

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2008 DEC -9 P 12:16

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) WOMEN'S ACTION FOR NEW DIRECTIONS PAC	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 691 MASS. AVE.	2. FEC IDENTIFICATION NUMBER C00170316
CITY, STATE and ZIP CODE ARLINGTON, MA 02476	3. <input 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:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- 12-Day Pre-Election Report for the _____ (Type of Election)
 election on _____ in the State of _____
 30-Day Post-Election Report following the General Election
 on **Nov. 7** in the State of **MA**

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	10/19/00 through 11/27/00		
6. (a) Cash on Hand January 1, ²⁰⁰⁰			\$ 8,240.65
(b) Cash on Hand at Beginning of Reporting Period		\$ 2,040.35	
(c) Total Receipts (from Line 1B)		\$ 2,221.51	\$ 12,726.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 4,261.76	\$ 21,567.00
7. Total Disbursements (from Line 3D)		\$ 2,518.40	\$ 19,823.80
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 1,743.36	\$ 1,743.36
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800 424-9530
Local 202-694-1100

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

Signature of Treasurer

WILHELM WALKER
Wilhelm Walker

Date

12/5/00

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 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
WARD PAC		FROM 10/19/00	TO 11/27/00	
		COLUMN A	COLUMN B	
		Total This Period	Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			11(a)(i)
i.	Itemized (use Schedule A)	1100	7100	11(a)(ii)
ii.	Unitemized	1120	4610	11(a)(iii)
iii.	Total (add i and ii) >	2220	11710	11(b)
b.	Political Party Committees		1000	11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a iii, b and c) >	2220	12710	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)	1.51	16.51	18
18.	Transfers from Nonfederal Account for Joint Activity			19
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2221.51	12726.51	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	2221.51	12726.51	
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i.	Federal Share			21(a)(ii)
ii.	Non-Federal Share	(1385.84)	(2044.42)	21(b)
b.	Other Federal Operating Expenditures	(1385.84)	(2044.42)	21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >			22
22.	Transfers to Affiliated/Other Party Committees	3885.84	81274.42	23
23.	Contributions to Federal Candidates/Committees and Other Political Committees		350	24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26.	Loan Repayments Made			27
27.	Loans Made			28(a)
28.	Refunds of Contributions To:			28(b)
a.	Individuals/Persons Other Than Political Committees			28(c)
b.	Political Party Committees			28(d)
c.	Other Political Committees (such as PACs)			29
d.	Total Contribution Refunds (add a, b and c) >	18.40	223.80	30
29.	Other Disbursements	2518.40	19823.80	31
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	2518.40	19823.80	
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	2220.	12710.	32
33.	Total Contribution Refunds (from line 28d)	-		33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	2220	12710	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	(2044.42)	35
36.	Offsets to Operating Expenditures (from line 15)			36
37.	Net Operating Expenditures (subtract line 35 from 35) >	0		37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

WARD PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>Edith Allen 50 Ashfield Rd. ABINGTON, MA 02476</i>	<i>self-</i>	<i>10/25/00</i>	<i>1,000.⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>artist</i>	Aggregate Year-to-Date <i>2,000.</i>	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>Jean Gopson 2510 Hidden Valley Dr. Little Rock, AR 72212</i>	<i>Retired</i>	<i>10/31/00</i>	<i>100.⁰⁰</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date <i>200.</i>	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date	

SUBTOTAL of Receipts This Page (optional) *1,100.*

TOTAL This Period (last page this line number only)

11010

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NAME OF COMMITTEE (In Full)

WARD PAC

A. Full Name, Mailing Address and ZIP Code
EVELYN PRICE
3077 NW THISTLE PL.
CORVALLIS, OR 97330

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation
Retired

Aggregate Year-to-Date $\$$

Date (month, day, year)
10/20/00

Amount of Each Receipt this Period
\$35.00

B. Full Name, Mailing Address and ZIP Code
MARY MOLLER
2 GRACELAND PK
CAMBRIDGE MA 02138

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation
self - WRITER

Aggregate Year-to-Date $\$$

Date (month, day, year)
11/6/00

Amount of Each Receipt this Period
\$50.00

C. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date $\$$

Date (month, day, year)

Amount of Each Receipt this Period

D. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date $\$$

Date (month, day, year)

Amount of Each Receipt this Period

E. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date $\$$

Date (month, day, year)

Amount of Each Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date $\$$

Date (month, day, year)

Amount of Each Receipt this Period

G. Full Name, Mailing Address and ZIP Code

Receipt For: Primary General
 Other (specify):

Name of Employer
 Occupation

Aggregate Year-to-Date $\$$

Date (month, day, year)

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

85.00

TOTAL This Period (last page this line number only)

SCHEDULE B

MEMO
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
WARD PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>DARLENE HOLLEY for Congress</i>	<i> earmarked Contrib</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>10/20/00</i>	<i>\$35.00</i>
<i>CHRISTIA MCKINLEY for Congress</i>	<i> earmarked Contrib</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>11/6/00</i>	<i>\$50.00</i>
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)	<i>85.00</i>
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

