 2

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.8850

Full Name (Last, First, Middle Initial)
B. Leslie Carey
Mailing Address
City State Zip Code

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 2

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 250.00
Other

Transaction ID: SA11A1.8731

Full Name (Last, First, Middle Initial)
C. Leslie Carey
Mailing Address
City State Zip Code

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 4 / 2 0 0 2

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8710

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
William Carroll

Mailing Address
5333 S. 7th Ave

City State Zip Code
La Grange IL 60525

Date of Receipt
 M / D / Y Y Y Y
05 15 2002

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
U. Chicago Chemist

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **300.00**

Transaction ID: **SA11A1.8805**

B. Full Name (Last, First, Middle Initial)
Daniel Casey

Mailing Address
requested

City State Zip Code

Date of Receipt
 M / D / Y Y Y Y
05 28 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **500.00**

Transaction ID: **SA11A1.8841**

C. Full Name (Last, First, Middle Initial)
Gwen Chapik

Mailing Address
2400 Lakeview Dr

City State Zip Code
Chicago IL 60614

Date of Receipt
 M / D / Y Y Y Y
05 22 2002

Amount of Each Receipt this Period
450.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 X Other (specify) ▼ **600.00**
 Other

Transaction ID: **SA11A1.8884**

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. Franz Deskal

Mailing Address
189 E Lake Shore Dr Apt 4E

City State Zip Code
Chicago IL 60611

Date of Receipt
 M / D / Y Y Y Y
05 28 2002

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **300.00**

Amount of Each Receipt this Period
300.00

Transaction ID: **SA11A1.8840**

Full Name (Last, First, Middle Initial)
B. Sandra Barman Epstein

Mailing Address
1430 N Lake Shore Drive 20th Floor

City State Zip Code
Chicago IL 60610

Date of Receipt
 M / D / Y Y Y Y
05 08 2002

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Retired

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **300.00**
 Other

Amount of Each Receipt this Period
300.00

Transaction ID: **SA11A1.8402**

Full Name (Last, First, Middle Initial)
C. Sandra Barman Epstein

Mailing Address
1430 N Lake Shore Drive 20th Floor

City State Zip Code
Chicago IL 60610

Date of Receipt
 M / D / Y Y Y Y
05 08 2002

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Retired

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ **600.00**
 Other

Amount of Each Receipt this Period
300.00

Transaction ID: **SA11A1.8722**

SUBTOTAL of Receipts This Page (optional) ▶ **900.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 / 45	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. Sandra L Erant

Mailing Address
 1893 Crescent Ct

City State Zip Code
 Highland Park IL 60035

Date of Receipt
 N M / D E / Y Y Y Y
 05 21 2002

Amount of Each Receipt this Period
 1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Other

Transaction ID: SA11A1.8404

Full Name (Last, First, Middle Initial)
B. Sandra L Erant

Mailing Address
 1893 Crescent Ct

City State Zip Code
 Highland Park IL 60035

Date of Receipt
 N M / D E / Y Y Y Y
 05 21 2002

Amount of Each Receipt this Period
 1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
 Other

Transaction ID: SA11A1.8713

Full Name (Last, First, Middle Initial)
C. Charlotte Flynn

Mailing Address
 7710 W Rim Dr

City State Zip Code
 Austin TX 78731

Date of Receipt
 N M / D E / Y Y Y Y
 05 13 2002

Amount of Each Receipt this Period
 100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
 Requested

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
 Other

Transaction ID: SA11A1.8581

SUBTOTAL of Receipts This Page (optional) ▶ **2100.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 45

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
Jan Fox
Mailing Address
City State Zip Code
Date of Receipt
M / D / Y
05 / 25 / 2002
Amount of Each Receipt this Period
750.00
FEC ID number of contributing federal political committee.
Name of Employer Occupation
Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 750.00
Other
Transaction ID: SA11A1.8732

B. Full Name (Last, First, Middle Initial)
Jan Fox
Mailing Address
City State Zip Code
Date of Receipt
M / D / Y
05 / 28 / 2002
Amount of Each Receipt this Period
750.00
FEC ID number of contributing federal political committee.
Name of Employer Occupation
Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 1500.00
Other
Transaction ID: SA11A1.8708

