

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than an Authorized Committee
(Summary Page)

551
1996
MAY 1996
FEB 4 12 53 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) PEOPLE HELPING PEOPLE	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 600 Wilshire Boulevard, Suite 1500	2. FEC IDENTIFICATION NUMBER C00248948
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
- (b) Is this Report an Amendment? YES NO

- 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 _____

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/95</u> through <u>12/31/95</u>		
6. (a) Cash on Hand January 1, 1996		192.86
(b) Cash on Hand at Beginning of Reporting Period	0.00	
(c) Total Receipts (from Line 19)	39,150.00	39,150.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	39,150.00	39,342.90
7. Total Disbursements (from Line 30)	20,987.70	21,180.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	18,162.30	
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 <p style="text-align: center;">David I. Gould</p>	
Signature of Treasurer 	Date <p style="text-align: center;">1. 29. 96</p>

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

9 6 0 3 0 2 7 3 3 4 1

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE	PEOPLE HELPING PEOPLE	REPORT COVERING PERIOD	
		FROM: 07/01/95	TO: 12/31/95
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11.	Contributions (other than loans) From:		
	a. Individuals/Persons Other Than Political Committees		
	i. Itemized (use Schedule A)	34,100.00	34,100.00
	ii. Unitemized	50.00	50.00
	iii. Total	34,150.00	34,150.00
	b. Political Party Committees	0.00	0.00
	c. Other Political Committees (such as PACs)	5,000.00	5,000.00
	d. Total Contributions	39,150.00	39,150.00
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.)	0.00	0.00
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)	39,150.00	39,150.00
20.	Total Federal Receipts (subtract line 18 from line 19)	39,150.00	39,150.00
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	15,987.70	16,180.60
	c. Total Operating Expenditures (add a i, a ii, and b)	15,987.70	16,180.60
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	0.00	0.00
	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)	0.00	0.00
29.	Other Disbursements	0.00	0.00
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	20,987.70	21,180.60
31.	Total Federal Disbursements (subtract line 21 a ii from line 30)	20,987.70	21,180.60
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	39,150.00	39,150.00
33.	Total Contribution Refunds (from line 28d)	0.00	0.00
34.	Net Contributions (other than loans)(subtract line 33 from 32)	39,150.00	39,150.00
35.	Total Federal Operating Expenditures (add 21 a i and 21 b)	15,987.70	16,180.60
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00
37.	Net Operating Expenditures (subtract line 36 from 35)	15,987.70	16,180.60

SCHEDULE A **ITEMIZED RECEIPTS**
Contributions from Individuals/Persons

Use separate schedule(s)
for each category of the
Detailed Summary Page
(07/01/88 - 12/31/05)

PAGE 1 OF 2
FOR LINE NUMBER
11 (e) (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)

PEOPLE HELPING PEOPLE C00248948

A. Full Name, Mailing Address and ZIP Code Donald C. Cornelius 9255 Sunset Boulevard #420 Los Angeles, CA 90069	Name of Employer Don Cornelius Productions	Date(month, day, year) 09/20/95	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation TV Producer	Aggregate Year-to-Date > \$ 2,500.00	
B. Full Name, Mailing Address and ZIP Code Camille & William Cooby P.O. Box 4049 Santa Monica, CA 90411	Name of Employer None/Self	Date(month, day, year) 09/05/95	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Homemaker/Entertainer	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code Georgia Frontiere 10271 W. Pico Boulevard Los Angeles, CA 90068	Name of Employer St. Louis Rams	Date(month, day, year) 09/05/95	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 5,000.00	
D. Full Name, Mailing Address and ZIP Code Christopher Hammond 854 W. Adams Boulevard Los Angeles, CA 90039	Name of Employer Capital Vision Equities	Date(month, day, year) 10/05/95	Amount of Each Receipt this Period 3,100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 2,100.00	
E. Full Name, Mailing Address and ZIP Code Quincy Jones 9640 Wilshire Boulevard #600 Beverly Hills, CA 90212	Name of Employer Quest Records	Date(month, day, year) 10/02/95	Amount of Each Receipt this Period 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation CEO & Chairman	Aggregate Year-to-Date > \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code Edward Lewis 40 W. 86th Street New York, NY 10024	Name of Employer Essence Communications Inc.	Date(month, day, year) 09/18/95	Amount of Each Receipt this Period 5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Publisher	Aggregate Year-to-Date > \$ 5,000.00	
G. Full Name, Mailing Address and ZIP Code Karen Hill Scott & Co. 5105 Goldleaf Circle Los Angeles, CA 90056	Name of Employer Self-Employed	Date(month, day, year) 09/07/95	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)

22,100.00

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
 (01/01/96 - 12/31/96)

PAGE OF
 2 2
 FOR LINE NUMBER
 1 (a) (i)

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NAME OF COMMITTEE (In Full)
 PEOPLE HELPING PEOPLE C00248948

