

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

FEDERAL ELECTION COMMISSION  
COMMISSION 441 1001

USE FEC MAILING LABEL  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Barbara Lee for Congress		Jul 13 10 30 AM '98
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. Box 29164		2. FEC IDENTIFICATION NUMBER C00331769
CITY, STATE and ZIP CODE Oakland, CA 94604	STATE/DISTRICT CA/09	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 4. TYPE OF REPORT

- |  |  |
|--|--|
| <input type="checkbox"/> April 15 Quarterly Report<br><input checked="" type="checkbox"/> July 15 Quarterly Report<br><input type="checkbox"/> October 15 Quarterly Report<br><input type="checkbox"/> January 31 Year End Report<br><input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Twelfth day report preceeding _____<br>(Type of Election)<br>election on _____ in the State of _____<br><input type="checkbox"/> Thirtieth day report following the General Election on _____<br>in the State of _____<br><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
05/14/98 through 06/30/98		
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))	55,247.68	336,672.30
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	55,247.68	336,672.30
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17)	65,345.08	375,104.53
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	169.38
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	65,345.08	374,935.15
8. Cash on Hand at Close of Reporting Period (from Line 27)	22,423.88	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0,049.75	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-376-9120

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  
HENRY L. GARDNER

Signature of Treasurer 	Date X 7-12-98
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U. S. C. p487g.

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# DETAILED SUMMARY PAGE

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

Name of Committee (in full) <i>Barbara Lee for Congress</i>	Report Covering the Period:	
	From: <i>05/14/98</i>	To: <i>06/30/98</i>
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)	11,443.00	
(ii) Unitemized	14,205.00	
(iii) Total of contributions from individuals	27,648.00	219,162.62
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	27,509.68	116,789.68
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) [add 11(a)(iii), (b), (c) and (d)]	55,247.68	336,672.30
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	0.00	169.38
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	55,247.68	336,841.68
II. DISBURSEMENTS		
<b>17. OPERATING EXPENDITURES</b>	65,345.08	375,104.53
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	0.00
<b>21. OTHER DISBURSEMENTS</b>	0.00	0.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	65,345.08	375,104.53
III. CASH SUMMARY		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	32,521.28
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	55,247.68
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>	\$	87,768.96
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>	\$	65,345.08
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>	\$	22,423.88

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page  
10514705 - 09/99/02

PAGE OF  
- 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)**

Barbara Lee for Congress C00331769

<b>A. Full Name, Mailing Address and ZIP Code</b> Calvin B. Benton, M.D. 449 - 30th Street Oakland, CA 94605	<b>Name of Employer</b> Calvin Benton, M.D.	<b>Date (month, day, year)</b> 05/14/98	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	<b>Occupation</b> Physician	<b>Aggregate Year-to-Date</b> > \$ none below	
<b>B. Full Name, Mailing Address and ZIP Code</b> same as above	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 05/16/98	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	<b>Occupation</b>	<b>Aggregate Year-to-Date</b> > \$ 1,250.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> A. Tarik Bnafa, Ph.D. 5875 Coverwood Dr., Suite 211 Silver City, CA 96230	<b>Name of Employer</b> Self employed	<b>Date (month, day, year)</b> 05/16/98	<b>Amount of Each Receipt this Period</b> 125.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	<b>Occupation</b> Consultant	<b>Aggregate Year-to-Date</b> > \$ 375.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Gwendolyn Brinkley 2221 California Street Berkeley, CA 94703	<b>Name of Employer</b> RDC	<b>Date (month, day, year)</b> 06/22/98	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	<b>Occupation</b> Program Manager	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Louise W. Brown 2064 Russell St. Berkeley, CA 94703	<b>Name of Employer</b>	<b>Date (month, day, year)</b> 05/20/98	<b>Amount of Each Receipt this Period</b> 150.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	<b>Occupation</b> Retired	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> James M. Copeland, Jr. 4106 - 49th., N.W. Washington, DC 20016	<b>Name of Employer</b> Copeland, Lomery & Jacques	<b>Date (month, day, year)</b> 05/20/98	<b>Amount of Each Receipt this Period</b> 125.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	<b>Occupation</b> President	<b>Aggregate Year-to-Date</b> > \$ 625.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> J. Ralph De Loach PO Box 3210 Berkeley, CA 94703	<b>Name of Employer</b> Requested	<b>Date (month, day, year)</b> 05/20/98	<b>Amount of Each Receipt this Period</b> 100.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	<b>Occupation</b> Requested	<b>Aggregate Year-to-Date</b> > \$ 300.00	

SUBTOTAL of Receipts This Page (optional)

2,500.00

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 (05/14/98 - 09/30/98)

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

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NAME OF COMMITTEE (in Full)

