

SMITH & KAUFMAN LLP

M E M O R A N D U M

RECEIVED
FEDERAL E.
COMMISSION

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2000 APR 14

2000 APR 19 A 11:46

to: Federal Election Commission
from: Julie Prujan
subject: FEC Form 3X
file no: WPC 2080.002 (Federal Account)
date: April 14, 2000

Enclosed please find the following form:

Women's Political Committee (Federal Account) - FEC Form 3X (1/1/00 - 3/31/00) (Original + 1 copy + 1 face page).

Please conform the face page and return to me in the enclosed self-addressed stamped envelope.

Thank you for your consideration.

From the desk of...

Stephen J. Kaufman, Attorney at Law
Julie Prujan, Campaign Finance Supervisor

Smith Kaufman LLP
601 S. Figueroa Street, 41st Floor
Los Angeles, CA 90017

(213) 623-9704
Fax: (213) 623-4818

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than an Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) WOMEN'S POLITICAL COMMITTEE (Federal Account)		2. FEC IDENTIFICATION NUMBER C00188193
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 601 S. Figueroa Street, 41st Floor		
CITY, STATE and ZIP CODE Los Angeles, CA 90017		3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee (see FEC FORM 1M)

4. TYPE OF REPORT

(a) April 15 Quarterly Report

July 15 Quarterly Report

October 15 Quarterly Report

January 31 Year End Report

July 31 Mid-Year Report (Non-election Year Only)

Termination Report

Monthly Report Due on:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

Twelfth day report preceding _____ (Type of Election)

election on _____ in the State of _____

Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>01/01/2000</u> through <u>03/31/2000</u>		
6. (a) Cash on Hand January 1, 2000		18,519.21
(b) Cash on Hand at Beginning of Reporting Period	18,519.21	
(c) Total Receipts (from Line 19)	26,379.86	26,379.86
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	44,899.07	44,999.07
7. Total Disbursements (from Line 30)	6,264.64	6,264.64
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	38,634.43	38,634.43
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)	0.00	

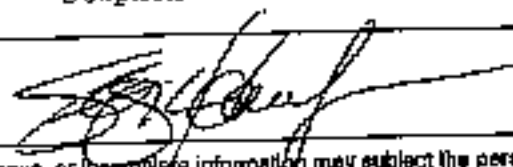
For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20483
Toll Free 800-424-9630
Local 202-376-3120

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Stephen J. Kaufman

Signature of Treasurer



Date

4/14/00

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

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE WOMEN'S POLITICAL COMMITTEE (Federal Account)	REPORT COVERING PERIOD	
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
I. Itemized (use Schedule A)	26,350.00	26,350.00
II. Unitemized	0.00	0.00
III. Total	26,350.00	26,350.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions	26,350.00	26,350.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	29.86	29.86
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	26,379.86	26,379.86
20. Total Federal Receipts (subtract line 18 from line 19)	26,379.86	26,379.86
II. Disbursements		
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	1,214.64	1,214.64
c. Total Operating Expenditures (add a i, a ii, and b)	1,214.64	1,214.64
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Party Committees	5,000.00	5,000.00
24. Independent Expenditures (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	50.00	50.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contribution Refunds (add a, b and c)	50.00	50.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	6,264.64	6,264.64
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	6,264.64	6,264.64
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	26,350.00	26,350.00
33. Total Contribution Refunds (from line 28d)	50.00	50.00
34. Net Contributions (other than loans) (subtract line 33 from line 32)	26,300.00	26,300.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	1,214.64	1,214.64
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

NAME OF COMMITTEE (in Full)
 WOMEN'S POLITICAL COMMITTEE (Federal Account) 00018B193

