

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

FEB 3 1 22 PM '98

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) Friends of Sonny Bono		2. FEC IDENTIFICATION NUMBER C00287607
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 1842 Mesa Drive		
CITY, STATE and ZIP CODE Palm Springs, CA 92264	STATE/DISTRICT CA/44	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 4. TYPE OF REPORT

- 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
- 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 \_\_\_\_\_

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
07/01/97 through 12/31/97		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	50,032.66	105,923.88
(b) Total Contribution Refunds (from Line 20(d))	400.00	400.00
(c) Net Contributions (other than loans) (subtract Line 8(b) from 6(a))	49,632.66	105,523.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	62,553.75	95,174.81
(b) Total Offsets to Operating Expenditures (from Line 14)	2,273.90	4,267.36
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	60,279.85	90,907.45
8. Cash on Hand at Close of Reporting Period (from Line 27)	33,805.98	
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)	176,227.72	

For further information contact:  
Federal Election Commission  
990 E Street, NW  
Washington, DC 20463  
Toll Free 800-426-9530  
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  
Kathie Parrish

Signature of Treasurer *Kathie Parrish* Date 1-31-98

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

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**DETAILED SUMMARY PAGE**of Receipts and Disbursements  
(Page 2, FEC FORM 3)

Name of Committee (in full) Friends of Sonny Bono		Report Covering the Period:	
		From: 07/01/97	To: 12/31/97
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	12,575.00		11(a)(i)
(ii) Unitemized	13,940.43		11(a)(ii)
(iii) Total of contributions from individuals	26,515.43	53,443.56	11(a)(iii)
(b) Political Party Committees	0.00	22.43	11(b)
(c) Other Political Committees (such as PACs)	23,517.23	51,082.89	11(c)
(d) The Candidate	0.00	0.00	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	50,032.66	105,923.88	11(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00	12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate	0.00	0.00	13(a)
(b) All Other Loans	0.00	0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b))	0.00	0.00	13(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	2,273.90	4,267.36	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	0.00	0.00	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	52,306.56	110,191.24	16
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES</b>	62,553.75	95,174.81	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00	18
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate	0.00	5,000.00	19(a)
(b) Of All Other Loans	0.00	0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	5,000.00	19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	20(a)
(b) Political Party Committees	0.00	0.00	20(b)
(c) Other Political Committees (such as PACs)	400.00	400.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	400.00	400.00	20(d)
<b>21. OTHER DISBURSEMENTS</b>	100.00	100.00	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	63,053.75	100,674.81	22
<b>III. CASH SUMMARY</b>			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	44,553.17	23
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	52,306.56	24
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>	\$	96,859.73	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>	\$	63,053.75	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>	\$	33,805.98	27

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

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/97 - 12/31/97)	PAGE	OF
	1	6
FOR LINE NUMBER		11(a) (i)

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

NAME OF COMMITTEE (In Full)  
Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> Mr. Ed Adkison 6830 Airport Drive Riverside, CA 92504	Name of Employer Adkan Engineers	Date(month, day, year) 07/27/97	Amount of Each Receipt this Period 500.00
	Occupation Owner	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> Ms. Madeleine Arison 5999 Collins Bal Harbour, FL 33154	Name of Employer n/a	Date(month, day, year) 11/12/97	Amount of Each Receipt this Period 250.00
	Occupation Housewife	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> Joyce A. Baker 736 East Avenue J4 Lancaster, CA 93535	Name of Employer Self	Date(month, day, year) 10/03/97	Amount of Each Receipt this Period 400.00
	Occupation Freight Forwarder	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> Mr. Grant M. Bakewell 47425 Medina Drive West Palm Desert, CA 92260	Name of Employer	Date(month, day, year) 11/12/97	Amount of Each Receipt this Period 300.00
	Occupation Retired	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> Mr. Robert Barrios 5265 Lubluck Street San Diego, CA 92110	Name of Employer Barrios Distributing	Date(month, day, year) 12/17/97	Amount of Each Receipt this Period 250.00
	Occupation Distributor	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> Mr. Salvatore Bianco 190 S. Palm Canyon Drive Palm Springs, CA 92262	Name of Employer Requested	Date(month, day, year) 12/05/97	Amount of Each Receipt this Period 100.00
	Occupation Requested	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> Mr. Michael Bozick 77330 Medicine Bow Cir Indiar Wells, CA 92210	Name of Employer R. Baydasarian Inc.	Date(month, day, year) 12/02/97	Amount of Each Receipt this Period 1,000.00
	Occupation Farmer	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			