C. Full Name (Last, First, Middle Initial)
Greta Franz-Eby
Mailing Address
City State Zip Code
Date of Receipt
M / D / Y
05 / 06 / 2002
Amount of Each Receipt this Period
250.00
FEC ID number of contributing federal political committee.
Name of Employer Occupation
Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 250.00
Other
Transaction ID: SA11A1.8698

SUBTOTAL of Receipts This Page (optional) ▶ **1750.00**
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
Sheila Gahn

Mailing Address requested
City State Zip Code

Date of Receipt
M / D / Y Y Y Y
05 / 14 / 2002

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 300.00

Transaction ID: SA11A1.8829

B. Full Name (Last, First, Middle Initial)
Judith Guajardo

Mailing Address requested
City State Zip Code

Date of Receipt
M / D / Y Y Y Y
05 / 10 / 2002

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.8825

C. Full Name (Last, First, Middle Initial)
Charles Heber

Mailing Address
15 Encina Dr
City State Zip Code
Carmel Valley CA 93924

Date of Receipt
M / D / Y Y Y Y
05 / 14 / 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Retired

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8518

SUBTOTAL of Receipts This Page (optional) ▶ **1050.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 45

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial) John Harris Date of Receipt
Mailing Address 2035 Twinbrook Rd N M / D E / Y Y Y Y
05 10 2002
City Berwyn State PA Zip Code 19312 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 2000.00
Name of Employer Self Self Occupation Philanthropist
Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ Other 2000.00
Transaction ID: SA11A1.8582

B. Full Name (Last, First, Middle Initial) Lawia Harris Date of Receipt
Mailing Address 2035 Twinbrook Rd N M / D E / Y Y Y Y
05 31 2002
City Berwyn State PA Zip Code 19312 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 2500.00
Name of Employer Self Self Occupation Housewife
Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ Other 2500.00
Transaction ID: SA11A1.8514

C. Full Name (Last, First, Middle Initial) Fay Hartog-Lavin Date of Receipt
Mailing Address N M / D E / Y Y Y Y
05 22 2002
City State Zip Code Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. 250.00
Name of Employer Occupation
Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 250.00
Transaction ID: SA11A1.8712

SUBTOTAL of Receipts This Page (optional) ▶ **4750.00**
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
Marshal Hicks

Mailing Address

City _____ State _____ Zip Code _____

Date of Receipt
 N M / D E / Y Y Y Y
 0 5 / 2 1 / 2 0 0 2

Amount of Each Receipt this Period
 250.00

FEC ID number of contributing federal political committee.

Name of Employer _____ Occupation _____

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Other

Transaction ID: SA11A1.8715

B. Full Name (Last, First, Middle Initial)
Marshal Hicks

Mailing Address
311 N.E. 31st Street

City _____ State _____ Zip Code _____
Grand Prairie TX 75050

Date of Receipt
 N M / D E / Y Y Y Y
 0 5 / 2 1 / 2 0 0 2

Amount of Each Receipt this Period
 250.00

FEC ID number of contributing federal political committee.

Name of Employer _____ Occupation _____

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Other

Transaction ID: SA11A1.8729

C. Full Name (Last, First, Middle Initial)
Marshal Holleb

Mailing Address
requested

City _____ State _____ Zip Code _____

Date of Receipt
 N M / D E / Y Y Y Y
 0 5 / 1 0 / 2 0 0 2

Amount of Each Receipt this Period
 300.00

FEC ID number of contributing federal political committee.

Name of Employer _____ Occupation _____

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00

Transaction ID: SA11A1.8827

SUBTOTAL of Receipts This Page (optional) ▶ **800.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 45

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial) Leslie Jaffee Date of Receipt
 Mailing Address 572 Drexel N M / D E / Y Y Y Y
05 15 2002
 City Glencoe State IL Zip Code 60022 Amount of Each Receipt this Period
 FEC ID number of contributing federal political committee. 500.00
 Name of Employer _____ Occupation _____
 Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Other _____ Transaction ID: SA11A1.8410

B. Full Name (Last, First, Middle Initial) Leslie Jaffee Date of Receipt
 Mailing Address 572 Drexel N M / D E / Y Y Y Y
05 15 2002
 City Glencoe State IL Zip Code 60022 Amount of Each Receipt this Period
 FEC ID number of contributing federal political committee. 500.00
 Name of Employer _____ Occupation _____
 Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Other _____ Transaction ID: SA11A1.8721