WARD PAC

NAME OF COMMITTEE (in Full)	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Susan Davis for Congress P O Box 84049 San Diego, CA 92138	Purpose of Disbursement Cont. to Cand. 500 In-kind 90.72 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	520.72
B. Full Name, Mailing Address and ZIP Code Connelly for Congress P O Box 280 Fanwood, NJ 07023	Purpose of Disbursement Cont. to Cand. 500 In-kind 90.72 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	520.72
C. Full Name, Mailing Address and ZIP Code Lauren Beth Gash for Congress 1910 First St. Highland Park, IL 60035	Purpose of Disbursement Cont. to Cand. 500 In-kind 90.72 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	520.72
D. Full Name, Mailing Address and ZIP Code Keenan for Montana P O Box 9249 Helena, MT 59601	Purpose of Disbursement Cont. to Cand. 500 In-kind 90.72 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	520.72
E. Full Name, Mailing Address and ZIP Code Eleanor Jordan for Congress P O Box 21151 Louisville, KY 40221	Purpose of Disbursement Cont. to Cand. 250 In-kind 20.72 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	270.72
F. Full Name, Mailing Address and ZIP Code O'Shaughnessy for Congress P O Box 1653 Columbus, OH 6-1653	Purpose of Disbursement Cont. to Cand. 250 In-kind 20.72 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/00	270.72
G. Full Name, Mailing Address and ZIP Code Jane Fredrick for Congress P O Box 505 Beaufort, SC 29901	Purpose of Disbursement In-kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/00	214.08
H. Full Name, Mailing Address and ZIP Code Eleanor Jordan for Congress P O Box 21151 Louisville, KY 40221	Purpose of Disbursement In-kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	214.08
I. Full Name, Mailing Address and ZIP Code Stabenow for U.S. Senate P O Box 4945 East Lansing, MI 48826	Purpose of Disbursement In-kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	214.08

3266.56

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)			
WANO PAC			
<p>A</p> <p>Barbara Lee for Congress P O Box 29164 Oakland, CA 94604</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>B Full Name, Mailing Address and ZIP Code</p> <p>Zoe Lofgren for Congress 111 West St. #400 San Jose, CA 95113</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>Nita Lowey for Congress 222 Mamaroneck Ave. #2210 White Plains, NY 10605</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>Karen McCarthy for Congress 1217 W. 58th Kansas City, MO 64113</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>Cynthia McKinney for Congress 2600 Rainbow Way Decatur, GA 30030</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>Patsy Mink for Congress P O Box 4452 Honolulu, HI 96812</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>Connie Morella for Congress 7101 Wisconsin Ave. #102 Bethesda, MD 20814</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>H Full Name, Mailing Address and ZIP Code</p> <p>Grace Napolitano for Congress P O Box 408 Norwalk, CA 90651</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>Nancy Pelosi for Congress 1 Bush St. San Francisco, CA 94104</p>	<p>Purpose of Disbursement <i>In Kind</i></p> <p>Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year) 10/26/00</p>	<p>Amount of Each Disbursement This Period 20.72</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>			186.48
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

NAME OF COMMITTEE (in Full)	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shelley Kiel for Congress 319 S. 53 rd St. Omaha, NE 68132	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72
O'Shaughnessy for Congress P O Box 1653 Columbus, OH 6-1653	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/00	20.72
C. Full Name, Mailing Address and ZIP Code Tammy Baldwin for Congress P O Box 696 Madison, WI 53701	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72
D. Full Name, Mailing Address and ZIP Code Lois Capps for Congress P O Box 23940 Santa Barbara, CA 93121	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/00	20.72
E. Full Name, Mailing Address and ZIP Code Eva Clayton for Congress P O Box 670 Norlina, NC 27563	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72
F. Full Name, Mailing Address and ZIP Code Berkley 2000 349 Keating St. Henderson, NV 89104	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72
G. Full Name, Mailing Address and ZIP Code Anna Eshoo for Congress 530 Howard St., Ste. 200 San Francisco, CA 94104	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72
H. Full Name, Mailing Address and ZIP Code Darlene Hooley for Congress P O Box 2050 Salem, OR 97308	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/24/00	20.72
I. Full Name, Mailing Address and ZIP Code Kilpatrick for U.S. Congress 2550 M St., NW Suite 200 Washington, DC 20037	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72

SUBTOTAL of Disbursements This Page (optional)

186.48

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Lynn Rivers for Congress P O Box 8293 Ann Arbor, MI 48107	In Kind	10/26/00	20.72
Lucille Roybal-Allard for Congress P O Box 2187 Bell Gardens, CA 90202	In Kind	10/26/00	20.72
Janice Schakowsky for Congress P O Box 5130 Evanston, IL 60204	In Kind	10/26/00	20.72
D.1 Nydia Velazquez for Congress 12329 Needle Pine Tree Silver Spring, MD 20904	In Kind	10/26/00	20.72
E.5111 Maxine Waters for Congress 555 S. Flower St. #4510 L.A, CA 90071	In Kind	10/26/00	20.72
Lynn Woolsey for Congress P O Box 750178 Petaluma, CA 94975	In Kind	10/26/00	20.72
G. Full Name, Mailing Address and ZIP Code Mary Reider for Congress P O Box 9250 Rochester, MN 55903	In Kind	10/26/00	20.72
K Elaine Bloom for Congress 300 71 st St. Suite 504 Miami Beach, FL 33141	In Kind	10/26/00	20.72
L. Full Name, Mailing Address and ZIP Code DeGette for Congress 770 Grant St. #238 Denver, CO 80202	In Kind	10/26/00	20.72

SUBTOTAL of Disbursements This Page (optional)

186.48

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 5
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

NAME OF COMMITTEE (In Full)	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Slaughter for Congress 3120 Federal Building State Street Rochester, NY 14614 <small>ZIP Code</small>	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72
Hillary Rodham Clinton for Senate 1730 M St., NW Suite 413 Washington, DC 20036	In Kind Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/00	20.72
D. Full Name, Mailing Address and ZIP Code			
E. Full Name, Mailing Address and ZIP Code			
F. Full Name, Mailing Address and ZIP Code			
G. Full Name, Mailing Address and ZIP Code			
H. Full Name, Mailing Address and ZIP Code			
I. Full Name, Mailing Address and ZIP Code			

SUBTOTAL of Disbursements This Page (optional)	44.44
TOTAL This Period (last page this line number only)	3267.44

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
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