<b>SUBTOTAL</b> of Receipts This Page (optional)	2,800.00
<b>TOTAL</b> This Period (list 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 (07/01/97 - 12/31/97)

PAGE 2 OF 6  
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Friends of Sonny Bono C00287607

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Mr. Russell E. Burkett, Jr. 72845 Calle De La Silla Palm Desert, CA 92260</p>	<p>Name of Employer Occupation Retired</p>	<p>Date (month, day, year) 11/26/97</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date &gt; \$ 400.00</p>		
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Mr. Richard L. DeWitt 9089 Clairemont Mesa, #206 San Diego, CA 92123</p>	<p>Name of Employer Four Winds</p>	<p>Date (month, day, year) 08/12/97</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Forwarder</p>	<p>Aggregate Year-to-Date &gt; \$ see below</p>	
<p><b>C. Full Name, Mailing Address and ZIP Code</b> same as above</p>	<p>Name of Employer</p>	<p>Date (month, day, year) 08/12/97</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date &gt; \$ 2,000.00</p>	
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Mr. Thomas K. Dodson 6933 Rockspring Lane Highland, CA 92346</p>	<p>Name of Employer</p>	<p>Date (month, day, year) 07/18/97</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Requested by Phone 7/24/97</p>	<p>Aggregate Year-to-Date &gt; \$ 250.00</p>	
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Mr. Ken Geissel 38 Minor Street Bakersfield, CA 93305</p>	<p>Name of Employer Gailbraith Van &amp; Storage</p>	<p>Date (month, day, year) 09/04/97</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation President</p>	<p>Aggregate Year-to-Date &gt; \$ 400.00</p>	
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Katy Gill P.O. Box 4599 Carlsbad, CA 92018</p>	<p>Name of Employer Katy 101.3 FM</p>	<p>Date (month, day, year) 11/12/97</p>	<p>Amount of Each Receipt this Period 200.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation President, General Manager</p>	<p>Aggregate Year-to-Date &gt; \$ 598.00</p>	
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Mrs. Dorothy Hafliger 1378 Yorktown Circle San Jacinto, CA 92583</p>	<p>Name of Employer None</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Retired</p>	<p>Aggregate Year-to-Date &gt; \$ 250.00</p>	

SUBTOTAL of Receipts This Page (optional)

2,800.00

**SCHEDULE A ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page 07/31/97 - 12/31/97

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FOR LINE NUMBER 11 (a) (i)

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NAME OF COMMITTEE (In Full)

Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> Mr. Henry C. Haflinger 1378 Yorktown Circle San Jacinto, CA 92583		Name of Employer Self/Henry C. Haflinger	Date(month, day, year) 09/23/97	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Occupation Dairyman	Aggregate Year-to-Date > \$ 250.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Mr. Allen A. Hall 1945 Bidwell Way Sacramento, CA 95818		Name of Employer Self/Allen A. Hall	Date(month, day, year) 11/17/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):		Occupation Retiree	Aggregate Year-to-Date > \$ 250.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Ella Holders 245 Via Tierra Arcadia, CA 92024		Name of Employer Classic Forwarding, Inc.	Date(month, day, year) 03/05/97	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Occupation Executive	Aggregate Year-to-Date > \$ 400.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Mr. Douglas Hill 3994 San Mateo Los Alamitos, CA 90720		Name of Employer Calif. Moving & Storage Assoc.	Date(month, day, year) 09/05/97	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Occupation President	Aggregate Year-to-Date > \$ 400.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Mr. Kenneth L. Krumm 1632 N. Columbus Blvd. Tucson, AZ 85712		Name of Employer Astron Forwarding Co.	Date(month, day, year) 10/14/97	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Occupation President	Aggregate Year-to-Date > \$ 250.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Mr. Pat Matriciana PO Box 1710 Newark, CA 92546		Name of Employer Jeremiah Films	Date(month, day, year) 11/21/97	Amount of Each Receipt this Period 25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Occupation Executive	Aggregate Year-to-Date > \$ 225.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Mary Ellen Meyer 47 Alvarado Drive Newport Beach, CA 92660		Name of Employer	Date(month, day, year) 12/17/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):		Occupation Housewife	Aggregate Year-to-Date > \$ see below	

