

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 OCT 11 P 2:46

1. NAME OF COMMITTEE (Initial) Citizens for Eleanor Holmes Norton		2. FEC IDENTIFICATION NUMBER C00244335
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 2201 Wisconsin Ave. NW #320	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
CITY, STATE and ZIP CODE Washington, DC 20007	STATE/DISTRICT DC	

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input checked="" type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

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
07/01/2000 through 09/30/2000		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	44,841.00	126,205.84
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	44,841.00	126,205.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	24,570.07	87,509.29
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	24,570.07	87,509.29
8. Cash on Hand at Close of Reporting Period (from Line 27)	168,962.90	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	

For further information contact:
Federal Election Commission
899 E. Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Gail Harmon

Signature of Treasurer

Gail M. Harmon

Date

10/10/00

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

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

Name of Committee (In full)		Report Covering the Period:		
Citizens for Eleanor Holmes Norton		From: 07/01/2000	To: 09/30/2000	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees				
(i) Itemized (use Schedule A)		13,100.00		11(a)(i)
(ii) Unitemized		12,041.00		11(a)(ii)
(iii) Total of contributions from individuals		25,141.00	84,522.00	11(a)(iii)
(b) Political Party Committees				
(c) Other Political Committees (such as PACs)				
(d) The Candidate				
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d))		44,841.00	128,205.84	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES				
13. LOANS:				
(a) Made or Guaranteed by the Candidate				
(b) All Other Loans				
(c) TOTAL LOANS (add 13(a) and (b))				13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)				
15. OTHER RECEIPTS (Dividends, Interest, etc.)				
16. TOTAL RECEIPTS (add 11(a), 12, 13(c), 14 and 15)		44,841.00	128,205.84	16
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES		24,570.07	87,509.29	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES				
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate				
(b) Of All Other Loans				
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))				19(c)
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other than Political Committees				
(b) Political Party Committees				
(c) Other Political Committees (such as PACs)				
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))				20(d)
21. OTHER DISBURSEMENTS		1,000.00	1,000.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		25,570.07	88,509.29	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	149,691.97	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	44,841.00	24
25. SUBTOTAL (add Line 23 and Line 24)	\$	194,532.97	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	25,570.07	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	168,962.90	27

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	06
	FOR LINE NUMBER	1111

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)
Citizens for Eleanor Holmes Norton

FEC ID NO. **c00244335**

A. Full Name, Mailing Address and ZIP Code John E. Akridge III 28181 Harleigh Lane Oxford, MD 21654-1532	Name of Employer The Akridge Co.	Date (month, day, year) 08/10/00	Amount of Each Receipt this Period 1,000.00
	Occupation President	Aggregate Year-To-Date \$ 1,000.00	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Carl M. Asakawa 4121 Ingomer ST. NW Washington, D.C. 20015	Name of Employer IOC: Mobilizing Generations for Devt	Date (month, day, year) 08/01/00	Amount of Each Receipt this Period 500.00
	Occupation Executive Director	Aggregate Year-To-Date \$ 500.00	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Riddick L. Bove, Sr. 714 Amer Drive Fort Washington, MD 20744	Name of Employer Self Employed	Date (month, day, year) 08/10/00	Amount of Each Receipt this Period 1,000.00
	Occupation Professional Boxer	Aggregate Year-To-Date \$ 1,000.00	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Dwight L. Bush 3905 Jocelyn St. NW Washington, DC 20015	Name of Employer Sato Travel	Date (month, day, year) 08/28/00	Amount of Each Receipt this Period 300.00
	Occupation Finance	Aggregate Year-To-Date \$ 300.00	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Sara Cormany 1614 T Street Washington DC 20009	Name of Employer Paper Lantern	Date (month, day, year) 08/01/00	Amount of Each Receipt this Period 300.00
	Occupation Web Designer	Aggregate Year-To-Date \$ 300.00	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Yvonne M. Curl 4101 Parkglan CT NW Washington, DC 20007	Name of Employer Xerox Corp	Date (month, day, year) 09/11/00	Amount of Each Receipt this Period 300.00
	Occupation Executive	Aggregate Year-To-Date \$ 300.00	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Leroy A. Evans 912 Spring Road, NW Washington, DC 20010	Name of Employer Washington Gas Light	Date (month, day, year) 07/17/00	Amount of Each Receipt this Period 400.00
	Occupation Crew Leader	Aggregate Year-To-Date \$ 400.00	
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	3,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	5
FOR LINE NUMBER		
11a		