C. Full Name (Last, First, Middle Initial) Andrea Joselt Date of Receipt
 Mailing Address requested N M / D E / Y Y Y Y
05 17 2002
 City _____ State _____ Zip Code _____ Amount of Each Receipt this Period
 FEC ID number of contributing federal political committee. 300.00
 Name of Employer _____ Occupation _____
 Receipt For: _____ Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00 Transaction ID: SA11A1.8834

SUBTOTAL of Receipts This Page (optional) ► **1300.00**
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 45

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)

A. Kenneth Kaiher

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
05 / 21 / 2002

PSC 303 Box 40 (OSA)

City State Zip Code

APD AP CA 96204

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 100.00

Name of Employer Occupation
United Nations Cmd. Research Analyst

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General

X Other (specify) ▼ 225.00

Other

Transaction ID: SA11A1.8486

Full Name (Last, First, Middle Initial)

B. HILARY LANGFORD

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
05 / 07 / 2002

3000 WEST GRACE STREET #301

City State Zip Code

RICHMOND VA 23221

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 500.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General

X Other (specify) ▼ 500.00

Other

Transaction ID: SA11A1.8871

Full Name (Last, First, Middle Initial)

C. Eleanor Lewis

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
05 / 23 / 2002

822 W 40th St

City State Zip Code

Baltimore MD 21211

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 500.00

Name of Employer Occupation
Self Philanthropist

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General

X Other (specify) ▼ 500.00

Other

Transaction ID: SA11A1.8603

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 / 45

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. Marion Lloyd

Mailing Address
25080 St Marys Rd

City State Zip Code
Libertyville IL 60048

Date of Receipt
M M / D D / Y Y Y Y
05 / 23 / 2002

Amount of Each Receipt this Period
200.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 400.00
Other

Transaction ID: SA11A1.8701

Full Name (Last, First, Middle Initial)
B. Jennifer Lyman

Mailing Address
3940 Morrison St. N.W.

City State Zip Code
Washington DC 20015

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8690

Full Name (Last, First, Middle Initial)
C. Jennifer Lyman

Mailing Address
3940 Morrison St. N.W.

City State Zip Code
Washington DC 20015

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 1000.00
Other

Transaction ID: SA11A1.8691

SUBTOTAL of Receipts This Page (optional) ▶ **1200.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. James Maleckowski

Mailing Address requested
 City State Zip Code

Date of Receipt
 N M / D E / Y Y Y Y
 0 5 / 0 3 / 2 0 0 2

Amount of Each Receipt this Period
 500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Transaction ID: SA11A1.8848

Full Name (Last, First, Middle Initial)
B. Peter Malkin

Mailing Address
 City State Zip Code

Date of Receipt
 N M / D E / Y Y Y Y
 0 5 / 0 7 / 2 0 0 2

Amount of Each Receipt this Period
 1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 X Other (specify) ▼ 1000.00
 Other

Transaction ID: SA11A1.8415

Full Name (Last, First, Middle Initial)
C. Peter Malkin

Mailing Address
 City State Zip Code

Date of Receipt
 N M / D E / Y Y Y Y
 0 5 / 0 7 / 2 0 0 2

Amount of Each Receipt this Period
 1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Transaction ID: SA11A1.8800

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 45

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. Alison Mathews

Mailing Address _____

City State Zip Code _____

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 7 / 2 0 0 2

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee. _____

Name of Employer _____ Occupation _____

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8733

Full Name (Last, First, Middle Initial)
B. Alison Mathews

Mailing Address _____

City State Zip Code _____

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 0 2

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee. _____

Name of Employer _____ Occupation _____

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 1000.00
Other

Transaction ID: SA11A1.8708

Full Name (Last, First, Middle Initial)
C. Maya Miller

Mailing Address
6185 Franktown Rd

City State Zip Code
Carson City NV 89704

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 0 2

Amount of Each Receipt this Period
2000.00

FEC ID number of contributing federal political committee. _____

Name of Employer
Self Occupation
Philanthropist

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 2000.00
Other

Transaction ID: SA11A1.8474

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 20 / 45

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
Dorothy Moran

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2002

Mailing Address
610 Wharton Dr.