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
Elizabeth P. Applebaum 10112 Emgyrean Way #201 Los Angeles, CA 90057	Not employed	01/26/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date > \$ 550.00	
B. Full Name, Mailing Address and ZIP Code Amy Ardell 233 Wilshire Boulevard #550 Santa Monica, CA 90401	Self-employed	02/04/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 550.00	
C. Full Name, Mailing Address and ZIP Code Carol O. Biondi 110 N. Rockingham Avenue Los Angeles, CA 90049	N/A	03/21/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Child Advocate	Aggregate Year-to-Date > \$ 550.00	
D. Full Name, Mailing Address and ZIP Code Carmela S. Bosko 220 S. Lucerne Los Angeles, CA 90004	Community Volunteer	02/28/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Community Volunteer	Aggregate Year-to-Date > \$ 550.00	
E. Full Name, Mailing Address and ZIP Code Deborah R. Castleman 14629 Hilltree Road Santa Monica, CA 90403	Not employed	03/07/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date > \$ 550.00	
F. Full Name, Mailing Address and ZIP Code Iraa Cohen 2727 Krim Drive Los Angeles, CA 90064	None	02/07/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Community Activist	Aggregate Year-to-Date > \$ 550.00	
G. Full Name, Mailing Address and ZIP Code Nita G. Corinblit 5854 Hillview Park Van Nuys, CA 91401	Retired	01/24/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Teacher	Aggregate Year-to-Date > \$ 550.00	

SUBTOTAL of Receipts This Page (optional)	3,850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (01/01/2000 - 09/30/2000)

PAGE 2 OF 8
FOR LINE NUMBER 11(a) (i)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C03188193

<p>A. Full Name, Mailing Address and ZIP Code Susan Daftary 25040 Rey Alberto Court Calabasas, CA 91302</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Dentist</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 02/04/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Susan K. Davidoff 433 N. Camden Drive #888 Beverly Hills, CA 90210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 02/02/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Patti (Patricia) Demoff 3013 Hutton Place Beverly Hills, CA 90210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer College Circuit</p> <p>Occupation Independent College Counselor</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 02/09/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Lynne Deutch 14724 Ventura Boulevard, 2nd Floor Sherman Oaks, CA 91403</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 02/22/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Bettina B. Duval 220 - 23rd Street Santa Monica, CA 90402</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Emily's List</p> <p>Occupation Political Fundraiser</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 01/21/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Valerie Fields 10598 Clearwood Court Los Angeles, CA 90077</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer LA Unified School District</p> <p>Occupation School Board Member</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 01/28/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Elizabeth Folgeman 10380 Wilshire Boulevard 3403 Los Angeles, CA 90024</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Not employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date (month, day, year) 01/27/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>3,850.00</p>
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (01/01/2000 - 03/31/2000)

PAGE 3 OF 8
FOR LINE NUMBER 11(a) (1)

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NAME OF COMMITTEE (in Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C00188193

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amy E. Freilich 16323 Tudor Drive Encino, CA 91436	Brand, Ferrar & Ruxbaum LLP	03/01/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 550.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Greenberg 425 N. Bundy Drive Los Angeles, CA 90043	Information	01/31/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Requested	Aggregate Year-to-Date > \$ 550.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marcie Herman 600 Hanley Way Los Angeles, CA 90049	Fun Furniture	02/02/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 550.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rebecca Night 556 - 12th Street Santa Monica, CA 90402	Not employed	01/26/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Not employed	Aggregate Year-to-Date > \$ 550.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn M. Johnson 5729 Spring Oak Drive Los Angeles, CA 90068	None	01/29/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 550.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Debra Judelson M.D. 139 N. Carnon Road Beverly Hills, CA 90211	Cardiovascular Medical Group	02/15/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$ 550.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn H. Farsten 10580 Wilshire Boulevard #6E Los Angeles, CA 90024	Retired	01/26/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 550.00	

SUBTOTAL of Receipts This Page (optional)

1,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (01/01/2000 - 03/31/2000)

PAGE 4 OF 8
FOR LINE NUMBER 11(a) (1)

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NAME OF COMMITTEE (In Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C00188193