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NAME OF COMMITTEE (in Full)
 Citizens for Eleanor Holmes Norton
 FEC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven A. Grigg 4728 Foxhall Crescent, NW Washington, DC 20007	Republic Properties Real Estate	07/11/00	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President/CEO	Aggregate Year-To-Date \$ 500.00	
B. Full Name, Mailing Address and ZIP Code Everette B. Hamilton 1217 D Street, NE Washington, DC 20002	The Windsor Co., Inc	07/17/00	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	08/01/00	100.00
C. Full Name, Mailing Address and ZIP Code Gary W. Bankins 1320 G Street, SE Washington, DC 20003	Self-Employed	09/05/00	250.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$ 250.00	
D. Full Name, Mailing Address and ZIP Code Ernest C. Hopkins 5501 16th St. N.W. Washington, DC 20011	San Francisco AIDS Foundation	07/17/00	250.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Dir of Federal Affrs	Aggregate Year-To-Date \$ 250.00	
E. Full Name, Mailing Address and ZIP Code Mitchell Johnson 2753 Unicorn Lane Washington, DC 20015	Retired	09/20/00	300.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \$ 300.00	
F. Full Name, Mailing Address and ZIP Code Bradley M. Lewis 1008 congress st. SE Washington, DC 20032	Executive Train	07/17/00	250.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Account Keeper	Aggregate Year-To-Date \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Jutta M. Lewis 3517 Williamsburg Lane, N.W. Washington, DC 20008	Self Employed	08/28/00	300.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Psychotherapist	Aggregate Year-To-Date \$ 300.00	

SUBTOTAL of Receipts This Page (optional)	2,450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
Citizens for Eleanor Holmes Morton

FEC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Miller 1614 T Street, NW Washington, DC 20009	America ON Line	07/17/00	300.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Technical Manager		
	Aggregate Year-To-Date \$	300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Randall C. Nuckolls 701 Pennsylvania Ave. NW #600 Washington, DC 20004	Long, Aldridge & Norman	07/11/00	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
	Aggregate Year-To-Date \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas J. Rutherford 600 Cherokee Ave Alexandria, VA 22312	Thos. Rutherford, Inc	07/17/00	1,000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner		
	Aggregate Year-To-Date \$	1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ronald Simmons PO Box 48100 Washington, DC 20002-0100	Us Helping Us, Inc.	07/17/00	250.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Exec. Director		
	Aggregate Year-To-Date \$	250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Cynthia W. Stachelberg 4547 Lowell St. NW Washington, DC 20016	Human Rights Campag.	08/01/00	250.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Political Director		
	Aggregate Year-To-Date \$	250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
L.B. Walker 1904 3rd Street, NW Washington, DC 20001	Self Employed	07/17/00	400.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate Developer		
	Aggregate Year-To-Date \$	400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dafina M. Williams 1419 Bell-Haven Drive Landover, MD 20785	US Department of Agriculture	07/17/00	400.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Personnel Management		
	Aggregate Year-To-Date \$	400.00	

SUBTOTAL of Receipts This Page (optional) 3,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	4	5
FOR LINE NUMBER		11a

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NAME OF COMMITTEE (in Full)
 Citizens for Eleanor Holmes Norton
 FEC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Francille Wilson 415 St Lawrence Drive Silver Spring, MD 20901	University of MD	08/28/00	300.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-To-Date \$ 300.00	
B. Full Name, Mailing Address and ZIP Code Elaine R. Wolfensohn 5305 North Pine Place Jackson, WY 83001	Name of Employer Self Employed	Date (month, day, year) 07/17/00	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Educator	Aggregate Year-To-Date \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Larry Siegel 2136 Wyoming Avenue, NW Washington, DC 20008-3906	Name of Employer DOH/DC	Date (month, day, year) 8/1/00	Amount of Each Receipt this Period 200.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR Deputy Director	Aggregate Year-To-Date \$ 300.00	
D. Full Name, Mailing Address and ZIP Code Larry Siegel 2136 Wyoming Avenue, NW Washington, DC 20008-3906	Name of Employer DOH/DC	Date (month, day, year) 9/20/00	Amount of Each Receipt this Period 100.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR Deputy Director	Aggregate Year-To-Date \$ 300.00	
E. Full Name, Mailing Address and ZIP Code Gally W. Yudelman 3108 Garfield Street, NW Washington, DC 20008	Name of Employer Self Employed	Date (month, day, year) 9/5/00	Amount of Each Receipt this Period 250.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-To-Date \$ 250.00	
F. Full Name, Mailing Address and ZIP Code David Carliner 2941 Chesapeake Street, NW Washington, DC 20008	Name of Employer Self-Employed	Date (month, day, year) 08/28/00	Amount of Each Receipt this Period 150.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-To-Date \$ 250.00	
G. Full Name, Mailing Address and ZIP Code David W. Wilmot 1653 Kalmia Road, NW Washington, DC 20012	Name of Employer David W. Wilmot & Associates	Date (month, day, year) 09/20/00	Amount of Each Receipt this Period 150.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date \$ 400.00	