**SUBTOTAL** of Receipts This Page (optional) 2,575.00

**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 (07/01/97 - 12/31/97)	PAGE	OF
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FOR LINE NUMBER		
11(a)(i)		

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NAME OF COMMITTEE (In Full)

Friends of Sonny Bono C00287697

<b>A. Full Name, Mailing Address and ZIP Code</b> same as above Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	12/17/97	
Aggregate Year-to-Date > \$		1,200.00	200.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Mr. Thomas C. McCarthy 8315 Whelan Drive San Diego, CA 92119 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/05/97	
Aggregate Year-to-Date > \$		400.00	400.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Dr. Steve A. Kearsch 9540 Capiland Road Desert Hot Springs, CA 92240 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/17/97	
Aggregate Year-to-Date > \$		400.00	200.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Mr. Thomas W. Moore 1740 Conn Valley Rd St. Helena, CA 94574 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/17/97	
Aggregate Year-to-Date > \$		400.00	200.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Mr. Steven J. Niethamer 2425 Vista Dr Palm Springs, CA 92362 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/21/97	
Aggregate Year-to-Date > \$		300.00	200.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Ms. Donna L. Perice 79-860 Ryan Way Bermuda Dunes, CA 92201 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/12/97	
Aggregate Year-to-Date > \$		600.00	200.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Ms. L. Ann Peterson 1 Mayfair Rancho Mirage, CA 92270 Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	11/17/97	
Aggregate Year-to-Date > \$		600.00	400.00

**SUBTOTAL** of Receipts This Page (optional) 1,800.00

TOTAL line items (see 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 (070107 - 12/31/97)	PAGE	OF
	5	6
FOR LINE NUMBER		
11(a) (1)		

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NAME OF COMMITTEE (in Full)

Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> Mr. Larry Polhill 1564 Mohave Colton, CA 92324	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	None	07/27/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired by phone 7/27/97	Aggregate Year-to-Date > \$	500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Dr. Ben B. Roberson 18 Churchhill Lane Rancho Mirage, CA 92270	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
None	Ben B. Roberson, MD	11/21/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$	200.00
<b>C. Full Name, Mailing Address and ZIP Code</b> Mr. Charles D. Rogness 1409 Seven Hills Drive Hemet, CA 92345	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
None	Valley Merchants Bank	11/28/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Banker	Aggregate Year-to-Date > \$	200.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Mr. David Rowe 12 Ranchview Rd. Rolling Hills Estates, CA 90274	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
None	Jet Forwarding, Inc.	09/05/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Forwarder	Aggregate Year-to-Date > \$	400.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Ms. Sandra L. Rowe 1300 D Manhattan Ave Manhattan Beach, CA 90266	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
None	Jet Forwarder	09/05/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation FORWARDER	Aggregate Year-to-Date > \$	400.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Mr. James J. Shes 70-168 Sonora Rancho Mirage, CA 92270	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
None	None	11/27/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	100.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Mr. Lowell O. Weeks 7442f Covered Wagon Trail, Palm Desert, CA 92260	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
None	None	12/02/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	300.00