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bonnie Lewis 204 N. Glenroy Lane Los Angeles, CA 90049	Retired	02/15/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 550.00	
B. Full Name, Mailing Address and ZIP Code Georgia Mercer 19533 Braewood Drive Carzana, CA 91356	Name of Employer LA Community College District	Date (month, day, year) 01/07/2000 02/04/2000	Amount of Each Receipt this Period 550.00 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Board Trustee	Aggregate Year-to-Date > \$ 1,100.00	
C. Full Name, Mailing Address and ZIP Code Faye S. Miller 264 S. Bedford Drive Beverly Hills, CA 90212	Name of Employer Self-employed	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	Aggregate Year-to-Date > \$ 550.00	
D. Full Name, Mailing Address and ZIP Code Cynthia A. Miscikowski 396 Fordyce Road Los Angeles, CA 90049	Name of Employer City of Los Angeles	Date (month, day, year) 02/25/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Councilmember	Aggregate Year-to-Date > \$ 550.00	
E. Full Name, Mailing Address and ZIP Code Pearl Morris 2818 Bottlebrush Drive Los Angeles, CA 90077	Name of Employer None	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Attorney	Aggregate Year-to-Date > \$ 550.00	
F. Full Name, Mailing Address and ZIP Code Judith Pacht 910 S. Gretna Green Way Los Angeles, CA 90049	Name of Employer Self-employed	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer	Aggregate Year-to-Date > \$ 550.00	
G. Full Name, Mailing Address and ZIP Code Joan Palevsky 1546 Enslay Avenue Los Angeles, CA 90024	Name of Employer None	Date (month, day, year) 01/26/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 550.00	

SUBTOTAL of Receipts This Page (optional)

4,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (01/01/2000 - 03/31/2000)

PAGE 5 OF 6
FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) CD0188193

<p>A. Full Name, Mailing Address and ZIP Code Leo J. Fircher 10315 Glenbarr Avenue Los Angeles, CA 90064</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Jeweler</p> <p>Aggregate Year-to-Date > 6 550.00</p>	<p>Date(month, day, year) 01/28/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Sandra Soltzer Pressman 1561 Arncliffe Drive Pacific Palisades, CA 90272</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Investor</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date(month, day, year) 03/03/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Lillian Leavitt Raffel 601 N. Roxbury Drive Beverly Hills, CA 90210</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer None</p> <p>Occupation Community Activist</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date(month, day, year) 03/03/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Shirley Roberts 1422 N. Sweetzer Avenue #209 West Hollywood, CA 90069</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date(month, day, year) 01/24/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Eggy (Margaret) Saferstein 167 N. Bentley Avenue Los Angeles, CA 90049</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Educational Consultant</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date(month, day, year) 01/27/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Toni Sherman 3245 Oakdell Lane Studio City, CA 91604</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Toni Sherman Interiors</p> <p>Occupation Interior Designer</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date(month, day, year) 01/27/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Karen Weinstein, Ph.D 2625 Alameda Avenue #316 Burbank, CA 91505</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-employed</p> <p>Occupation Psychologist</p> <p>Aggregate Year-to-Date > \$ 550.00</p>	<p>Date(month, day, year) 02/28/2000</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>3,850.00</p>
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page 401002000-09/31/2000

PAGE 6 OF 8
FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (In Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C0E183193

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mini (Miriam) West 455 N. Palm Drive Beverly Hills, CA 90210	Retired	01/31/2000	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired Executive	Aggregate Year-to-Date > \$ 550.00	
B. Full Name, Mailing Address and ZIP Code Syd Whalley 2740 Club Drive Los Angeles, CA 90064	Name of Employer Not employed	Date (month, day, year) 01/27/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Not employed	Aggregate Year-to-Date > \$ 550.00	
C. Full Name, Mailing Address and ZIP Code Valerie Wisot 240 S. Camden Drive Beverly Hills, CA 90212	Name of Employer Schwartz, Wisot & Wilson LLP	Date (month, day, year) 02/07/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 550.00	
D. Full Name, Mailing Address and ZIP Code Peg Yorkin 8105 W. Third Street #1 Los Angeles, CA 90048	Name of Employer Peg Yorkin Productions	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Producer	Aggregate Year-to-Date > \$ 550.00	
E. Full Name, Mailing Address and ZIP Code Helen S. Zukin 1930 Century Park West, 2nd Floor Los Angeles, CA 90067	Name of Employer Self-employed	Date (month, day, year) 01/31/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 550.00	
F. Full Name, Mailing Address and ZIP Code Donna Ellman Garber Trust 1712 Chevy Chase Drive Beverly Hills, CA 90210	Name of Employer (Trust)	Date (month, day, year) 03/14/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 550.00	SEP ATTRIBUTION BELOW
G. Full Name, Mailing Address and ZIP Code Donna Ellman Garber 1712 Chevy Chase Drive Beverly Hills, CA 90210	Name of Employer Self-employed	Date (month, day, year) 03/14/2000	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Community Affairs Consultant	Aggregate Year-to-Date > \$ 550.00	MEMO

