

USE FEC MAILING LABEL
OR
TYPE OR PRINT NAME

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 20009-9301

RECEIVED
 FEDERAL ELECTION
 COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
 C00109356 42 11 '96
 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 10/14/96
 (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>10/1/96</u> through <u>10/16/96</u>		\$ 124,274.47
6. (a) Cash on Hand January 1, 19____		
(b) Cash on Hand at Beginning of Reporting Period	\$ 130,385.62	
(c) Total Receipts (from Line 10)	\$ 35,209.66	\$ 459,560.15
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 165,595.28	\$ 583,834.62
7. Total Disbursements (from Line 80)	\$ 40,771.99	\$ 459,011.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 124,823.29	\$ 124,823.29
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 800-424-9630 Local 202-219-3420
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 

Date 10/24/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

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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 VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING		REPORT COVERING PERIOD FROM 10/1/96 TO 10/16/96	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees		27,650.00	169,829.25
i. Itemized (use Schedule A)			
ii. Unitemized		4,455.50	263,316.21
iii. Total (add i and ii) >		32,105.50	433,145.46
b. Political Party Committees			
c. Other Political Committees (such as PACs)		1,000.00	3,000.00
d. Total Contributions (add a, b, and c) >			
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			9,213.84
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		2,104.16	3,888.15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			7,767.93
18. Transfers from Nonfederal Account for Joint Activity			2,544.77
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		35,209.66	459,560.15
20. Total Federal Receipts (subtract line 16 from line 19) >		35,209.66	457,015.38
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			23,907.27
i. Federal Share			3,636.25
ii. Non-Federal Share		13,799.25	243,210.57
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (add a i, a ii, and b) >		13,799.25	270,754.09
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		4,000.00	148,000.00
24. Independent Expenditures (use Schedule E)		22,972.74	30,757.24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >			9,500.00
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		40,771.99	459,031.33
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		40,771.99	455,375.08
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		33,105.50	433,145.46
33. Total Contribution Refunds (from line 28d)		0.00	0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)		33,105.50	433,145.46
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		13,799.25	267,117.84
36. Offsets to Operating Expenditures (from line 15)		0.00	3,888.15
37. Net Operating Expenditures (subtract line 36 from 35) >		13,799.25	263,229.69

10/15/96

Page 1 of 7
Line 11(a)

Voters For Choice
Schedule A
Itemized Individual Contributions
10/01/96 - 10/15/96

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.

Abrams, Bruce 3257 N. Sheffield Chicago, IL 60657	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/01/96 Amount: 250.00
Bluhm, Leslie 20 Fox Lane Winnetka, IL 60093	Employer: Requested Occupation: Requested Aggregate Year to Date: 5,000.00	Date 10/01/96 Amount: 5,000.00
Boothe, Barry 2435 Divisadero Street San Francisco, CA 94115	Employer: D'Accord, Inc. Occupation: Managing Director Aggregate Year to Date: 500.00	Date 10/01/96 Amount: 250.00
Drazy, Mary 6 Amherst Road Andover, MA 01810	Employer: None Occupation: Housewife Aggregate Year to Date: 500.00	Date 10/01/96 Amount: 400.00
Gollon, Patar 15 Eleanor Place Huntington, NY 11743	Employer: I Kassay, Inc. Occupation: Executive Aggregate Year to Date: 2,000.00	Date 10/01/96 Amount: 1,000.00
Gresham, Charles 1249 Kearny Street San Francisco, CA 94133	Employer: None Occupation: Retired Aggregate Year to Date: 700.00	Date 10/01/96 Amount: 200.00
Subtotal this Page		7,100.00

10/15/96

Page 2 of 7
Line 11(a)

Voters For Choice
Schedule A
Itemized Individual Contributions
10/01/96 - 10/15/96

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Hull, M. Blair 311 S. Wacker Drive, Suite 1400 Chicago, IL 60606	Employer: Requested Occupation: Requested Aggregate Year to Date: 5,000.00	Date 10/01/96	Amount: 5,000.00
Limburg, Peter 229 Bedford Banksville Road Bedford, NY 10506	Employer: Self Occupation: Writer Aggregate Year to Date: 300.00	Date 10/01/96	Amount: 300.00
Nicholas, Llewellyn 50 Central Park West New York, NY 10023	Employer: Requested Occupation: Requested Aggregate Year to Date: 500.00	Date 10/01/96	Amount: 500.00
Stasch, Julia 556 W Arlington Place Chicago, IL 60614	Employer: Requested Occupation: Requested Aggregate Year to Date: 500.00	Date 10/01/96	Amount: 500.00
Stein, Mary Ann 5643 Bent Branch Road Bethesda, MD 20816	Employer: Requested Occupation: Requested Aggregate Year to Date: 500.00	Date 10/01/96	Amount: 500.00
Tabb, Stephen 780 Third Avenue, #3103 New York, NY 10017-2024	Employer: Tabb and Co., P.C. Occupation: Requested Aggregate Year to Date: 1,000.00	Date 10/01/96	Amount: 500.00
		Subtotal this Page	7,300.00