City State Zip Code
Lake Forest IL 60045

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 250.00
Other

Transaction ID: SA11A1.8687

B. Full Name (Last, First, Middle Initial)
Dorothy Moran

Date of Receipt
M M / D D / Y Y Y Y
05 / 07 / 2002

Mailing Address
610 Wharton Dr.

City State Zip Code
Lake Forest IL 60045

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8688

C. Full Name (Last, First, Middle Initial)
Barbara Moxon

Date of Receipt
M M / D D / Y Y Y Y
05 / 15 / 2002

Mailing Address
31 Joseph Walker Dr

City State Zip Code
West Columbia SC 29169

Amount of Each Receipt this Period
100.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
None Retired

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 300.00
Other

Transaction ID: SA11A1.8636

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 / 45

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)

A. Kathleen Nickles

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 5 / 0 6 / 2 0 0 2

City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 250.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General 250.00

Other (specify) ▼
Other

Transaction ID: SA11A1.8700

Full Name (Last, First, Middle Initial)

B. Gail Odgers

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 5 / 2 0 / 2 0 0 2

28 Eugene St

City State Zip Code

Mill Valley CA 94941

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 500.00

Name of Employer Occupation

Requested

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General 1000.00

Other (specify) ▼
Other

Transaction ID: SA11A1.8807

Full Name (Last, First, Middle Initial)

C. Paul Popenoe

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 5 / 2 0 / 2 0 0 2

776 Tanglewood Dr

City State Zip Code

Lafayette CA 94549

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 500.00

Name of Employer Occupation

Retired Electrical Engi

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General 500.00

Other (specify) ▼
Other

Transaction ID: SA11A1.8480

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Katherine Rayner Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 11 E 76th St 0 5 / 1 3 / 2 0 0 2

City State Zip Code
 New York NY 10021 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 1000.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Other

Transaction ID: SA11A1.8681

B. Joyce Ride Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 1249 N Holliston Ave 0 5 / 0 1 / 2 0 0 2

City State Zip Code
 Pasadena CA 91104 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 1412.72

Name of Employer Occupation
 none Retired

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1412.72

Transaction ID: SA11A1.8624

C. Joyce Ride Date of Receipt

Mailing Address N M / D E / Y Y Y Y
 1249 N Holliston Ave 0 5 / 1 3 / 2 0 0 2

City State Zip Code
 Pasadena CA 91104 Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 25.00

Name of Employer Occupation
 none Retired

Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1437.72
 Other

Transaction ID: SA11A1.8615

SUBTOTAL of Receipts This Page (optional) ▶ **2437.72**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
 Bonnie Rothman
 Mailing Address requested
 City State Zip Code
 Date of Receipt
 05 20 2002
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee.
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 500.00
 Transaction ID: SA11A1.8844

B. Full Name (Last, First, Middle Initial)
 Joyce Schor Tlee
 Mailing Address
 3813 Meadville Dr.
 City State Zip Code
 Sherman Oaks CA 91403
 Date of Receipt
 05 15 2002
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee.
 Name of Employer Occupation
 Receipt For: 2002 Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 X Other (specify) ▼ Other 250.00
 Transaction ID: SA11A1.8869

C. Full Name (Last, First, Middle Initial)
 Neal Sheldon
 Mailing Address
 3701 S George Mason Dr APT 2009N
 City State Zip Code
 Falls Church VA 22041
 Date of Receipt
 05 20 2002
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee.
 Name of Employer Occupation
 retired
 Receipt For: 2002 Primary General Other (specify) ▼ Aggregate Year-to-Date ▼
 X Other (specify) ▼ Other 1000.00
 Transaction ID: SA11A1.8570

SUBTOTAL of Receipts This Page (optional) ▶ **1750.00**
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 45

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
Clyde Shorey

Date of Receipt
M M / D D / Y Y Y Y
05 / 21 / 2002

Mailing Address
3033 W Lane Ky Nw

City State Zip Code
Washington DC 20007

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Ref'd

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8544

B. Full Name (Last, First, Middle Initial)
Clyde Shorey

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2002

Mailing Address
3033 W Lane Ky Nw

City State Zip Code
Washington DC 20007

Amount of Each Receipt this Period
5.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation Ref'd

