

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

MAY 20 11 19 AM '97

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING**

ADDRESS (number and street)  Check if different than previously reported  
**P.O. BOX 53301**

CITY, STATE and ZIP CODE  
**WASHINGTON, DC 20009**

2. FEC IDENTIFICATION NUMBER  
**000109355**

3.  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

- 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	4/1/97 through 4/30/97		
6. (a) Cash on Hand January 1, 19 97			\$ 24,191.11
(b) Cash on Hand at Beginning of Reporting Period		\$ 50,643.57	
(c) Total Receipts (from Line 19)		\$ 38,972.50	\$ 147,155.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 89,616.07	\$ 171,346.27
7. Total Disbursements (from Line 20)		\$ 22,073.38	\$ 103,803.58
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 67,542.69	\$ 67,542.69
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ NONE	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3430
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ NONE	

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: **JULIE BURTON, ASSISTANT TREASURER**

Signature of Treasurer: *Julie Burton*    Date: **4/16/97**

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 9/83)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING	FROM 4/1/97	TO 6/30/97	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (Use Schedule A)	26,630.00	61,501.00	11(a)(i)
ii. Unitemized	11,501.89	77,667.28	11(a)(ii)
iii. Total (add i and ii) >	38,131.89	139,168.28	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) >	38,133.89	139,168.28	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	604.56	4,010.04	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	236.05	576.84	17
18. Transfers from Nonfederal Account for Joint Activity		3,000.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	38,972.50	147,155.16	19
20. Total Federal Receipts (subtract line 18 from line 19) >	38,972.50	143,755.16	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	689.31	43,108.32	21(a)(i)
ii. Non-Federal Share	161.09	5,299.55	21(a)(ii)
b. Other Federal Operating Expenditures	19,182.18	52,754.91	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	20,032.58	101,162.78	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,040.80	2,040.80	23
24. Independent Expenditures (Use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (Use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements		600.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	22,073.38	103,803.58	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	21,912.29	98,504.03	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	38,133.89	139,168.28	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	38,133.89	139,168.28	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	19,871.49	95,863.23	35
36. Offsets to Operating Expenditures (from line 15)	604.56	4,010.04	36
37. Net Operating Expenditures (subtract line 36 from 35) >	19,266.93	91,853.19	37

5/19/97

Page 1 of 5  
Line 11(a)

Voters For Choice  
Schedule A  
Itemized Individual Contributions  
4/01/97 - 4/30/97

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 names and address of any political committee to solicit contributions from such committee.

Balazs, Endra 200 Old Palisade Road, #24 BC Fort Lee, NJ 07024	Employer: Biomatrex Inc. Occupation: Vice President Aggregate Year to Date: 1,000.00	Date 4/01/97	Amount: 1,000.00
Block, Maxine 5249 Fair Oaks Street Pittsburgh, PA 15217	Employer: None Occupation: Housewife Aggregate Year to Date: 400.00	Date 4/01/97	Amount: 400.00
Brooks, Edward 2500 Virginia Avenue, NW Suite 301-S Washington, DC 20037	Employer: Self Occupation: Attorney Aggregate Year to Date: 500.00	Date 4/01/97	Amount: 500.00
Hefner, Christie 680 North Lake Shore Drive Chicago, IL 60611	Employer: Playboy Ent. Occupation: President Aggregate Year to Date: 1,000.00	Date 4/01/97	Amount: 1,000.00
Hassel, John 123 Santa Maria Avenue Portola Valley, CA 94028	Employer: None Occupation: Retired Aggregate Year to Date: 500.00	Date 4/01/97	Amount: 500.00
Hicks, Caroline 1520 Silver King Drive Aspen, CO 81611	Employer: Self Occupation: Consultant Aggregate Year to Date: 250.00	Date 4/01/97	Amount: 250.00
		Subtotal this Page	3,650.00

Voters For Choice  
Schedule A  
Itemized Individual Contributions  
4/01/97 - 4/30/97