10/15/96

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Line 11(a)

Voters For Choice
Schedule A
Itemized Individual Contributions
10/01/96 - 10/15/96

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<p>Thomas, Marlo 420 East 54th Street, #22-F New York, NY 10022</p>	<p>Employer: Self-employed Occupation: Actress Aggregate Year to Date: 1,500.00</p>	<p>Date 10/01/96 Amount: 1,500.00</p>
<p>Costner, Cindy 1888 Century Park East, Suite 2 Los Angeles, CA 90067</p>	<p>Employer: Self Occupation: Activist Aggregate Year to Date: 1,000.00</p>	<p>Date 10/11/96 Amount: 1,000.00</p>
<p>Holston, Judy 123 18th Helena Drive Los Angeles, CA 90049</p>	<p>Employer: Self Occupation: Activist Aggregate Year to Date: 2,500.00</p>	<p>Date 10/11/96 Amount: 2,500.00</p>
<p>Hutchins, III, Waldo 3 Chapel Gate Lane Glen Head, NY 11545</p>	<p>Employer: Sprague, Dwyer, etc. Occupation: Attorney Aggregate Year to Date: 400.00</p>	<p>Date 10/11/96 Amount: 200.00</p>
<p>Ladd, Cindra 312 North Faring Road Los Angeles, CA 90077</p>	<p>Employer: Self Occupation: Activist Aggregate Year to Date: 1,000.00</p>	<p>Date 10/11/96 Amount: 1,000.00</p>
<p>Loder, Robert 535 Gradyville Road #G104 Newton Square, PA 19073-2815</p>	<p>Employer: Requested Occupation: Requested Aggregate Year to Date: 500.00</p>	<p>Date 10/11/96 Amount: 200.00</p>
		<p>Subtotal this Page 6,400.00</p>

10/15/96

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Line 11(a)

Voters For Choice
Schedule A
Itemized Individual Contributions
10/01/96 - 10/15/96

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Schwab, Louise 802 N. Linden Drive Beverly Hills, CA 90210	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/11/96	Amount: 250.00
Tolman, Martha 1 Calvin Circle, C-401 Evanston, IL 60201	Employer: None Occupation: Homemaker Aggregate Year to Date: 2,500.00	Date 10/11/96	Amount: 500.00
West, Robert 305 Nautilus Drive Madison, WI 53705	Employer: Requested Occupation: Requested Aggregate Year to Date: 300.00	Date 10/11/96	Amount: 100.00
Wisnicki, Howard 1642 Westwood Blvd, 3rd Floor Los Angeles, CA 90024	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/11/96	Amount: 250.00
Cohn, Olive 14 Briarfield Drive Great Neck, NY 11020	Employer: None Occupation: Retired Aggregate Year to Date: 300.00	Date 10/14/96	Amount: 100.00
Diamond, Hester 300 Central Park West Apartment 19-D New York, NY 10024	Employer: None Occupation: Retired Aggregate Year to Date: 500.00	Date 10/14/96	Amount: 500.00

Subtotal this Page 1,700.00

10/15/96

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Line 11(a)

Voters For Choice
Schedule A
Itemized Individual Contributions
10/01/96 - 10/15/96

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Gilbert, Sarah 1999 Hard Scrabble Place Boulder, CO 80303	Employer: NIST dept commerce Occupation: Physicist Aggregate Year to Date: 400.00	Date 10/14/96	Amount: 100.00
Raffin, Deborah 8955 Beverly Blvd. Los Angeles, CA 90048	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/14/96	Amount: 250.00
Rapke, Sandra 1240 Benedict Cyn Beverly Hills, CA 90210	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/14/96	Amount: 250.00
Silver, Pamela 358 Sycamore Road Santa Monica, CA 90402	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/14/96	Amount: 250.00
Squire, Harriet 26822 Malibu Cove Colony Drive Malibu, CA 90265	Employer: Requested Occupation: Requested Aggregate Year to Date: 750.00	Date 10/14/96	Amount: 750.00
Strauss, Susan 609 N. Palm Drive Beverly Hills, CA 90210	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/14/96	Amount: 250.00
Subtotal this Page			1,850.00

10/15/96

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Line 11(a)

Voters For Choice
Schedule A
Itemized Individual Contributions
10/01/96 - 10/15/96