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 505.00

Transaction ID: SA11A1.8813

C. Full Name (Last, First, Middle Initial)
Dantea Starlee

Date of Receipt
M M / D D / Y Y Y Y
05 / 18 / 2002

Mailing Address
900 N Frankin Suite 406

City State Zip Code
Chicago IL 60610

Amount of Each Receipt this Period
250.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 250.00

Transaction ID: SA11A1.8833

SUBTOTAL of Receipts This Page (optional) ▶ **755.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
Cathy Stein

Mailing Address requested
City State Zip Code

Date of Receipt
M / D / Y Y Y Y
05 / 03 / 2002

Amount of Each Receipt this Period
800.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 800.00

Transaction ID: SA11A1.8852

B. Full Name (Last, First, Middle Initial)
J. Stratton

Mailing Address
5100 Sharon Rd
City State Zip Code
Charlotte NC 28210

Date of Receipt
M / D / Y Y Y Y
05 / 28 / 2002

Amount of Each Receipt this Period
300.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Retired Physician

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 300.00
Other

Transaction ID: SA11A1.8452

C. Full Name (Last, First, Middle Initial)
Stephen Tabb

Mailing Address
460 E 79th St APT 10B
City State Zip Code
New York NY 10021

Date of Receipt
M / D / Y Y Y Y
05 / 07 / 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Tabb and Co. P.C. Requested

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
X Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8523

SUBTOTAL of Receipts This Page (optional) ▶ **1400.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
 Rebecca Tye
 Mailing Address

 City State Zip Code

 Date of Receipt
 M / D / Y Y Y Y
 05 / 20 / 2002
 Amount of Each Receipt this Period

 FEC ID number of contributing federal political committee.

 250.00
 Name of Employer Occupation

 Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Other
 Transaction ID: SA11A1.8704

B. Full Name (Last, First, Middle Initial)
 Rebecca Tye
 Mailing Address

 City State Zip Code

 Date of Receipt
 M / D / Y Y Y Y
 05 / 20 / 2002
 Amount of Each Receipt this Period

 FEC ID number of contributing federal political committee.

 250.00
 Name of Employer Occupation

 Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Other
 Transaction ID: SA11A1.8727

C. Full Name (Last, First, Middle Initial)
 Rebecca Tye
 Mailing Address

 City State Zip Code

 Date of Receipt
 M / D / Y Y Y Y
 05 / 21 / 2002
 Amount of Each Receipt this Period

 FEC ID number of contributing federal political committee.

 250.00
 Name of Employer Occupation

 Receipt For: 2002 Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00
 Other
 Transaction ID: SA11A1.8730

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**
TOTAL This Period (last page this line number only) ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 27 / 45

(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)

A. Rebecca Tye

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 5 / 2 8 / 2 0 0 2

City State Zip Code

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 250.00

Name of Employer Occupation

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General

X Other (specify) ▼ 1000.00

Other

Transaction ID: SA11A1.8703

Full Name (Last, First, Middle Initial)

B. Alicia Warren

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 5 / 1 0 / 2 0 0 2

2122 Bridgeport Way W

City State Zip Code

Tacoma WA 98466

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 500.00

Name of Employer Occupation

Tacoma Public School School Social Worker

Receipt For: Aggregate Year-to-Date ▼

Primary General

Other (specify) ▼ 600.00

Transaction ID: SA11A1.8808

Full Name (Last, First, Middle Initial)

C. Alicia Warren

Date of Receipt

Mailing Address

N M / D E / Y Y Y Y
0 5 / 2 0 / 2 0 0 2

2122 Bridgeport Way W

City State Zip Code

Tacoma WA 98466

Amount of Each Receipt this Period

FEC ID number of contributing federal political committee. 100.00

Name of Employer Occupation

Tacoma Public School School Social Worker

Receipt For: 2002 Aggregate Year-to-Date ▼

Primary General

X Other (specify) ▼ 700.00

Other

Transaction ID: SA11A1.8487

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 45

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name (Last, First, Middle Initial)
Robert West

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 0 2

Mailing Address
305 Nautilus Dr

City State Zip Code
Madison WI 53705

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Univ. of Wisconsin Professor

Receipt For: 2002 Aggregate Year-to-Date ▼
Primary General
 Other (specify) ▼ 500.00
Other