**SUBTOTAL** of Receipts This Page (optional) 2,100.00

**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 07/01/97 - 12/31/97

PAGE 6 OF 6  
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Friends of Sonny Bono C00287607

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Susan Welch 72676 Two Mile Road Twentynine Palms, CA 92277</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Monument Moving &amp; Storage</p> <p>Occupation Forwarder</p>	<p>Date (month, day, year) 09/05/97</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>Aggregate Year-to-Date &gt; \$ 400.00</p>			
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Ms. Margaret E. Winter 1769 Capri Cir Palm Springs, CA 92264</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer None</p> <p>Occupation Retired</p>	<p>Date (month, day, year) 12/04/97</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>Aggregate Year-to-Date &gt; 6 100.00</p>			
<p><b>C. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date &gt; \$</p>			
<p><b>D. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date &gt; \$</p>			
<p><b>E. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date &gt; 9</p>			
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date &gt; \$</p>			
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date &gt; \$</p>			

<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>	<p>500.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>	<p>12,575.00</p>



**SCHEDULE A ITEMIZED RECEIPTS**

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/97 - 12/31/97)

PAGE 1 OF 5  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (In Full)

Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> A Duda & Sons, Inc. 120693 P.O. Box 257 Oviedo, FL 32765	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 500.00
	Occupation	12/01/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> Advanta Corp Employees PAC 300 N Wakefield Dr Newark, DE 19702-5419	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 1,000.00
	Occupation	07/03/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> AGC Political Action Committee 1957 E. Street, NW Washington, DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 1,000.00
	Occupation	12/15/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> Agua Caliente Band of Cahuilla Indians 110 N. Indian Canyon Drive Palm Springs, CA 92262	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 400.00
	Occupation	11/25/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 900.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> AICPA Effective Legislation Committee 1455 Pennsylvania Ave., NW Washington, DC 20004-1081	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 1,000.00
	Occupation	12/17/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> Akin, Gump, Strauss, Hauer & Feld PAC 1333 New Hampshire Ave, 3400 Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 1,000.00
	Occupation	08/01/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> Allergan Inc. PAC for Employees 2525 Dupont Drive Irvine, CA 92715	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period 100.00
	Occupation	11/17/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 200.00		

SUBTOTAL of Receipts This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

Use separate schedule(s)  
for each category of the  
Detailed Summary Page  
(07/01/97 - 12/31/97)

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FOR LINE NUMBER  
11 (c)

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NAME OF COMMITTEE (in Full)

Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> ARCO PAC 515 S. Flower St., #4087 Los Angeles, CA 90071	Name of Employer	Date (month, day, year) 12/27/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> BankAmerica Corp. Political Action Committee (BACPAC) Box 37000 Unit 13117 San Francisco, CA 94137	Name of Employer	Date (month, day, year) 07/03/97 11/21/97	Amount of Each Receipt this Period 1,000.00 2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 3,000.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Build PAC 1201 15th St. NW Washington, DC 20005	Name of Employer	Date (month, day, year) 12/31/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Coca-Cola Enterprises Inc. Employee NP Comm. PAC 68-600 Perez Road Cathedral City, CA 92234	Name of Employer	Date (month, day, year) 08/12/97	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Dealers Election Action Committee 8400 Westpark Drive McLean, VA 22102	Name of Employer	Date (month, day, year) 12/01/97	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,500.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Edison International Companies Federal PAC 2244 Walnut Grove Avenue Rosemead, CA 91778	Name of Employer	Date (month, day, year) 09/15/97	Amount of Each Receipt this Period 198.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 198.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Fleetwood - PAC 3125 Myers Street Riverside, CA 92503	Name of Employer	Date (month, day, year) 11/21/97	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 200.00	

SUBTOTAL of Receipts This Page (optional)

5,598.00

TOTAL This Period (last page this line number only)