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Kind, Patricia 1776 Oak Hill Dr  Huntingdon Valley, PA 19006-772	Employer: None Occupation: Philanthropist Aggregate Year to Date: 5,000.00	Date 4/01/97   Amount: 5,000.00
Lightman, Richard P.O. Box 171809  Memphis, TN 38117	Employer: self-employed Occupation: Theater Owner Aggregate Year to Date: 1,500.00	Date 4/01/97   Amount: 1,500.00
Raffin, Deborah 8955 Beverly Blvd.  Los Angeles, CA 90048	Employer: Requested Occupation: Editor Aggregate Year to Date: 250.00	Date 4/01/97   Amount: 250.00
Rigler, Lloyd P.O. Box 828  Burbank, CA 91503-0828	Employer: Self Occupation: Philanthropist Aggregate Year to Date: 2,500.00	Date 4/01/97   Amount: 2,500.00
Tolman, Martha 1 Calvin Circle, C-401  Evanston, IL 60201	Employer: None Occupation: Homemaker Aggregate Year to Date: 3,000.00	Date 4/01/97   Amount: 3,000.00
Welsch, Howie 1224 Chase Heritage Cir., Apt 2  Sterling, VA 20164	Employer: Jamiz, Inc. Occupation: Sales Aggregate Year to Date: 280.00	Date 4/01/97   Amount: 280.00
	Subtotal this Page	12,530.00

Voters For Choice  
Schedule A  
Itemized Individual Contributions  
4/01/97 - 4/30/97

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<p>Friedberg, Charlton 6 Roland Mews  Baltimore, MD 21210</p>	<p>Employer: Retired Occupation: Retired Aggregate Year to Date: 500.00</p>	<p>Date 4/07/97     Amount: 500.00</p>
<p>Palevsky, Max 924 Westwood Blvd., #700  Los Angeles, CA 90024</p>	<p>Employer: Self Occupation: Investor Aggregate Year to Date: 1,500.00</p>	<p>Date 4/07/97     Amount: 1,500.00</p>
<p>Raitt, B. P.O. Box 32666  Los Angeles, CA 90046</p>	<p>Employer: Self Occupation: Artist Aggregate Year to Date: 2,000.00</p>	<p>Date 4/07/97     Amount: 2,000.00</p>
<p>Bierlein, Patricia 210 Golfview Drive  Saginaw, MI 48603-5884</p>	<p>Employer: Requested Occupation: Requested Aggregate Year to Date: 300.00</p>	<p>Date 4/15/97     Amount: 300.00</p>
<p>Burgher, Sonya 1120 Park Avenue  Rochester, NY 14610</p>	<p>Employer: None Occupation: Retired Aggregate Year to Date: 1,000.00</p>	<p>Date 4/15/97     Amount: 1,000.00</p>
<p>Burrows, Linda 9171 Wilshire Blvd., Suite 530  Beverly Hills, CA 90210</p>	<p>Employer: Self Occupation: Activists Aggregate Year to Date: 1,000.00</p>	<p>Date 4/15/97     Amount: 1,000.00</p>
		<p>Subtotal this Page 6,300.00</p>

Voters For Choice  
Schedule A  
Itemized Individual Contributions  
4/01/97 - 4/30/97

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<p>Channing, Stockard Park Avenue  New York, NY 10128</p>	<p>Employer: Self-employed Occupation: Actress Aggregate Year to Date: 1,000.00</p>	<p>Date 4/15/97     Amount: 1,000.00</p>
<p>Kellogg, Marion 772 Brush Hill Road  Stowe, VT 05672</p>	<p>Employer: Self Occupation: Housewife Aggregate Year to Date: 600.00</p>	<p>Date 4/15/97     Amount: 600.00</p>
<p>Lichtenberg, E. Steve 132 E. Delaware Place, No. 5701  Chicago, IL 60611</p>	<p>Employer: Self Occupation: Doctor Aggregate Year to Date: 250.00</p>	<p>Date 4/15/97     Amount: 250.00</p>
<p>Love, Marcana 1175 Palham Road  Winnetka, IL 60093</p>	<p>Employer: Requested Occupation: Activist Aggregate Year to Date: 500.00</p>	<p>Date 4/15/97     Amount: 500.00</p>
<p>MacGraw, Ali  10345 West Olympic Boulevard Los Angeles, CA 90064</p>	<p>Employer: Rogers and Cowan Occupation: actress Aggregate Year to Date: 250.00</p>	<p>Date 4/15/97     Amount: 250.00</p>
<p>Newman, Frances 100 E. Bellevue Place, #12B  Chicago, IL 60611-1120</p>	<p>Employer: None Occupation: Retired Aggregate Year to Date: 300.00</p>	<p>Date 4/15/97     Amount: 300.00</p>
		<p>Subtotal this Page 2,900.00</p>

Voters For Choice  
Schedule A  
Itemized Individual Contributions  
4/01/97 - 4/30/97