Barbara Lee for Congress C00331709

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Jeffrey Donovan Bailey 276 Abalone Pl. Livermore, CA 94550</p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer People Soft</p> <p>Occupation Software Sales</p> <p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>	<p>Date(month, day, year) 06/05/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Louise J. Sarp 4027 Lincoln Ave. Oakland, CA 94602</p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer Self employed</p> <p>Occupation Fundraiser</p> <p>Aggregate Year-to-Date &gt; \$ 305.00</p>	<p>Date(month, day, year) 05/16/98</p>	<p>Amount of Each Receipt this Period 305.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Claude T. Everhart One Barnied Place Oakland, CA 94612</p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer The Everhart Company</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date(month, day, year) 05/22/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Catherine H. Foulkes 325 Ramona Ave. Piedmont, CA 94611</p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer Requested</p> <p>Occupation Requested</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date(month, day, year) 05/14/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Le Roy Gilliesd P.O. Box 880452 San Francisco, CA 94189-0452</p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer Self employed</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date &gt; \$ 225.00</p>	<p>Date(month, day, year) 05/16/98</p>	<p>Amount of Each Receipt this Period 125.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Jenny Glover P.O. Box 13314-165 Oakland, CA 94661</p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer Self employed</p> <p>Occupation Actor</p> <p>Aggregate Year-to-Date &gt; \$ 2,000.00</p>	<p>Date(month, day, year) 05/15/98</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Sherri Lynne Harris 8658 Woodman Way Sacramento, CA 95826</p> <p>Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p>	<p>Name of Employer H &amp; H Companies, Inc.</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date(month, day, year) 06/04/98</p>	<p>Amount of Each Receipt this Period 250.00</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>	<p>3,080.00</p>
<p><b>TOTAL This Period (last page this line number only)</b></p>	<p></p>

**SCHEDULE A** **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (05/1998 - 09/2008)

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FOR LINE NUMBER 11 (a) (1)

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**NAME OF COMMITTEE (In Full)**

Barbara Lee for Congress 00331769

<b>A. Full Name, Mailing Address and ZIP Code</b> Harry L. Hartman 1100 Peach St. Alameda, CA 94501	Name of Employer Requested	Date(month, day, year) 05/16/98	Amount of Each Receipt this Period 125.00
	Occupation Insurance	Aggregate Year-to-Date > \$ 210.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> Anne-Marie Hogan 2239 Ward St., #A Berkeley, CA 94705	Name of Employer City of Berkeley	Date(month, day, year) 05/26/98	Amount of Each Receipt this Period 125.00
	Occupation City Auditor	Aggregate Year-to-Date > \$ 320.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> Keith H. Jackson 5883 Buena Vista Ave. Oakland, CA 94618	Name of Employer Requested	Date(month, day, year) 05/26/98	Amount of Each Receipt this Period 250.00
	Occupation Physician	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> Patsy E. Jay 2 Sandhill Ct. Orinda, CA 94563	Name of Employer	Date(month, day, year) 05/19/98	Amount of Each Receipt this Period 1,000.00
	Occupation Homemaker	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> Anthony L. Jones 1000 Vermont Ave., N.W., 5th Fl. Washington, DC 20005	Name of Employer Tony A., Inc.	Date(month, day, year) 05/20/98	Amount of Each Receipt this Period 150.00
	Occupation Consultant	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> Spencer Kaitz 20880 Baker Road #9 Castro Valley, CA 94546	Name of Employer CA Cable TV Assn	Date(month, day, year) 05/16/98	Amount of Each Receipt this Period 525.00
	Occupation Requested	Aggregate Year-to-Date > \$ 625.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> John Lee 322 14th Street Oakland, CA 94612	Name of Employer Ideal Cleaners	Date(month, day, year) 05/18/98	Amount of Each Receipt this Period 125.00
	Occupation Dry Cleaner	Aggregate Year-to-Date > \$ 425.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			

<b>SUBTOTAL of Receipts This Page (optional)</b>	2,400.00
<b>TOTAL This Period (last page this line number only)</b>	

**SCHEDULE A ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (05/14/98 - 05/20/98)

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FOR LINE NUMBER  
11 (a) (1)

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**NAME OF COMMITTEE (In Full)**