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/97 - 12/31/97)	PAGE	OF
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**SCHEDULE A** **ITEMIZED RECEIPTS**  
Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full)  
Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> Glaxo Wellcome Five Moore Drive Research Triangle Park, NC 27709	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 200.00
	Occupation	08/01/97	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 200.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Metro Goldwyn Mayer 2500 Broadway St. Santa Monica, CA 90404-3061	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	12/02/97	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 500.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Motion Picture Association of America 1600 Eye Street Washington, DC 20006	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 1,000.00 549.88
	Occupation	12/10/97 12/17/97 In-Kind Contribution; 11/14 Event; Food/beverage	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 1,549.88	
<b>D. Full Name, Mailing Address and ZIP Code</b> National Assoc of Convenience Stores 1505 King Street Alexandria, VA 22314	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	11/12/97	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 500.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> National Beer Wholesalers Association 1100 S. Washington Street Alexandria, VA 22314-4494	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 2,500.00 469.35
	Occupation	11/12/97 12/12/97 In-Kind Contribution; Dinner	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 2,969.35	
<b>F. Full Name, Mailing Address and ZIP Code</b> Norwest Corporation PAC Norwest Center, Sixth & Marquette Minneapolis, MN 55479-103, MN 55479-103	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	07/03/97	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 500.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Paxon for Congress 1850 winton Rd South Rochester, NY 14618	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	09/13/97	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 1,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	7,219.23
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A ITEMIZED RECEIPTS**  
 Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (1/01/87 - 12/31/97)	PAGE	OF
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NAME OF COMMITTEE (In Full)  
 Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> SBC Communications Inc. PAC 175 E. Houston, 4th Floor San Antonio, TX 78205  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	11/14/97	
	Aggregate Year-to-Date >	\$ 1,000.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Soboba Band of Mission Indians PO Box 487 San Jacinto, CA 92581  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	12/04/97	
	Aggregate Year-to-Date >	\$ 200.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Sony Pictures Entertainment Inc PAC 10202 W. Washington Blvd Culver City, CA 90232  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	12/10/97	
	Aggregate Year-to-Date >	\$ 1,000.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Time Warner Inc. PAC 75 Rockefeller Plaza New York, NY 10019  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	11/25/97	
	Aggregate Year-to-Date >	\$ 1,000.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Twenty-Nine Palms Band of Mission Indians 46-200 Harrison St. Coschella, CA 92236  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	11/25/97	
	Aggregate Year-to-Date >	\$ 200.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Universal Studios PAC 100 Universal City Plaza Universal City, CA 91608  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	12/01/97	
	Aggregate Year-to-Date >	\$ 500.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> UPSPAC 55 Glenlake Parkway, NE Atlanta, GA 30328  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	12/17/97 12/31/97	
	Aggregate Year-to-Date >	\$ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	4,700.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A ITEMIZED RECEIPTS**

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/97 - 12/31/97)

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NAME OF COMMITTEE (In Full)

Friends of Sonny Bono C00287607

<b>A. Full Name, Mailing Address and ZIP Code</b> Walt Disney Co. Employees' PAC 500 S. Buena Vista Burbank, CA 91521	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	12/31/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> Broadcast Music, Inc. PAC 320 West 57th Street New York, NY 10019	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 500.00
	Occupation	11/21/97	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00		
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		
<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		

<b>SUBTOTAL</b> of Receipts This Page (optional)	1,000.00
<b>TOTAL</b> This Period (last page the line number only)	23,517.23

**SCHEDULE A ITEMIZED RECEIPTS**  
 Offsets to Operating Expenditures

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/97 - 2/28/97)

PAGE 2 OF 2  
 FOR LINE NUMBER 14

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**NAME OF COMMITTEE (In Full)**

Friends of Sonny Bono CD0287607

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
D. S. Postmaster Amado Street Palm Springs, CA 92263	Re Fund/Permit 1643	12/31/97	2,273.90
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,273.90	
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 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 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 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 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 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 Other (specify):	Occupation	Aggregate Year-to-Date > \$	

<b>SUBTOTAL</b> of Receipts This Page (optional)	2,273.90
<b>TOTAL</b> This Period (last page this line number only)	2,273.90