SUBTOTAL of Receipts This Page (optional)	2,150.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
Citizens for Eleanor Holmes Norton

FEC ID No. C00244335

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernest D. Jarvis 1789 Sycamore St., NW Washington, DC 20012	Insignia/ESG, Inc.	9/21/00	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-To-Date \$ 750.00	
B. Full Name, Mailing Address and ZIP Code W. William Jarvis 1627 Webster Street, NW Washington, DC 20011	The Lockhart Group	09/25/00	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-To-Date \$ 500.00	
C. Full Name, Mailing Address and ZIP Code Marsha Lillie-Blanton 6167 Sligo Mill Road, NE Washington, DC 20011	Kaiser Family Fdn	09/20/00	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-To-Date \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Fred Parshey 11116 Willow Brook Drive Potomac, MD 20854	Stanley Martin Comm.	9/26/00	100.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate Exec	Aggregate Year-To-Date \$ 350.00	
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)	1,600.00
TOTAL This Period (last page this line number only)	13,100.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	3
FOR LINE NUMBER		11c

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NAME OF COMMITTEE (in full)
 citizens for Eleanor Holmes Norton

FEC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code American Insur. Assoc PAC 1130 Connecticut Avenue, NW Suite 1000 Washington, DC 20036 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/07/00	500.00
Aggregate Year-To-Date		\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Branch Banking & Trust PAC PO Box 1290 Winston-Salem, NC 27102-1290 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/28/00	1,000.00
Aggregate Year-To-Date		\$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Gertrude Stein Dem. Club- Federal Account 1929 18th Street, NW #133 Washington, DC 20009 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	8/01/00	300.00
Aggregate Year-To-Date		\$ 300.00	
D. Full Name, Mailing Address and ZIP Code Human Rights Campaign PAC 919 18th Street, NW #800 Washington, DC 20006 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/06/00	1,000.00
Aggregate Year-To-Date		\$ 2,500.00	
E. Full Name, Mailing Address and ZIP Code Lucent Technologies PAC 900 19 Street, N.W. #700 Washington, DC 20006 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	07/17/00	1,000.00
Aggregate Year-To-Date		\$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Natl Postal Mail Handlers PAC 905 16th Street, NW Washington, DC 20006 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/11/00	500.00
Aggregate Year-To-Date		\$ 500.00	
G. Full Name, Mailing Address and ZIP Code Shaw Pittman PAC 2300 N Street, NW Washington, DC 20037 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/01/00	1,000.00
Aggregate Year-To-Date		\$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) 6,300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	3
FOR LINE NUMBER		11c

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NAME OF COMMITTEE (In Full)
Citizens for Eleanor Holmes Norton

FBC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code The Jack PAC PO Box 7533 Washington, DC 20044 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/01/00	500.00
Aggregate Year-To-Date		\$ 500.00	
B. Full Name, Mailing Address and ZIP Code Transportation Pol Ed League 14600 Detroit Avenue Cleveland, OH 44107 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/11/00	5,000.00
Aggregate Year-To-Date		\$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code Treasury Employees PAC 901 E. Street, NW Suite 600 Washington, DC 20004 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/15/00	250.00
Aggregate Year-To-Date		\$ 250.00	
D. Full Name, Mailing Address and ZIP Code United Food & Comm Wrkrs PAC 1775 X Street, NW Washington, DC 20006-1598 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	07/17/00	2,500.00
Aggregate Year-To-Date		\$ 2,500.00	
E. Full Name, Mailing Address and ZIP Code UPSPAC 55 Glenlake Parkway N.E. Atlanta, GA 30326 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	07/11/00	2,500.00
Aggregate Year-To-Date		\$ 3,000.00	
F. Full Name, Mailing Address and ZIP Code People for the American Way Voters Alliance 2000 M Street, NW Washington, DC 20036 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/25/00	100.00
Aggregate Year-To-Date		\$ 100.00	
G. Full Name, Mailing Address and ZIP Code UAW CAP 8000 East Jefferson Avenue Detroit, MI 48214-3963 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/25/00	2,500.00
Aggregate Year-To-Date		\$ 2,500.00	