Barbara Lee for Congress C00331769

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Z.B. Lewis 116 16th St. No.1 Washington, DC 20003-1509</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Requested</p> <p>Occupation Requested</p> <p>Aggregate Year-to-Date &gt; \$ 400.00</p>	<p>Date(month, day, year) 05/26/98</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> James R. McMillan 1362 Santa Clara Richmond, CA 94604</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer McMillan &amp; Shakes</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date(month, day, year) 05/16/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> R. Gerald Metz, Jr. 5966 Greenridge Rd. Castro Valley, CA 94552</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer SDV/ACCI</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date(month, day, year) 05/22/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Furam P. Patel 13468 Alvarado Court Saratoga, CA 95070-5201</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Corder Reliability Services, Inc.</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date(month, day, year) 06/04/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Edward B. Fenhoet 688 Alvarado Rd. Berkeley, CA 94705</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Chiron</p> <p>Occupation Chief Executive Officer</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date(month, day, year) 05/26/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Audrey Rice Oliver 3 Windward Hill Oakland, CA 94618</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Integrated Business Solutions</p> <p>Occupation President - CEO</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date(month, day, year) 05/28/98</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Audria R. Ruben 2745 Golden Gate Avenue San Francisco, CA 94118</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Requested</p> <p>Occupation Requested</p> <p>Aggregate Year-to-Date &gt; \$ 225.00</p>	<p>Date(month, day, year) 06/11/98</p>	<p>Amount of Each Receipt this Period 150.00</p>

SUBTOTAL of Receipts This Page (optional)

1,950.00

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 (06/14/98 - 08/30/98)

PAGE 5 OF 6  
FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (In Full)

Barbara Lee for Congress C00331769

<b>A. Full Name, Mailing Address and ZIP Code</b> San Manuel Tribal Administration 26524 Indian Road Highland, CA 92346	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	06/11/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ see below		
<b>B. Full Name, Mailing Address and ZIP Code</b> same as above	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 1,000.00
	Occupation	06/11/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> Clifford Sweet 2717 Webster St. Berkeley, CA 94705	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 100.00
	Occupation	05/20/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 300.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> Alice Walker 327 25th Ave. #3 San Francisco, CA 94121	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 338.00 200.00
	Occupation	05/31/98 05/31/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 766.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> George Wallerstein 7040 17th Ave. NE Seattle, WA 98115	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 300.00
	Occupation	06/27/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 300.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> Dr. H. Geoffrey Watson 2584 El Caminito St. Oakland, CA 94611	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 250.00
	Occupation	06/01/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 350.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> Lucy Watson Sells 1191 Euclid Ave. Berkeley, CA 94706-1602	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period 75.00
	Occupation	05/26/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 425.00		

SUBTOTAL of Receipts This Page (optional)

3,263.00

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 (2514)08-093096

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

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**NAME OF COMMITTEE (in Full)**

Barbara Lee For Congress CU0331769

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Earl H. White 330 Townsend St. #208 San Francisco, CA 94107</p>	<p>Name of Employer Sipile Sport Technology</p>	<p>Date(month, day, year) 06/01/98</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 Computer Consultant</p>	<p>Aggregate Year-to-Date &gt; \$ 500.00</p>	
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Gerald L. Devaughn 717 Kimberly Dr. Maurestown, NJ 08067</p>	<p>Name of Employer Self employed</p>	<p>Date(month, day, year) 05/16/98 (earmarked; see below)</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 Physician</p>	<p>Aggregate Year-to-Date &gt; \$ 250.00</p>	
<p><b>C. Full Name, Mailing Address and ZIP Code</b> NOTE: Above earmarked through: C. St. Girard Jordan, Requite 6 Rockledge Court, Twin Peaks Marlton, NJ 08053</p>	<p>Name of Employer Self employed</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation Counselor at Law</p>	<p>Total amount of earmarked contributions received from receipt: 1,975.00 Aggregate Year-to-Date &gt; \$</p>	
<p><b>D. Full Name, Mailing Address and ZIP Code</b></p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date &gt; \$</p>	
<p><b>E. Full Name, Mailing Address and ZIP Code</b></p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date &gt; \$</p>	
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date &gt; \$</p>	
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p>	<p>Name of Employer</p>	<p>Date(month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Occupation</p>	<p>Aggregate Year-to-Date &gt; \$</p>	

<p><b>SUBTOTAL of Receipts This Page (optional)</b></p>	<p>750.00</p>
<p><b>TOTAL This Period (last page this line number only)</b></p>	<p>13,463.00</p>



**SCHEDULE A**

**ITEMIZED RECEIPTS**

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (05/14/99 - 08/03/98)

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NAME OF COMMITTEE (In Full)

Barbara Lee for Congress C00331769

<b>A. Full Name, Mailing Address and ZIP Code</b> Action Committee for Rural Electrification 4301 Wilson Boulevard Arlington, VA 22203-1860	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/20/98	
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> American Federation of Teachers Committee of Political Educ. 555 New Jersey Ave., N.W. Washington, DC 20001	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/20/98	
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> Brotherhood of Locomotive Engineers PAC Fund 1370 Ontario St. Cleveland, OH 44113-1702	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/03/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		250.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Cal School Nurse Organization PAC P.O. Box 292789 Sacramento, CA 95829-2785	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/03/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		250.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Chicago Voluntary Political Fund - Federal 1101 Pennsylvania Ave., N.W. Washington, DC 20004	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/20/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		500.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Committee on Letter Carriers Political Education - NALC 100 Indiana Avenue, N.W. Washington, DC 20001-2149	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/12/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		2,500.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Congressional Black Caucus-PAC 7478 Rhoades St., Ste A Philadelphia, PA 19151	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/13/98	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		500.00