Transaction ID: SA11A1.8458

B. Full Name (Last, First, Middle Initial)
Julie Wilen

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 0 / 2 0 0 2

Mailing Address
requested

City State Zip Code

Amount of Each Receipt this Period
750.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 750.00

Transaction ID: SA11A1.8836

C. Full Name (Last, First, Middle Initial)
Dina Wilner

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 3 / 2 0 0 2

Mailing Address
115 Vreeland Ct

City State Zip Code
Mahwah NJ 07430

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation
Requested

Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 1010.00

Transaction ID: SA11A1.8823

SUBTOTAL of Receipts This Page (optional) ▶ **2250.00**

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 / 45	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial)
A. John Zuska

Mailing Address requested
City State Zip Code

Date of Receipt
M M / D D / Y Y Y Y
05 / 30 / 2002

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼
Primary General Other (specify) ▼ 500.00

Transaction ID: SA11A1.8846

B.

C.

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	45755.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 30 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. A & G Properties		Date of Disbursement 05 / 02 / 2002
Mailing Address 1115 Mass Ave City Washington State DC Zip Code 20005		Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Rent		Transaction ID: SB21B.8741
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. A & G Properties		Date of Disbursement 05 / 13 / 2002
Mailing Address 1115 Mass Ave City Washington State DC Zip Code 20005		Amount of Each Disbursement this Period 29.40
Purpose of Disbursement office repair		Transaction ID: SB21B.8772
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. AJ Goodman		Date of Disbursement 05 / 10 / 2002
Mailing Address 1718 M ST City Washington State DC Zip Code 20036		Amount of Each Disbursement this Period 3000.00
Purpose of Disbursement consultant		Transaction ID: SB21B.8768
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	5529.40
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 31 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement 05 / 13 / 2002
Mailing Address		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement travel		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8789
State: District:		

Full Name (Last, First, Middle Initial) B. American Express		Date of Disbursement 05 / 23 / 2002
Mailing Address		Amount of Each Disbursement this Period 657.09
City	State Zip Code	
Purpose of Disbursement travel		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8780
State: District:		

Full Name (Last, First, Middle Initial) C. Amy Drayer		Date of Disbursement 05 / 03 / 2002
Mailing Address		Amount of Each Disbursement this Period 983.38
City	State Zip Code	
Purpose of Disbursement salary		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8748
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2640.47
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Army Drayer		Date of Disbursement 05 / 17 / 2002
Mailing Address		Amount of Each Disbursement this Period 983.38
City	State Zip Code	
Purpose of Disbursement salary		Transaction ID: SB21B.8778
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Bank Of America		Date of Disbursement 05 / 02 / 2002
Mailing Address		Amount of Each Disbursement this Period 11.50
City	State Zip Code	
Purpose of Disbursement		Transaction ID: SB21B.8740
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Bank Of America		Date of Disbursement 05 / 10 / 2002
Mailing Address		Amount of Each Disbursement this Period 30.00
City	State Zip Code	
Purpose of Disbursement		Transaction ID: SB21B.8757
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1024.88
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Bank Of America		Date of Disbursement 05 / 22 / 2002
Mailing Address		Amount of Each Disbursement this Period 80.00
City	State Zip Code	
Purpose of Disbursement		Transaction ID: SB21B.8779
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Bank Of America		Date of Disbursement 05 / 31 / 2002
Mailing Address		Amount of Each Disbursement this Period 14.47
City	State Zip Code	
Purpose of Disbursement service fee		Transaction ID: SB21B.8787
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Cantrell Cutter		Date of Disbursement 05 / 01 / 2002
Mailing Address		Amount of Each Disbursement this Period 74.03
City	State Zip Code	
Purpose of Disbursement printing		Transaction ID: SB21B.8788
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	148.50
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 34 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Comcast		Date of Disbursement 05 / 10 / 2002
Mailing Address		Amount of Each Disbursement this Period 138.43
City	State Zip Code	
Purpose of Disbursement Utilities		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8780
State: District:		

Full Name (Last, First, Middle Initial) B. Dorka Keehn		Date of Disbursement 05 / 10 / 2002
Mailing Address		Amount of Each Disbursement this Period 714.80
City	State Zip Code	
Purpose of Disbursement consultant		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8786
State: District:		