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<p>Channing, Stockard Park Avenue  New York, NY 10128</p>	<p>Employer: Self-employed Occupation: Actress Aggregate Year to Date: 1,000.00</p>	<p>Date 4/15/97</p>	<p>Amount: 1,000.00</p>
<p>Kallogg, Marion 772 Brush Hill Road  Stowe, VT 05672</p>	<p>Employer: Self Occupation: Housewife Aggregate Year to Date: 600.00</p>	<p>Date 4/15/97</p>	<p>Amount: 600.00</p>
<p>Lichtenberg, E. Steve 132 E. Delaware Place, No. 5701  Chicago, IL 60611</p>	<p>Employer: Self Occupation: Doctor Aggregate Year to Date: 250.00</p>	<p>Date 4/15/97</p>	<p>Amount: 250.00</p>
<p>Love, Marcena 1175 Pelham Road  Winnetka, IL 60093</p>	<p>Employer: Requested Occupation: Activist Aggregate Year to Date: 500.00</p>	<p>Date 4/15/97</p>	<p>Amount: 500.00</p>
<p>MacGraw, Ali Breslauer, Jacobson, Rutman &amp; S 10345 West Olympic Boulevard Los Angeles, CA 90064</p>	<p>Employer: Rogers and Cowan Occupation: actress Aggregate Year to Date: 250.00</p>	<p>Date 4/15/97</p>	<p>Amount: 250.00</p>
<p>Newman, Frances 100 E. Bellevue Place, #12B  Chicago, IL 60611-1120</p>	<p>Employer: None Occupation: Retired Aggregate Year to Date: 300.00</p>	<p>Date 4/15/97</p>	<p>Amount: 300.00</p>
Subtotal this Page			2,900.00

Voters For Choice  
Schedule A  
Itemized Individual Contributions  
4/01/97 - 4/30/97

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Riney, Anne 225 East 46th Street, PHC  New York, NY 10017	Employer: Solomon Broth, Inc. Occupation: Internal Consultant Aggregate Year to Date: 250.00	Date 4/15/97	Amount: 250.00
Zimmerman, Irene 1126 Northwest 33rd Avenue  Gainesville, FL 32609	Employer: Retired Occupation: Retired Aggregate Year to Date: 250.00	Date 4/15/97	Amount: 250.00
Turshen, Rochelle 68 Pleasant Ridge Road  Harrison, NY 10528	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 4/21/97	Amount: 250.00
Hanson, M.D., Mildred 710 East 24th Street, Suite 403  Minneapolis, MN 55404	Employer: Dr. Hanson MD/Self Occupation: Physician Aggregate Year to Date: 500.00	Date 4/23/97	Amount: 500.00
Subtotal this Page			1,250.00
Total Number of Receipts:	28	Grand Total all Receipts:	26,630.00



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 15

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

**NAME OF COMMITTEE (in Full)**

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
IRS PHILDELPHIA, PA 19162 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAYROLL TAX OVERPAYMENT REFUND Occupation	4/15/97	604.56 Aggregate Year-to-Date > \$ 604.56
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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period 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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period 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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period 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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period 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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period 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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period Aggregate Year-to-Date > \$
H. 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 Occupation	Date (month, day, year)	Amount of Each Receipt this Period Aggregate Year-to-Date > \$

**SUBTOTAL** of Receipts This Page (optional) ..... 604.56

**TOTAL** This Period (last page this line number only) ..... 604.56

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NATIONSBANK 2631 CONNECTICUT AVE NW WASHINGTON, DC 20008	INTEREST	4/30/97	21.04
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 145.61	
B. Full Name, Mailing Address and ZIP Code MERRILL LYNCH 1850 K STREET, NW WASHINGTON, DC 20006	INTEREST	4/30/97	215.01
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 431.23	
C. Full Name, Mailing Address and ZIP Code			
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			
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			
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			
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			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

<b>SUBTOTAL of Receipts This Page (optional)</b>	236.05
<b>TOTAL This Period (last page this line number only)</b>	236.05

**METHOD OF ALLOCATION FOR SHARED FEDERAL  
AND NON-FEDERAL ADMINISTRATIVE EXPENSES  
AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

**NATIONAL PARTY COMMITTEES**

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) .....  %  
 PRESIDENTIAL YEAR (85%)  
 ALL OTHER YEARS (80%)

**HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES**

MINIMUM FEDERAL PERCENTAGE (65%) (IF CHECKED, ENTER 65% IN BOX TO RIGHT) .....  %  
 OR  
 FUNDS EXPENDED:  
 \* ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL .....  %  
 \* ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL .....  %  
 ADJUSTMENTS TO FUNDS EXPENDED:  
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL ..... \$  .....  %  
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL ..... \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR.

**SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES**

FUNDS EXPENDED:  
 \* ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL .....  75 %  
 \* ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL .....  25 %  
 ADJUSTMENTS TO FUNDS EXPENDED:  
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL ..... \$  .....  %  
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL ..... \$

**STATE AND LOCAL PARTY COMMITTEES**

**BALLOT COMPOSITION**

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

	NUMBER OF POINTS
1. PRESIDENT ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
2. U.S. SENATE ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
3. U.S. CONGRESS ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3) .....	<input type="text"/>
6. GOVERNOR ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
8. OTHER STATEWIDE OFFICE(S) ..... <input type="checkbox"/> (1 OR 2 POINTS) .....	<input type="text"/>
7. STATE SENATE ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
8. STATE REPRESENTATIVE ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
8. LOCAL CANDIDATES ..... <input type="checkbox"/> (1 OR 2 POINTS) .....	<input type="text"/>
10. EXTRA NON-FEDERAL POINT ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
11. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10) .....	<input type="text"/>
12. TOTAL POINTS (LINE 4 PLUS LINE 11) .....	<input type="text"/>

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 .....  %

NAME OF COMMITTEE

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

**ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.**

Methods of allocation:

I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.

II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.

III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
IL 96 - CHICAGO EVENT IN 1996 ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED	88	12
NAME OF ACTIVITY OR EVENT ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
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NAME OF ACTIVITY OR EVENT ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		

JOINT FEDERAL/NON-FEDERAL  
ACTIVITY SCHEDULE

NAME OF COMMITTEE					
VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING					
A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
AVOCADO PRODUCTIONS 440 B PIER AVE HERMOSA BEACH, CA 90254	IL 96 TRAVEL EXPENSES	4/11/97	396.32	348.76	47.56
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 396.32 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
JULIE BURTON 2639 CONNECTICUT AVE NW WASHINGTON, DC 20008	AIRFARE REIMBURSEMENT	4/11/97	132.50	99.37	33.13
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
YURA & COMPANY C/O 135 WEST 50TH NY, NY 10020	CATERING	4/11/97	191.00	143.25	47.75
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
LOCK TECHNOLOGY 6505 MID CITIES AVE BELTSVILLE, MD 20705	NEW DOOR LOCKS	4/11/97	130.58	97.93	32.65
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 3,004.90 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			850.40	689.31	161.09
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a i and non-Fed. share to 21 a ii)			850.40	689.31	
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4  
FOR LINE NUMBER 21 {B}

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**NAME OF COMMITTEE (in Full)**

**VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HACHETTE FILIPACCHI MAGAZINES 1633 BROADWAY 4RD FLOOR NEW YORK, NY 10019	LIST RENTAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/97	448.00
US POSTMASTER 900 BRENTWOOD AVE WASHINGTON, DC 20066	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/97 4/7/97	3,616.00 1,500.00
MEL DUNN ASSOCIATES 2 HARD SCRABBLE ROAD CROTON FALLS, NY 10519	LIST RENTAL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/97	525.00
VOTERS FOR CHOICE PETTY CASH P.O. BOX 53301 WASHINGTON, DC 20009	TAXI, METRO & PER DIEMS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/7/97	180.00
BELL ATLANTIC P.O. BOX 646 BALTIMORE, MD 21265	LOCAL PHONE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	527.03
ALARM SECURITY SYSTEM 1712 14TH STREET, NW WASHINGTON, DC 20009	SECURITY FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/97	30.00
PBCC P.O. BOX 5151 NORWALK, CT 06856	POSTAGE MACHINE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	97.98
US POSTMASTER 900 BRENTWOOD AVE WASHINGTON, DC 20066	P O BOX FEE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/13/97	16.50
NATIONAL BLACK WOMENS HEALTH PROJECT 1502 FAIRLAKES PLACE MITCHELLVILLE, MD 20721	TICKETS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	500.00

SUBTOTAL of Disbursements This Page (optional) .....

7,440.51

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 2 OF 4

FOR LINE NUMBER 21 (B)

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**NAME OF COMMITTEE (In Full)**