SUBTOTAL of Receipts This Page (optional)

3,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (01/01/2000 - 02/28/2000)

PAGE 7 OF 8
FOR LINE NUMBER 11 (a) (2)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C00188193

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Katzman Family Trust 10399 Santa Monica Boulevard #360 Los Angeles, CA 90025	(Trust)	02/02/2000 SEE ATTRIBUTION BELOW	550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$	550.00
B. Full Name, Mailing Address and ZIP Code Carol Katzman 421 N. Saltair Avenue Los Angeles, CA 90049	Name of Employer Beverly Hills USD	Date (month, day, year) 02/02/2000	Amount of Each Receipt this Period 550.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Educator	Aggregate Year-to-Date > \$	550.00
C. Full Name, Mailing Address and ZIP Code Louise Brinsley Trust 533 Muirfield Road Los Angeles, CA 90020	Name of Employer (Trust)	Date (month, day, year) 01/21/2000 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$	550.00
D. Full Name, Mailing Address and ZIP Code Louise Brinsley 533 Muirfield Road Los Angeles, CA 90020	Name of Employer None	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 550.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Not employed	Aggregate Year-to-Date > \$	550.00
E. Full Name, Mailing Address and ZIP Code Mannis & Phillips LLP 2029 Century Park East #1200 Los Angeles, CA 90067	Name of Employer (Partnership)	Date (month, day, year) 01/21/2000 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$	500.00
F. Full Name, Mailing Address and ZIP Code Stacy Phillips 2029 Century Park East #1200 Los Angeles, CA 90067	Name of Employer Mannis & Phillips LLP	Date (month, day, year) 01/21/2000	Amount of Each Receipt this Period 500.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation ACCOUNTANT	Aggregate Year-to-Date > \$	500.00
G. Full Name, Mailing Address and ZIP Code Norman Lear Trust 1999 Avenue of the Stars, Suite 500 Los Angeles, CA 90067	Name of Employer (Trust)	Date (month, day, year) 01/26/2000 SEE ATTRIBUTION BELOW	Amount of Each Receipt this Period 550.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$	550.00
SUBTOTAL of Receipts This Page (optional)			2,150.00
TOTAL This Period (last page this line number only)			

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page 01/01/2000 - 04/31/2000

PAGE 8 OF 8
FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (in Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C00189193

<p>A. Full Name, Mailing Address and ZIP Code Lyn Leat 1999 Avenue of the Stars, Suite 500 Los Angeles, CA 90067</p>	<p>Name of Employer Self-employed</p>	<p>Date (month, day, year) 01/26/2000</p>	<p>Amount of Each Receipt this Period 550.00 MEMO</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Psychologist</p>	<p>Aggregate Year-to-Date > \$ 550.00</p>	
<p>B. Full Name, Mailing Address and ZIP Code Quatemala & Zidell LLP 1901 Avenue of the Stars #1505 Los Angeles, CA 90067</p>	<p>Name of Employer (Partnership) Occupation</p>	<p>Date (month, day, year) 01/31/2000 SEE ATTRIBUTION BELOW</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 550.00</p>		
<p>C. Full Name, Mailing Address and ZIP Code Lisa Greer Quateman 1901 Avenue of the Stars #1505 Los Angeles, CA 90067</p>	<p>Name of Employer Quateman & Zidell Occupation Attorney</p>	<p>Date (month, day, year) 01/31/2000</p>	<p>Amount of Each Receipt this Period 550.00 MEMO</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 550.00</p>		
<p>D. Full Name, Mailing Address and ZIP Code The Wilson Trust 623 N. Palm Drive Beverly Hills, CA 90210</p>	<p>Name of Employer (Trust) Occupation</p>	<p>Date (month, day, year) 01/28/2000 SEE ATTRIBUTION BELOW</p>	<p>Amount of Each Receipt this Period 550.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 550.00</p>		
<p>E. Full Name, Mailing Address and ZIP Code Betty S. Wilson 623 N. Palm Drive Beverly Hills, CA 90210</p>	<p>Name of Employer Retired Occupation Retired</p>	<p>Date (month, day, year) 01/28/2000</p>	<p>Amount of Each Receipt this Period 550.00 MEMO</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 550.00</p>		
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$</p>		
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>1,100.00</p>
<p>TOTAL This Period (last page this line number only)</p>			<p>26,350.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

