

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 9
10/26/2000 15 : 05

1. NAME OF COMMITTEE (in full) National Organization for Women PAC	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 733 15th Street, NW Second Floor	2. FEC IDENTIFICATION NUMBER C00092247
CITY, STATE, and ZIP CODE Washington DC 20005	3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly 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 |
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report Twelfth day report preceding General
- (election type)
- July 31 Mid-Year Report (Non-election Year Only) election on 11/07/2000 In the State of _____
- Termination report on _____ In the State of _____
- Thirtieth day report following the General Election
- (b) Is this Report an Amendment YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/01/2000</u> through <u>10/19/2000</u>		
6. (a) Cash on Hand, January 1, <u>2000</u>		121326.00
(b) Cash on Hand at Beginning of Reporting Period	110721.81	
(c) Total Receipts (from line 19)	22663.00	154201.44
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	133384.81	275529.44
7. Total Disbursements (from line 30)	4612.50	146757.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	128772.31	128772.31
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
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 Electronically Filed by Ms Karen Johnson		
Signature of Treasurer	Date 10/26/2000	

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

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FEC FORM 3X
(revised 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE National Organization for Women PAC	REPORT COVERING PERIOD		
	FROM 10/01/2000	TO: 10/19/2000	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	15550.00	55024.00	11.a.i.
ii. Unitemized	7113.00	98762.30	11.a.ii.
iii. Total	22663.00	153816.30	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	0.00	0.00	11.c.
d. Total Contributions	22663.00	153816.30	11.d.
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12.
13. All Loans Received	0.00	0.00	13.
14. Loan Repayments Received	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	365.14	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	22663.00	154201.44	19.
20. Total Federal Receipts	22663.00	154201.44	20.
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21.a.i.
ii. Non-Federal Share	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures	0.00	19738.81	21.b.
c. Total Operating Expenditures	0.00	19738.81	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	4812.50	120985.62	23.
24. Independent Expenditures (use Schedule E)	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made	0.00	0.00	26.
27. Loans Made	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28.a.
b. Political Party Committees	0.00	0.00	28.b.
c. Other Political Committees (such as PACs)	0.00	0.00	28.c.
d. Total Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	0.00	32.70	29.
30. Total Disbursements	4812.50	146757.13	30.
31. Total Federal Disbursements	4812.50	146757.13	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	22663.00	153816.30	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	22663.00	153816.30	34.
35. Total Federal Operating Expenditures	0.00	19738.81	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	0.00	19738.81	37.

SCHEDULE A	ITEMIZED RECEIPTS	3 / 9
		Use separate schedule(s) for each category of the Detailed Summary Page
		FOR LINE NUMBER 11A1

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)
National Organization for Women PAC

Full Name, Mailing Address, and ZIP Code Lucy Minor 325 Ravine Dr. Highland Park IL 60035 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Letter Sent Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/04/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Marcia Weber 138 West Hill Terrace Painted Post NY 14870 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Letter Sent Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 10/12/2000	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Elizabeth Peele 130 Oklahoma Ave. Oak Ridge TN 37830 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer U of Tenn./ Battelle Occupation Researcher Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/13/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Andrew Brainerd 812 W Deming Place Chicago IL 60614 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Letter Sent Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Barbara Bumim 6 Artichoke Terrace Newburyport MA 01950 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Applied Graphics Occupation Corporation Executive Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Paul Devido 63 Cresthill Ave. Clifton NJ 07012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Letter Sent Occupation Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ms. Patricia Jolicœur 25 Timber Ridge Road W. Springfield MA 01089 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 800.00	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 300.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 9
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name, Mailing Address, and ZIP Code Marton Kellogg 772 Brush Hill Rd. Stowe VT 05672	Name of Employer Self	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 500.00
	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Eileen McDonagh 153 Watson Rd. Belmont MA 02478	Name of Employer Northeastern University	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 5000.00
	Occupation Professor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 5000.00		
Full Name, Mailing Address, and ZIP Code Eugene Montgomery 3101 Boardwalk #1012-1 Atlantic City NJ 08401	Name of Employer Retired	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 2500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 2500.00		
Full Name, Mailing Address, and ZIP Code Carol Pittman 1585 York Ave. Apt. 29B New York NY 10021	Name of Employer Glenwood Management	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 1000.00
	Occupation Exec. VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Esther Leah Ritz 626 E. Kilbourn Ave. Apt. #2301 Milwaukee WI 53202	Name of Employer Retired	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Donna Simpson 24 Dryden Dr. Meriden CT 06450	Name of Employer State of CT	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 250.00
	Occupation Planner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Ann Stokes PO Box 84 West Chesterfield NH 03466	Name of Employer Self	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 250.00
	Occupation Painter and Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 250.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A		ITEMIZED RECEIPTS		5 / 9
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11A1
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) National Organization for Women PAC				
Full Name, Mailing Address, and ZIP Code Anna Zetterberg 924 Briar Wood Ct. Westchester PA 19380	Name of Employer Self	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Sculptor	Aggregate Year-to-Date > 5 1000.00		
Full Name, Mailing Address, and ZIP Code Ruth Ziegler 1018 Montego Dr. Los Angeles CA 90049	Name of Employer Letter Sent	Date (month, day, year) 10/17/2000	Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation	Aggregate Year-to-Date > 5 1000.00		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				15550.00