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Winkler, Margo 840 Loma Vista Drive Beverly Hills, CA 90210	Employer: Requested Occupation: Requested Aggregate Year to Date: 1,000.00	Date 10/14/96	Amount: 1,000.00
Gresham, Charles 1249 Kearny Street San Francisco, CA 94133	Employer: None Occupation: Retired Aggregate Year to Date: 700.00	Date 10/15/96	Amount: 500.00
Jitkoff, Julia 900 Holland Road Far Hills, NJ 07931	Employer: Requested Occupation: Requested Aggregate Year to Date: 250.00	Date 10/15/96	Amount: 250.00
Lasher, Craig 4800 Erskine Road College Park, MD 20740-3723	Employer: Population Action Occupation: Policy Analyst Aggregate Year to Date: 250.00	Date 10/15/96	Amount: 250.00
Widlund, Olof 29 Washington Sq. West Apartment 9-B New York, NY 10011	Employer: NYU Occupation: Professor Aggregate Year to Date: 250.00	Date 10/15/96	Amount: 250.00
Wolter, Charles 2028 Soledad Avenue La Jolla, CA 92037	Employer: None Occupation: Retired Aggregate Year to Date: 800.00	Date 10/15/96	Amount: 800.00
		Subtotal this Page	3,050.00

10/15/96

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Line 11(a)

Voters For Choice
Schedule A
Itemized Individual Contributions
| 10/01/96 - 10/15/96

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Zimmerman, Irene
1126 Northwest 33rd Avenue
Gainesville, FL 32609

Employer:
Retired
Occupation:
Retired
Aggregate Year to Date:
650.00

Date Amount:
10/15/96 250.00

Subtotal this Page 250.00

Total Number of Receipts: 37 Grand Total all Receipts: 27,650.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11C

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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
AMERICAN NURSES ASSOCIATION PAC 600 MARYLAND AVE, SW SUITE 100 WASHINGTON, DC 20024	AMERICAN NURSES ASSOC.	10/1/96	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
B. 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 > \$	
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)

1,000.00

TOTAL This Period (last page this line number only)

1,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 15

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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
US POSTAL SERVICE 2700 CAMPUS DRIVE SAN MATEO, CA 94497	POSTAL METER REFUND	10/1/96	2,104.16
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,104.16	
B. 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 > \$	
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) 2,104.16

TOTAL This Period (last page this line number only) 2,104.16

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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
VIRGINIA DEPT OF TAXATION P.O. BOX 27264 RICHMOND, VA 23261	PAYROLL TAX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/2/96	29.81
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)	10/2/96	66.00
US POSTMASTER 900 BRENTWOOD NE WASHINGTON, DC 20066	POSTAGE DIRECT MAIL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/4/96	3,243.20
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)	10/4/96	2,000.00
LINGUEX 2639 CONNECTICUT AVE NW WASHINGTON, DC 20008	RENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	1,370.00
JILL ERICKSON 501 SLATERS LANE ALEXANDRIA, VA 22314	PAYROLL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	451.89
XEROX COMPANY P.O. BOX 7598 PHILDELPHIA, PA 19101	COPIER SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	144.62
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)	10/9/96	609.36
PITNEY BOWES P.O. BOX 85390 LOUISVILLE, KY 40285	POSTAGE METER SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	183.28

SUBTOTAL of Disbursements This Page (optional)

7,549.16

TOTAL This Period (last page this line number only)

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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 Page
UNSHIPPERS ASSOCIATION P.O. BOX 061287 PALM BAY, FL 32906	COURIER Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	46.40
B. Full Name, Mailing Address and ZIP Code ROBIN WRIGHT 535 QUINCY MAIL CENTER CAMBRIDGE, MA 02138	CONSULTANT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	1,000.00
C. Full Name, Mailing Address and ZIP Code IRS PHILADELPHIA, PA 19255	TAX Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	196.62
D. 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)	10/9/96	254.45
E. Full Name, Mailing Address and ZIP Code RAD ART SCREEN PRINTING 804 N. NEIL STREET CHAMPAIGN, IL 61820	PRINTING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	346.00
F. Full Name, Mailing Address and ZIP Code GILBERT & WOLFAND 2201 WISCONSIN AVE NW WASHINGTON, DC 20007	ACCOUNTANT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	79.75
G. Full Name, Mailing Address and ZIP Code JANICE STEINSCHNEIDER 2639 CONNECTICUT AVE NW WASHINGTON, DC 20008	COMPUTER REIMBURSEMENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/96	2,500.00
H. Full Name, Mailing Address and ZIP Code AMY RICHARDS 230 PARK AVE 7TH FL NEW YORK, NY 10169	CONSULTANT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	669.20
I. Full Name, Mailing Address and ZIP Code LICHTMAN, TRISTER, SINGER & ROSS 3666 CONNECTICUT AVE NW WASHINGTON, DC 20009	ATTORNEY Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	910.86