**SCHEDULE B ITEMIZED DISBURSEMENTS**

**Operating Expenses**

Use separate schedule(s) for each category of the Detailed Summary Page (C7/01/97 - 12/01/97)

PAGE 1 OF 5  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

Friends of Sonny Bono C00287607

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Abbett Western Rentals 653 So. Waterman Ave. San Bernardino, CA 92408	Table Rentals Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/07/97	218.97
B. Full Name, Mailing Address and ZIP Code Bank of America VISA PO Box 53148 Phoenix, AZ 85072	Purpose of Disbursement Credit Card Payment (See Below) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12/13/97 08/19/97	Amount of Each Disbursement this Period 798.75 2,418.00
C. Full Name, Mailing Address and ZIP Code United Airlines Washington D.C. Airport Washington, D.C. 20053,	Purpose of Disbursement Travel Expense Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/18/97	Amount of Each Disbursement this Period 2,335.20 MEMO
D. Full Name, Mailing Address and ZIP Code Washington Pen Co. 3222 K St., N.W. Washington, DC	Purpose of Disbursement Gifts Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12/13/97	Amount of Each Disbursement this Period 798.75 MEMO
E. Full Name, Mailing Address and ZIP Code Celebrity Bookstore 170 E. Tahquitz Canyon Palm Springs, CA 92263	Purpose of Disbursement Books Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12/23/97	Amount of Each Disbursement this Period 1,077.50
F. Full Name, Mailing Address and ZIP Code Citybank	Purpose of Disbursement Credit Card Payment (See Below) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12/17/97 11/19/97 09/25/97	Amount of Each Disbursement this Period 821.00 1,020.35 680.00
G. Full Name, Mailing Address and ZIP Code American Airlines Washington DC Airport Washington, DC 20003	Purpose of Disbursement Travel Expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09/25/97	Amount of Each Disbursement this Period 680.00 MEMO
H. Full Name, Mailing Address and ZIP Code American Airlines Washington DC Airport Washington, DC 20003	Purpose of Disbursement Airline Tickets Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09/29/97	Amount of Each Disbursement this Period 542.00 MEMO
I. Full Name, Mailing Address and ZIP Code American Airlines Washington DC Airport Washington, DC 20003	Purpose of Disbursement Airline tickets Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09/29/97	Amount of Each Disbursement this Period 200.00 MEMO

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

7,034.57

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

**SCHEDULE B ITEMIZED DISBURSEMENTS**  
**Operating Expenses**

Use separate schedule(s) for each category of the Detailed Summary Page (300187-120197)

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NAME OF COMMITTEE (In Full)  
 Friends of Sonny Bono 000287607

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
American Airlines Washington DC Airport Washington, DC 20003	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/17/97	821.00 MEMO
B. Full Name, Mailing Address and ZIP Code U.S. House of Representatives Gift Shop Washington, DC	Purpose of Disbursement Misc. Gifts Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/09/97	Amount of Each Disbursement This Period 242.41 MEMO
C. Full Name, Mailing Address and ZIP Code U.S. House of Representatives Gift Shop Washington, DC	Purpose of Disbursement Gift Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/29/97	Amount of Each Disbursement This Period 35.94 MEMO
D. Full Name, Mailing Address and ZIP Code Desert Ink 1842 Mass Drive Palm Springs, CA 92264	Purpose of Disbursement Prof Svcs, July Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/14/97	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Prof Svcs-Aug 97 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 09/09/97	Amount of Each Disbursement This Period 1,000.00
F. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Prof Svcs/Sept 97 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/02/97	Amount of Each Disbursement This Period 1,000.00
G. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Svcs - May, June Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 08/14/97	Amount of Each Disbursement This Period 2,000.00
H. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Svcs: Oct & Nov 97 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12/05/97	Amount of Each Disbursement This Period 1,900.00
I. Full Name, Mailing Address and ZIP Code Desert Sun 750 N. Gene Autry Trail Palm Springs, CA 92262	Purpose of Disbursement Subscription Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 12/14/97	Amount of Each Disbursement This Period 232.44