Full Name (Last, First, Middle Initial) C. Eileen Canali		Date of Disbursement 05 / 03 / 2002
Mailing Address		Amount of Each Disbursement this Period 405.00
City	State Zip Code	
Purpose of Disbursement salary		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8745
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1258.33
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 35 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Eileen Canali		Date of Disbursement 05 / 17 / 2002
Mailing Address		Amount of Each Disbursement this Period 479.80
City	State Zip Code	
Purpose of Disbursement salary		Transaction ID: SB21B.8777
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Grove & Quirk		Date of Disbursement 05 / 29 / 2002
Mailing Address		Amount of Each Disbursement this Period 3051.82
City	State Zip Code	
Purpose of Disbursement consultant		Transaction ID: SB21B.8782
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Julie Burton		Date of Disbursement 05 / 28 / 2002
Mailing Address		Amount of Each Disbursement this Period 388.50
City	State Zip Code	
Purpose of Disbursement travel		Transaction ID: SB21B.8784
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	3917.72
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Kaiser		Date of Disbursement 05 / 06 / 2002
Mailing Address		Amount of Each Disbursement this Period 413.84
City	State Zip Code	
Purpose of Disbursement Health Insurance		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8750
State: District:		

Full Name (Last, First, Middle Initial) B. Kirk Whitney		Date of Disbursement 05 / 10 / 2002
Mailing Address		Amount of Each Disbursement this Period 80.00
City	State Zip Code	
Purpose of Disbursement postage for mailer		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8767
State: District:		

Full Name (Last, First, Middle Initial) C. Nextel		Date of Disbursement 05 / 10 / 2002
Mailing Address		Amount of Each Disbursement this Period 128.11
City	State Zip Code	
Purpose of Disbursement phones		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8763
State: District:		

SUBTOTAL of Disbursements This Page (optional)	599.75
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 37 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Nova Systems		Date of Disbursement 05 / 06 / 2002
Mailing Address		Amount of Each Disbursement this Period 288.88
City	State Zip Code	
Purpose of Disbursement bank service fees		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8748
State: District:		

Full Name (Last, First, Middle Initial) B. Nova Systems		Date of Disbursement 05 / 15 / 2002
Mailing Address		Amount of Each Disbursement this Period 225.00
City	State Zip Code	
Purpose of Disbursement bank service fee		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8773
State: District:		

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement 05 / 01 / 2002
Mailing Address 3080 Williams Dr #300		Amount of Each Disbursement this Period 3878.92
City Fairfax	State Zip Code VA 22031	
Purpose of Disbursement salary		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8739
State: District:		

SUBTOTAL of Disbursements This Page (optional)	4368.80
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 38 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement 05 / 02 / 2002
Mailing Address 3060 Williams Dr #300 City State Zip Code Fairfax VA 22031		Amount of Each Disbursement this Period 2581.62
Purpose of Disbursement payroll taxes		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8742
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement 05 / 10 / 2002
Mailing Address 3060 Williams Dr #300 City State Zip Code Fairfax VA 22031		Amount of Each Disbursement this Period 128.37
Purpose of Disbursement payroll service		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8756
State: District:		

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement 05 / 16 / 2002
Mailing Address 3060 Williams Dr #300 City State Zip Code Fairfax VA 22031		Amount of Each Disbursement this Period 3578.82
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8774
State: District:		

SUBTOTAL of Disbursements This Page (optional)	6564.81
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 39 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement 05 / 17 / 2002
Mailing Address 3060 Williams Dr #300 City State Zip Code Fairfax VA 22031		Amount of Each Disbursement this Period 2582.20
Purpose of Disbursement payroll taxes		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8776
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement 05 / 30 / 2002
Mailing Address 3060 Williams Dr #300 City State Zip Code Fairfax VA 22031		Amount of Each Disbursement this Period 3876.92
Purpose of Disbursement payroll		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8785
State: District:		

Full Name (Last, First, Middle Initial) C. Paychex		Date of Disbursement 05 / 30 / 2002
Mailing Address 3060 Williams Dr #300 City State Zip Code Fairfax VA 22031		Amount of Each Disbursement this Period 2607.18
Purpose of Disbursement payroll taxes		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8788
State: District:		