SUBTOTAL of Disbursements This Page (optional)

6,003.28

TOTAL This Period (last page this line number only)

*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)

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 Page
THE SIVE GROUP 359 WEST CHICAGO AVE #201 CHICAGO, IL 60610	CONSULTANT EXPENSES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	526.42
B. Full Name, Mailing Address and ZIP Code HBP 952 FREDERICK STREET HAGERSTOWN, MD 21740	CREDIT - OVERPAYMENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/96	{279.61}
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 Page
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 Page
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 Page
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 Page
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 Page
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 Page
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 Page

SUBTOTAL of Disbursements This Page (optional)

246.81

TOTAL This Period (last page this line number only)

13,799.25

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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 Page
DAVID PRICE FOR CONGRESS 610 HILLSBOROUGH STREET 103 RALEIGH, NC 27603	CANDIDATE CONTRIBUTION D NC 4 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/96	2,500.00
B. Full Name, Mailing Address and ZIP Code HARVEY GANTT FOR SENATE 119 E 8TH STREET CHARLOTTE, NC 28202	CANDIDATE CONTRIBUTION D NC SENATE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/96	1,500.00
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 Page
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 Page
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 Page
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 Page
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 Page
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 Page
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 Page

SUBTOTAL of Disbursements This Page (optional) 4,000.00

TOTAL This Period (last page this line number only) 4,000.00

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (in Full)				
VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING				
Full Name, Mailing Address & ZIP Code of Each Payer	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
THE NOVEMBER GROUP 1400 I STREET NW 650 WASHINGTON, DC 20005	PHONE BANKING	10/11/96	12,399.54	SEE ALLOCATION BELOW <input type="checkbox"/> Support <input type="checkbox"/> Oppose
			4,133.18 MEMO 1	MICHELA ALIOTO CA 1 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
			4,133.18 MEMO 1	WALTER CAPPS CA 22 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
			4,133.18 MEMO 1	LORETTA SANCHEZ CA 46 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
THE NOVEMBER GROUP 1400 I STREET NW 650 WASHINGTON, DC 20005	PHONE BANKING	10/11/96	6,529.93	SEE ALLOCATION BELOW <input type="checkbox"/> Support <input type="checkbox"/> Oppose
			3,264.95 MEMO 2	BOBBY ETHERIDGE NC 2 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$	
(b) SUBTOTAL of Unitemized Independent Expenditures			\$	
(c) TOTAL Independent Expenditures			\$	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this _____ day of _____, 1996

My Commission expires: _____

NOTARY PUBLIC

Signature

Date

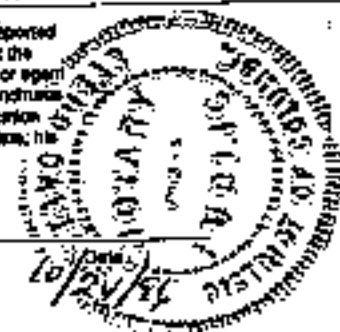
ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (in Full) VOTERS FOR CHOICE FRIENDS OF FAMILY PLANNING				
Full Name, Mailing Address & ZIP Code of Each Payer	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
			3,264.96 MEMO 2	DAVID PRICE NC 4 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
THE NOVEMBER GROUP 1400 I STREET NW 650 WASHINGTON, DC 20005	PHONE BANKING	10/11/96	1,098.33	SEE ALLOCATION BELOW <input type="checkbox"/> Support <input type="checkbox"/> Oppose
			549.16 MEMO 3	ELIZABETH FURSE OR 1 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
			549.17 MEMO 3	DARLENE HOOLEY OR 5 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
THE NOVEMBER GROUP 1400 I STREET NW 650 WASHINGTON, DC 20005	PHONE BANKING	10/11/96	2,500.81	ADAM SMITH WA 9 D <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
HBP 952 FREDERICK STREET HAGERSTOWN, MD 21740	POSTER	10/9/96	444.15	CLINTON FOR PRESIDENT <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures			\$ 22,972.74	
(b) SUBTOTAL of Unitemized Independent Expenditures			\$	
(c) TOTAL Independent Expenditures			\$ 22,972.74	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Judy Ann Eakin
Dad Walker



Subscribed and sworn to before me this 26th day of October, 1996
My Commission expires: 7-31-99
[Signature]
NOTARY PUBLIC

VA - 017 - 48 - 7335

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.

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DATE OF RECEIPT

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and Registration

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Other (Specify):

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and/or DATE OF RECEIPT

mn
PREPARER

10-24-96
DATE PREPARED