SUBTOTAL of Disbursements This Page (optional)	7,132.44
TOTAL This Period (last page this line number only)	



**SCHEDULE B** **ITEMIZED DISBURSEMENTS**  
 Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/97 - 12/31/97)	PAGE	OF
	3	5
FOR LINE NUMBER		
17		

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**NAME OF COMMITTEE (in Full)**

Friends of Sonny Bono C00287607

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
High Tech Mailing Services P.O. Box 249 Palm Desert, CA 92261	Fold/Scuff/Mail Invitations Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/04/97	768.00
B. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Mailing Services Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/13/97	109.76
C. Full Name, Mailing Address and ZIP Code Matters of Taste Caterers, Inc. P.O. Box 1248 Alexandria, VA 22313	Purpose of Disbursement Food, Equip. Linens, Personnel Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/29/97	1,143.88
D. Full Name, Mailing Address and ZIP Code McGraths 4092 10th St. Riverside, CA 92501	Purpose of Disbursement Catering Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/07/97	867.39
E. Full Name, Mailing Address and ZIP Code Mr. E. L. (Al) Newkirk 55-111 Firestone La Quinta, CA 92253	Purpose of Disbursement Food, Beverages, Flowers, Etc. Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/30/97	3,440.14
F. Full Name, Mailing Address and ZIP Code Ruckle & White 674 Via La Paloma Riverside, CA 92507	Purpose of Disbursement Print 500 invitations Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/07/97	409.45
G. Full Name, Mailing Address and ZIP Code Sonny Bono P.O. Box 3007 Palm Springs, CA 92263	Purpose of Disbursement In-kind loan repayment Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/19/97 10/09/97	15,000.00 5,000.00
H. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Loan Repayment Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/09/97	10,000.00
I. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Repay In-kind Loan Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/25/97	5,000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional)	41,738.52
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**  
Operating Expenses

See separate schedule(s) for each category of the Detailed Summary Page (07/01/97 - 12/31/97)

PAGE 4 OF 5  
PDR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

Friends of Sonny Bono C00297607

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Statecraft, Inc. 8618 Nottingham Place La Jolla, CA 92037	License 'Craftware' software Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/06/97	2,696.25
The Printing Place PO Box 12827 Palm Desert, CA 92255	Printing Invitations Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/14/97	1,291.92
Tuttle & Tuttle 12 Fort Williams Parkway Alexandria, VA 22304	Christmas Cards Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/17/97	610.00
U.S. Postmaster Anado Street Palm Springs, CA 92263	200 33-cent stamps Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/09/97	64.00
same as above	Exp mail disk/Statecraft Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/02/97	10.75
same as above	Postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/16/97 09/18/97	42.75 43.50
same as above	Send State rpts certified Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/30/97	15.39
same as above	Stamps Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/12/97	64.00
Mr. James C. Free 1500 X Street, N.W. suite 325 Washington, DC 20005-1209 (contributor)	Lunch 11/17/97 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/22/97	90.99 in-kind received

<b>SUBTOTAL</b> of Disbursements This Page (optional)	4,929.15
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**  
Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (3/21/97 - 12/31/97)

PAGE 5 OF 5  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

Friends of Sonny Bono C00287607

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Vicki Iseman 2111 Wilson Blvd., Suite B50 Arlington, VA 22201 (contributor)	Lunch 11/03/97 ref Carnival Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/12/97	71.84 in-kind received
B. Full Name, Mailing Address and ZIP Code Notion Picture Association of America 1600 Eye Street Washington, DC 20066 (contributor)	Purpose of Disbursement 11/14 Event: food/beverage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/17/97	549.88 in-kind received
C. Full Name, Mailing Address and ZIP Code National Beer Wholesalers Association 1100 S. Washington Street Alexandria, VA 22304-4494 (contributor)	Purpose of Disbursement Dinner Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/12/97	469.35 in-kind received
D. Full Name, Mailing Address and ZIP Code Kathie L. Parrish 1842 Mesa Drive Palm Springs, CA 92264 (contributor)	Purpose of Disbursement Reduced Fee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	12/04/97	100.00 in-kind received
E. Full Name, Mailing Address and ZIP Code The Printing Place PO Box 12827 Palm Desert, CA 92255 (contributor)	Purpose of Disbursement Printing Discount Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/13/97	200.00 in-kind received
F. Full Name, Mailing Address and ZIP Code Unitemized operating expenses (less than \$200) This Period: 07/01/97 - 12/31/97	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 327.90
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)