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

A. 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
NARAL 1156 15TH STREET, NW WASHINGTON, DC 20005	PUBLICATION	4/11/97	24.99
B. Full Name, Mailing Address and ZIP Code LUCENT TECHNOLOGIES 2110 WASHINGTON BLVD ARLINGTON, VA 22204	Purpose of Disbursement FAX MAINTENANCE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	29.19
C. Full Name, Mailing Address and ZIP Code KINKOS P.O. BOX 105522 ATLANTA, GA 30348	Purpose of Disbursement PRINTING & COPYING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	22.20
D. Full Name, Mailing Address and ZIP Code STAPLES P.O. BOX 30292 SALT LAKE CITY, UT 84130	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	91.23
E. Full Name, Mailing Address and ZIP Code CORPORATE COMPUTER SERVICE 9301 ANNAPOLIS ROAD LANHAM, MD 20706	Purpose of Disbursement COMPUTER REPAIR Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	250.83
F. Full Name, Mailing Address and ZIP Code T/C MAIL HOUSE 809 KEITH LANE OWINGS, MD 20736	Purpose of Disbursement MAILHOUSE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	3,891.94
G. Full Name, Mailing Address and ZIP Code MANPOWER P.O. BOX 7247-0208 PHILADELPHIA, PA 19170	Purpose of Disbursement TEMP HELP Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	488.96
H. Full Name, Mailing Address and ZIP Code OFFICE SPECIALISTS P.O. BOX 60583 CHARLOTTE, NC 28260	Purpose of Disbursement TEMP HELP Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	118.57
I. Full Name, Mailing Address and ZIP Code COOK POLITICAL REPORT 900 2ND STREET NE WASHINGTON, DC 20002	Purpose of Disbursement SUBSCRIPTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	497.03

SUBTOTAL of Disbursements This Page (optional)

5,414.75

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 3 OF 4

FOR LINE NUMBER 21 (B)

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NAME OF COMMITTEE (in Full)

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
VOTERS FOR CHOICE PETTY CASH P.O. BOX 53301 WASHINGTON, DC 20009	TAXI, METRO - TRAVEL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
US POSTMASTER 900 BRENTWOOD AVE WASHINGTON, DC 20066	POSTAGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	960.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NATIONSBANK 2631 CONNECTICUT AVE NW WASHINGTON, DC 20008	PAYROLL TAX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	499.52
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
DC GOVERNMENT P.O. BOX 7792 WASHINGTON, DC 20044	PAYROLL TAX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	70.06
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
VIRGINIA DEPT OF TAXATION P.O. BOX 3202 RICHMOND, VA 23209	PAYROLL TAX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	34.40
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LINDA SOLOMON 3500 COMMODORE JOSHUA DR WASHINGTON, DC 20018	PAYROLL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	956.07
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JILL ERICKSON 501 SLATERS LANE ALEXANDRIA, VA 22314	PAYROLL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	491.38
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
HBP 952 FREDRICK ST HAGERSTOWN, MD 21740	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	1,216.13
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MANPOWER P.O. BOX 7247 0208 PHILADELPHIA, PA 19170	TEMP HELP Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	322.24

SUBTOTAL of Disbursements This Page (optional)

4,749.80

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 4  
FOR LINE NUMBER 21, 22

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**NAME OF COMMITTEE (In Full)**

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WORKING ASSETS P.O. BOX 2041 MECHANICSBURG, PA 17055	LONG DISTANCE PHONE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	150.06
B. Full Name, Mailing Address and ZIP Code ALERT DELIVERY SERVICE P.O. BOX 4250 ROCKVILLE, MD 20849	COURIER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	54.83
C. Full Name, Mailing Address and ZIP Code XEROX CORPORATION P.O. BOX 7598 PHILADELPHIA, PA 19101	COPIER MAINTENANCE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	67.36
D. Full Name, Mailing Address and ZIP Code LINGUEX 2639 CONNECTICUT AVE WASHINGTON, DC 20008	RENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	920.00
E. Full Name, Mailing Address and ZIP Code FEDERAL EXPRESS P.O. BOX 1140 MEMPHIS, TN 38101	COURIER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/17/97	138.51
F. Full Name, Mailing Address and ZIP Code DC DOES P.O. BOX 96664 WASHINGTON, DC 20090	TAXES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/97	169.85
G. Full Name, Mailing Address and ZIP Code NATIONSBANK 2631 CONNECTICUT AVE NW WASHINGTON, DC 20008	BANK SERVICE CHARGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/97	70.25
H. Full Name, Mailing Address and ZIP Code VISA CHARGES UNDER \$200.00	PHONE CHARGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/23/97	6.46
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) .....

1,577.12

**TOTAL** This Period (last page this line number only) .....

19,182.18

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in full)

VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CIRIO N. RODRIGUEZ FOR CONGRESS 363 W. HARDING SAN ANTONIO, TX 78221	CANDIDATE CONTRIBUTION TX D 28 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL RUN OFF	4/1/97	2,000.00
B. Full Name, Mailing Address and ZIP Code TOM HARKIN FOR SENATE P.O. BOX 74884 CEDAR RAPIDS, IA 54207	CANDIDATE CONTRIBUTION IA D SENATE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/11/97	40.80 (IN KIND)
C. Full Name, Mailing Address and ZIP Code TRAVEL EXPENSES - TAXI -	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)

2,040.80

TOTAL This Period (last page this line number only)

2,040.80