SUBTOTAL of Disbursements This Page (optional)	9066.28
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 40 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Petty Cash		Date of Disbursement 05 / 01 / 2002	
Mailing Address		Amount of Each Disbursement this Period 100.00	
City	State	Zip Code	
Purpose of Disbursement travel		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8737	
State:	District:		

Full Name (Last, First, Middle Initial) B. Petty Cash		Date of Disbursement 05 / 01 / 2002	
Mailing Address		Amount of Each Disbursement this Period 200.00	
City	State	Zip Code	
Purpose of Disbursement travel		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8758	
State:	District:		

Full Name (Last, First, Middle Initial) C. Postmaster		Date of Disbursement 05 / 01 / 2002	
Mailing Address		Amount of Each Disbursement this Period 121.32	
City	State	Zip Code	
Purpose of Disbursement postage		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8738	
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	421.32
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 41 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Sarah Benati		Date of Disbursement 05 / 03 / 2002
Mailing Address		Amount of Each Disbursement this Period 111.01
City	State Zip Code	
Purpose of Disbursement salary		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8744
State: District:		

Full Name (Last, First, Middle Initial) B. Sprint PCS		Date of Disbursement 05 / 10 / 2002
Mailing Address PO BOX 219718		Amount of Each Disbursement this Period 386.35
City	State Zip Code MO 64141	
Purpose of Disbursement phones		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8764
State: District:		

Full Name (Last, First, Middle Initial) C. Staples		Date of Disbursement 05 / 13 / 2002
Mailing Address		Amount of Each Disbursement this Period 373.79
City	State Zip Code	
Purpose of Disbursement office supplies		Category/ Type
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8771
State: District:		

SUBTOTAL of Disbursements This Page (optional)	871.15
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 42 / 45

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25
	26		27		28a		28b		28c
									29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Vandenberg Public Relation		Date of Disbursement 05 / 10 / 2002	
Mailing Address 1423 34th Ave City: Seattle State: WA Zip Code: 98122		Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement consultant		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8785	
State: District:			

Full Name (Last, First, Middle Initial) B. Verizon		Date of Disbursement 05 / 06 / 2002	
Mailing Address City: State: Zip Code:		Amount of Each Disbursement this Period 586.26	
Purpose of Disbursement phone		Category/ Type	
Candidate Name			
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Transaction ID: SB21B.8751	
State: District:			

C.

SUBTOTAL of Disbursements This Page (optional) ▶	2586.26
TOTAL This Period (last page this line number only) ▶	38997.67

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 43 / 45

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c
				<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

Full Name (Last, First, Middle Initial) A. Voters For Choice State & Local		Date of Disbursement 05 / 01 / 2002
Mailing Address		Amount of Each Disbursement this Period 5000.00
City	State Zip Code	
Purpose of Disbursement credit card sales		Transaction ID: SB29.8735
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Voters For Choice State & Local		Date of Disbursement 05 / 03 / 2002
Mailing Address		Amount of Each Disbursement this Period 2250.00
City	State Zip Code	
Purpose of Disbursement credit card sales		Transaction ID: SB29.8743
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Voters For Choice State & Local		Date of Disbursement 05 / 06 / 2002
Mailing Address		Amount of Each Disbursement this Period 1525.00
City	State Zip Code	
Purpose of Disbursement credit card sales		Transaction ID: SB29.8752
Candidate Name		
Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	▶	8775.00
TOTAL This Period (last page this line number only)	▶	8775.00

SCHEDULE C (FEC Form 3X)

LOANS

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

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)
 Voters For Choice Friends of Family Planning

LOAN SOURCE Full Name (Last, First, Middle Initial)
 Andrew Britell

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 04 2002		% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

Transaction ID: SC/10.8370

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	▶	10000.00
TOTALS This Period (last page in this line only)	▶	

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

LOANS

NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

LOAN SOURCE Full Name (Last, First, Middle Initial)
Andrew Britell

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address

City State ZIP Code

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
3000.00	0.00	3000.00

TERMS

Date Incurred: 04 09 2002
 Date Due: _____
 Interest Rate: _____ % (apr)
 Secured: Yes No

Transaction ID: SC/10.8373

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

Full Name (Last, First, Middle Initial) Name of Employer

Mailing Address Occupation

City State ZIP Code Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional) ▶ 3000.00

TOTALS This Period (last page in this line only) ▶ 13000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.