1,718.97

TOTAL This Period (last page this line number only)

62,553.75

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**  
 Refunds of Contributions to Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/87 - 12/31/87)	PAGE	OF
	1	1
FOR LINE NUMBER		20 (c)

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NAME OF COMMITTEE (in Full)  
 Friends of Sonny Bono C00287607

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
UPSPAC 55 Glenlake Parkway, NE Atlanta, GA 30328	Return of 12/17/97 Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	12/31/97	400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 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 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 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 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 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 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 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 Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			400.00
TOTAL This Period (last page this line number only)			400.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Other Disbursements

Use separate schedule(s) for each category of the Detailed Summary Page (CXC1/97 - 1/23/97)

PAGE 1 OF 0  
FOR LINE NUMBER 21

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**NAME OF COMMITTEE (in Full)**

Friends of Sonny Bono C00287607

A. Full Name, Mailing Address and ZIP Code Unitemized other disbursements (less than \$200) This Period: 07/01/97 - 12/31/97	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 100.00
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

<b>SUBTOTAL</b> of Disbursements This Page (optional)	100.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE C**  
(Revised 3/80)

**LOANS**

Loans Received by the Committee

Page 1 of 1 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full) Friends of Sonny Bono				
A. Full Name, Mailing Address and ZIP Code of Loan Source Sonny Bono P.O. Box 3007 Palm Springs, CA 92263	Original Amount of Loan 75,000.00	Cumulative Payment To Date 30,500.00	Balance Outstanding at Close of This Period 44,500.00	
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
Terms: Date Incurred <u>02/24/94</u> Date Due <u>02/24/99</u> Interest Rate <u>0.0000</u> %(apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
2. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
3. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
(07/01/87 - 12/31/97)				
B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period	
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
2. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
3. Full Name, Mailing Address and ZIP Code	Name of Employer			
	Occupation			
	Amount Guaranteed Outstanding: \$			
SUBTOTALS This Period This Page (optional) .....			44,500.00	
TOTALS This Period (last page in this line only) .....			44,500.00	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Page 1 of 1 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)


Debts Owed By the Committee

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Friends of Sonny Bono				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor CBA 50 Eisenhower Drive Paramus, NJ 07652	49,035.21	0.00	0.00	49,035.21
Nature of Debt (Purpose): mailing				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Kathie L. Parrish 1842 Mesa Drive Palm Springs, CA 92264	10.75	0.00	10.75	0.00
Nature of Debt (Purpose): Exp mail to M. Bono				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Mission Inn 3649 Seventh Street Riverside, CA 92501	7,643.37	0.00	0.00	7,643.37
Nature of Debt (Purpose): Fundraising events				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor National Media, Inc. 21 North Union Street, Suite 200 Alexandria, VA 22314	7,013.67	0.00	0.00	7,013.67
Nature of Debt (Purpose): Common Sense Radio & TV				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Sonny Bono P.O. Box 3007 Palm Springs, CA 92263	102,786.00	0.00	35,000.00	67,786.00
Nature of Debt (Purpose): In-kind Expenses to be reimbursed				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Southern CA Edison PO Box 600 Rosemead, CA 91771	249.47	0.00	0.00	249.47
Nature of Debt (Purpose): Utilities				
1) SUBTOTALS This Period This Page (optional) .....				131,727.72
2) TOTAL This Period (last page this line only) .....				131,727.72
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....				44,500.00
				176,227.72

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/31/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	2/3/98 DATE PREPARED