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	6 / 9 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) National Organization for Women PAC					
Full Name, Mailing Address, and ZIP Code Anne Ascher 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Clinton Sen NY (salary)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 228.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Anne Ascher 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind McCarthy NY-04 (salary)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 228.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Anne Ascher 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Clinton Sen NY (food)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 140.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Anne Ascher 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind McCarthy NY-04 (food)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 140.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Leigha Creehan 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Corzine Sen NJ (Salary)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 235.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Leigha Creehan 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Connolly NJ-07 (Salary)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 235.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Leigha Creehan 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Corzine Sen NJ (Transportation)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 17.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Leigha Creehan 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Connolly NJ-07 (Transportation)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 17.00		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
Full Name, Mailing Address, and ZIP Code Leigha Creehan 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Corzine Sen NJ (Food)	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 113.75		
Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="checkbox"/> Other (specify) :			
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE B ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	7 / 9 FOR LINE NUMBER 23
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NAME OF COMMITTEE (In Full) National Organization for Women PAC			
Full Name, Mailing Address, and ZIP Code Leigha Creehan 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Connolly NJ-07 (Food) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 113.75
Full Name, Mailing Address, and ZIP Code DC Rent-A-Wreck 910 M St. NW Washington DC 20001	Purpose of Disbursement In-kind Corzine Sen NJ (Transportation) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 49.00
Full Name, Mailing Address, and ZIP Code DC Rent-A-Wreck 910 M St. NW Washington DC 20001	Purpose of Disbursement In-kind Connolly NJ-07 (Transportation) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 49.00
Full Name, Mailing Address, and ZIP Code DC Rent-A-Wreck 910 M St. NW Washington DC 20001	Purpose of Disbursement In-kind Clinton Sen NY (Transportation) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 49.00
Full Name, Mailing Address, and ZIP Code DC Rent-A-Wreck 910 M St. NW Washington DC 20001	Purpose of Disbursement In-kind McCarthy NY-04 (Transportation) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 49.00
Full Name, Mailing Address, and ZIP Code DC Rent-A-Wreck 910 M St. NW Washington DC 20001	Purpose of Disbursement In-kind Stabenow Sen MI (Transportation) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 49.00
Full Name, Mailing Address, and ZIP Code DC Rent-A-Wreck 910 M St. NW Washington DC 20001	Purpose of Disbursement In-kind Byrum MI-08 (Transportation) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 49.00
Full Name, Mailing Address, and ZIP Code Lalifa Lyles 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Clinton Sen NY (Salary) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 324.00
Full Name, Mailing Address, and ZIP Code Lalifa Lyles 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind McCarthy NY-04 (Salary) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 324.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 9
			FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
National Organization for Women PAC

Full Name, Mailing Address, and ZIP Code Lalifa Lyles 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Clinton Sen NY (Food) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 122.50
Full Name, Mailing Address, and ZIP Code Lalifa Lyles 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind McCarthy NY-04 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 122.50
Full Name, Mailing Address, and ZIP Code Alpa Patel 211 E. Ohio #2522 Chicago IL 60611	Purpose of Disbursement In-kind Gash IL-10 (Salary) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 206.00
Full Name, Mailing Address, and ZIP Code Alpa Patel 211 E. Ohio #2522 Chicago IL 60611	Purpose of Disbursement In-kind Gash IL-10 (Food) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 112.00
Full Name, Mailing Address, and ZIP Code Alpa Patel 211 E. Ohio #2522 Chicago IL 60611	Purpose of Disbursement In-kind Gash (Transportation) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 74.00
Full Name, Mailing Address, and ZIP Code Sommer Spector 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Stabenow Sen MI (salary) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 314.00
Full Name, Mailing Address, and ZIP Code Sommer Spector 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Byrum MI-08 (salary) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 314.00
Full Name, Mailing Address, and ZIP Code Sommer Spector 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Stabenow Sen MI (food) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 100.00
Full Name, Mailing Address, and ZIP Code Sommer Spector 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Byrum MI-08 (food) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 100.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B		ITEMIZED DISBURSEMENTS		9 / 9
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER 23	
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NAME OF COMMITTEE (In Full) National Organization for Women PAC				
Full Name, Mailing Address, and ZIP Code Briana Stone 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Corzine Sen NJ (Salary) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 220.00	
Full Name, Mailing Address, and ZIP Code Briana Stone 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Connelly NJ-07 (Salary) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 220.00	
Full Name, Mailing Address, and ZIP Code Briana Stone 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Corzine Sen NJ (Food) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 140.00	
Full Name, Mailing Address, and ZIP Code Briana Stone 733 15th St. Second Floor Washington DC 20005	Purpose of Disbursement In-kind Connelly NJ-07 (Food) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 10/19/2000	Amount of Each Disbursement This Period 140.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)				4612.50