Other Receipts

Use separate schedule(s) for each category of the Detailed Summary Page (11/01/2000 - 09/30/2000)

PAGE OF
1 1
FOR LINE NUMBER
17

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NAME OF COMMITTEE (in Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C00189193

<p>A. Full Name, Mailing Address and ZIP Code Bank of America</p>	<p>Name of Employer Interest earned</p>	<p>Date(month, day, year) 01/31/2000</p>	<p>Amount of Each Receipt this Period 8.35</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Aggregate Year-to-Date > \$ see below</p>	
<p>B. Full Name, Mailing Address and ZIP Code same as above</p>	<p>Name of Employer Interest earned</p>	<p>Date(month, day, year) 02/29/2000</p>	<p>Amount of Each Receipt this Period 9.35</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Aggregate Year-to-Date > \$ see below</p>	
<p>C. Full Name, Mailing Address and ZIP Code same as above</p>	<p>Name of Employer Interest earned</p>	<p>Date(month, day, year) 03/31/2000</p>	<p>Amount of Each Receipt this Period 12.16</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Aggregate Year-to-Date > \$ 29.86</p>	
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Aggregate Year-to-Date > \$</p>	
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Aggregate Year-to-Date > \$</p>	
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Aggregate Year-to-Date > \$</p>	
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Aggregate Year-to-Date > \$</p>	
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>29.86</p>
<p>TOTAL This Period (last page this line number only)</p>			<p>29.86</p>

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Federal Operating Expenses

Use separate schedule(s)
for each category of the
Detailed Summary Page
(01/01/2000 - 03/31/2000)

PAGE 1 OF 1
FOR LINE NUMBER 21 (j)

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NAME OF COMMITTEE (in Full)

WOMEN'S POLITICAL COMMITTEE (Special Account) C30185193

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Schwartz, Mijoc & Wilson LLP 315 South Beverly Drive #315 Beverly Hills, CA 90212	Administrative costs	03/20/2000	219.86
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/04/2000	33.52
B. Full Name, Mailing Address and ZIP Code Smith Kaufman LLP 601 S. Figueroa Street, 41st Floor Los Angeles, CA 90017	Purpose of Disbursement Legal & Treasury Fees	Date (month, day, year) 03/02/2000	Amount of Each Disbursement This Period 287.50
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/09/2000 01/22/2000	287.50 277.00
C. Full Name, Mailing Address and ZIP Code Unitized other federal operating expenses (less than \$200) This Period: 01/01/2000 - 03/31/2000	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period 109.26
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

1,214.64

TOTAL This Period (last page this line number only)

1,214.64

SCHEDULE B

ITEMIZED DISBURSEMENTS

Contribution to Federal Candidates/Committees and Other Party Committees

Use separate schedule(s) for each category of the Detailed Summary Page (01/01/2000 - 03/31/2000)

PAGE 1 OF 1
FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) COD188193

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
NY Senate 2000 450 Seventh Avenue #801 New York, NY 10123	Contribution Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/29/2000	5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	5,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Refunds of Contributions to Individuals/Persons

Use separate schedule(s)
for each category of this
Detailed Summary Page
(01/03/2000 - 03/31/2000)

PAGE OF
1
FOR LINE NUMBER
28 (a)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

WOMEN'S POLITICAL COMMITTEE (Federal Account) C06188193

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Unitized refunds of contributions to individuals/persons (less than \$200) This Period: 01/01/2000 - 03/31/2000	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		50.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)


50.00

TOTAL This Period (last page this line number only)

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4-14-00
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	4-19-00 DATE PREPARED