A. Full Name, Mailing Address and ZIP Code Bryan S. Turner 6430 Sunset Boulevard #900 Hollywood, CA 90028 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Priority Records Date(month, day, year) 11/22/95	Amount of Each Receipt this Period 5,000.00
	Occupation President Aggregate Year-to-Date > \$ 5,000.00	
B. Full Name, Mailing Address and ZIP Code Reginald Webb 30 Rio Rancho Road Pomona, CA 91766 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Nat'l Black McDonald's Operators Date(month, day, year) 09/28/95	Amount of Each Receipt this Period 2,000.00
	Occupation President Aggregate Year-to-Date > \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code L.A.R.D. Downey 310 E. Florence Avenue Los Angeles, CA 90003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer (Partnership) Date(month, day, year) 09/12/95 SRR ATTRIBUTION BELOW	Amount of Each Receipt this Period 5,000.00
	Occupation Aggregate Year-to-Date > \$ 0.00	
D. Full Name, Mailing Address and ZIP Code Larry Flores 310 E. Florence Avenue Los Angeles, CA 90003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer L.A.R.D. Downey Date(month, day, year) 09/12/95	Amount of Each Receipt this Period 1,250.00 MEMO
	Occupation Partner Aggregate Year-to-Date > \$ 1,250.00	
E. Full Name, Mailing Address and ZIP Code Arthur Flores 310 E. Florence Avenue Los Angeles, CA 90003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer L.A.R.D. Downey Date(month, day, year) 09/12/95	Amount of Each Receipt this Period 1,250.00 MEMO
	Occupation Partner Aggregate Year-to-Date > \$ 1,250.00	
F. Full Name, Mailing Address and ZIP Code Richard Flores 310 E. Florence Avenue Los Angeles, CA 90003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer L.A.R.D. Downey Date(month, day, year) 09/12/95	Amount of Each Receipt this Period 1,250.00 MEMO
	Occupation Partner Aggregate Year-to-Date > \$ 1,250.00	
G. Full Name, Mailing Address and ZIP Code David Flores 310 E. Florence Avenue Los Angeles, CA 90003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer L.A.R.D. Downey Date(month, day, year) 09/12/95	Amount of Each Receipt this Period 1,250.00 MEMO
	Occupation Partner Aggregate Year-to-Date > \$ 1,250.00	

SUBTOTAL of Receipts This Page (optional)	12,000.00
TOTAL This Period (last page this line number only)	34,100.00

96030270344

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/95 - 10/31/95)

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE C00248948

9 5 0 3 0 2 7 3 3 4 5

A. Full Name, Mailing Address and ZIP Code RALPHSPAC 1100 West Artesia Compton, CA 90220 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date(month, day, year) 09/18/95	Amount of Each Receipt this Period 5,000.00
	Occupation		
	Aggregate Year-to-Date > \$ 5,000.00		
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date > \$		

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Federal Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/88 - 12/31/95)

PAGE 1 OF 2
FDH LINE NUMBER 31 (b)

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NAME OF COMMITTEE (in Full)

PEOPLE HELPING PEOPLE C00248948

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Biltmore Hotel 506 So. Grand Avenue Los Angeles, CA 90071	Cost of Fundraiser Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/13/95	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Century Parking 626 Wilshire Boulevard Los Angeles, CA 90017	Parking Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/20/95 11/09/95 10/23/95 10/13/95	80.00 160.00 160.00 160.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/22/95	160.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Cheetah Express 3010 Wilshire Boulevard, Suite 325 Los Angeles, CA 90010	Messenger Service Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/04/95 11/27/95 11/02/95 10/17/95	10.00 25.00 27.75 30.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/10/95 09/20/95 09/14/95	25.00 179.00 57.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
David L. Gould Company 600 Wilshire Boulevard #1500 Los Angeles, CA 90017	Fee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/04/95	340.10
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Fundraising Commission & Fees Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/22/95	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Fundraising Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/04/95 11/29/95	61.88 92.05
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/01/95 11/01/95 10/26/95 10/23/95	409.23 104.74 222.00 1,420.00

SUBTOTAL of Disbursements This Page (optional)

5,743.75

TOTAL This Period (last page this line number only)

95030270316

SCHEDULE B ITEMIZED DISBURSEMENTS
Other Federal Operating Expenses

Use separate schedule(s)
for each category of the
Detailed Summary Page
(07/01/95 - 12/31/95)

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2 | 2
FOR LINE NUMBER
21 (b)

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NAME OF COMMITTEE (In Full)

PEOPLE HELPING PEOPLE CD0248948

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/03/95	227.74
		10/03/95	600.00
		10/02/95	488.12
		09/20/95	500.00
B. Full Name, Mailing Address and ZIP Code same as above	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/19/95	1,200.00
		09/15/95	1,000.00
		09/14/95	334.84
		09/13/95	482.91
C. Full Name, Mailing Address and ZIP Code same as above	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/12/95	2,110.00
D. Full Name, Mailing Address and ZIP Code Printco Graphics Inc. 752 S. San Pedro Street Los Angeles, CA 90014	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/09/95	2,745.29
		09/20/95	256.33
E. Full Name, Mailing Address and ZIP Code Unitized other federal operating expenses (less than \$200) This Period: 07/01/95 - 12/31/95	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		298.72
F. Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional)	10,243.95
TOTAL This Period (last page this line number only)	15,987.70

9603027347

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
 (07/01/85 - 12/31/96)

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NAME OF COMMITTEE (in Full)

PEOPLE HELPING PEOPLE C00248948

A. Full Name, Mailing Address and ZIP Code Jesse Jackson Jr. Campaign 7016 S. Euclid Chicago, IL 60649	Purpose of Disbursement IL/02 House of Rep. Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 09/12/95	Amount of Each Disbursement this Period 5,000.00
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)

5,000.00

TOTAL This Period (last page this line number only)

5,000.00

96030270340