SUBTOTAL of Receipts This Page (optional) 13,350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	3	3
FOR LINE NUMBER		13c

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)
 citizens for Eleanor Holmes Norton
 FEC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code WARD & Democrats PO Box 60178 Washington, DC 20039-0178	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/25/00	50.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 50.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$	

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	19,700.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
	FOR LINE NUMBER	
17		

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NAME OF COMMITTEE (in full)

Citizens for Eleanor Holmes Norton

FEC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gilbert & Wolfand, PC 2201 Wisconsin Avenue, NW Washington, DC 20007	Accounting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/12/00	2,741.50
B. Full Name, Mailing Address and ZIP Code DC Postmaster Washington, DC	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/26/00	330.00
C. Full Name, Mailing Address and ZIP Code Gilbert & Wolfand, PC 2201 Wisconsin Avenue, NW Washington, DC 20007	Accounting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/07/00	1,203.25
D. Full Name, Mailing Address and ZIP Code National Democratic Club 30 Ivy Street, SE Washington, DC 20003-4071	Facilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/07/00	7.35
E. Full Name, Mailing Address and ZIP Code Ward Eight Democrats c/o Phil Pannell 3415 5th Street SE #5 Washington, DC 20032	Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/09/00	500.00
F. Full Name, Mailing Address and ZIP Code Mulhauser & Associates 1730 Rhode Island Ave., NW Washington, DC 20036	Fundraising Fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/00	2,300.00
G. Full Name, Mailing Address and ZIP Code Mulhauser & Associates 1730 Rhode Island Avenue, NW Washington, DC 20036	Off Sup, Print, Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/15/00	3,478.14
H. Full Name, Mailing Address and ZIP Code DC Postmaster Washington, DC	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/31/00	330.00
I. Full Name, Mailing Address and ZIP Code Gilbert & Wolfand, PC 2201 Wisconsin Avenue, NW Washington, DC 20007	Accounting Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/05/00	586.88

SUBTOTAL of Disbursements This Page (optional)

11,479.12

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	2
FOR LINE NUMBER		
17		

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NAME OF COMMITTEE (in full)

Citizens for Eleanor Holmes Norton

FRC ID No. c00244335

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mulhauser & Associates 1730 Rhode Island Avenue, NW Washington, DC 20036	<u>Fundraising Fee</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/20/00	2,300.00
Mulhauser & Associates 1730 Rhode Island Avenue, NW Washington, DC 20036	<u>Trav, Print, Rent, Suppl</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/20/00	4,902.64
Congresswoman E.H. Norton 10 9th Street, SE Washington, DC 20003	<u>Travel</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/26/00	89.00
Congresswoman E.H. Norton 10 9th Street, SE Washington, DC 20003	<u>Travel/Lodging</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/00	2,031.52
Julia Hudson 622 G Street, SW Washington, DC 20024	<u>Travel/Telephone</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/00	1,430.08
Sheila Bunn 107 Elmira Street, SW Washington, DC 20032	<u>Travel/Telephone</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/00	1,799.09
Jon Bouker 2032 37th Street, NW Washington, DC 20007	<u>Travel</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/27/00	334.00
Ladco Leasing PO Box 5029 Thousand Oaks, CA 91359	<u>Equipment Leasing</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/00- 9/30/00	94.62
Suntrust Bank PO Box 85024 Richmond, VA 23205	<u>Bank Charges</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/00- 9/30/00	110.00

SUBTOTAL of Disbursements This Page (optional) 13,090.95

TOTAL This Period (last page this line number only) 24,570.07

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Citizens for Eleanor Holmes Norton

FEC ID NO. c00244335


A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stupak for Congress Committee 817 Ninth Avenue PO Box 143 Kenosha, WI 49858	Cand. Contr. - Base Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) MI D-01	08/01/00	500.00
B. Full Name, Mailing Address and ZIP Code Friends of Major Owens PO Box 2265 Brooklyn, KY 11202	Cand. Contr. - Base Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) NY-D-11	09/07/00	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 Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 1,000.00

TOTAL This Period (last page this line number only) 1,000.00

**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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 10/11/08
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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	10/11/08 DATE PREPARED