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

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

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NAME OF COMMITTEE (in Full)  
Barbara Lee for Congress C00331769

<b>A. Full Name, Mailing Address and ZIP Code</b> Credit Union Legislative Action Council 905 Fifteenth Street, NW, Suite 300 Washington, DC 20005-2207  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	06/01/98	500.00
Aggregate Year-to-Date >		\$ 2,500.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003  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	05/22/98 In-Kind Contrib. 'bution; Research materials	500.00
Aggregate Year-to-Date >		\$ 1,500.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> Drive Political Fund 25 Louisiana Avenue, N.W. Washington, DC 20001  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	05/22/98	2,500.00
Aggregate Year-to-Date >		\$ 5,000.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> I.B.E.W. - C.O.P.E. 1125 - 15th Street, N.W. Washington, DC 20005  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	05/30/98	300.00
Aggregate Year-to-Date >		\$ 300.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> ICF Kaiser International, Inc. PAC 9300 Lee Hwy Fairfax, VA 22031  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/17/98	2,250.00
Aggregate Year-to-Date >		\$ 2,250.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> Independent Bankers Political Action Committee One Thomas Circle N.W., Suite 400 Washington, DC 20005  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	05/20/95	500.00
Aggregate Year-to-Date >		\$ 500.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> International Longshoremen's & Warehousemen's Union PAC 1188 Franklin St. San Francisco, CA 94109  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/04/98	500.00
Aggregate Year-to-Date >		\$ 500.00	

SUBTOTAL of Receipts This Page (optional)	7,050.00
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  
(06/19/98 - 09/30/98)

PAGE 3 OF 5  
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (In Full)

Barbara Lee for Congress 000331769

<b>A. Full Name, Mailing Address and ZIP Code</b> International Union of Operating Engineers (EPEC) 1125 Seventeenth Street, Northwest Washington, DC 20036	Name of Employer	Date (month, day, year) 05/31/98	Amount of Each Receipt this Period 500.00
	Occupation		
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> Ironworkers Political Action League 1750 New York Avenue, NW. Washington, DC 20006	Name of Employer	Date (month, day, year) 06/11/98	Amount of Each Receipt this Period 2,500.00
	Occupation		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> MATSON FEDERAL ELECTION COMMITTEE 593 Market Street San Francisco, CA 94105	Name of Employer	Date (month, day, year) 06/18/98	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> NAPUS PAC FOR POSTMASTERS 8 Herbert Street Alexandria, VA 22305-2500	Name of Employer	Date (month, day, year) 06/13/98	Amount of Each Receipt this Period 250.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 250.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> WARFE-PAC, National Association Retired Federal Employees 1535 New Hampshire Ave., N.W. Washington, DC 20036	Name of Employer	Date (month, day, year) 06/03/98	Amount of Each Receipt this Period 2,000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> National Association of Federal Credit Unions/PAC P.O. Box 3769 Washington, DC 20007	Name of Employer	Date (month, day, year) 05/20/98	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> National Organization for Women PAC 1000 16th Street, N.W., Suite 700 Washington, DC 20036-5705	Name of Employer	Date (month, day, year) 05/24/98 n-kind Labels	Amount of Each Receipt this Period 99.68
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 99.68		

SUBTOTAL of Receipts This Page (optional)	6,349.68
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  
(2514118 - 02/20/96)

PAGE 4 OF 5  
FOR LINE NUMBER 11 (c)

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**NAME OF COMMITTEE (in Full)**

Barbara Lee for Congress C00331769

<b>A. Full Name, Mailing Address and ZIP Code</b> PG&E Employee's Federal Political Action Committee 77 Beale Street San Francisco, CA 94177	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/04/95	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> Realtors Political Action Committee 430 N. Michigan Ave. Chicago, IL 60611		Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):		05/31/98 06/02/98	
		Aggregate Year-to-Date > \$ 1,500.00	
<b>C. Full Name, Mailing Address and ZIP Code</b> SBC Communications, Inc. Employee Federal PAC 175 E. Houston, Rm. 4 R 4 San Antonio, TX 78205	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/28/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		1,000.00
		1,000.00	
<b>D. Full Name, Mailing Address and ZIP Code</b> Sheet Metal Workers' International Political Action League 1750 New York Avenue, N.W. Washington, DC 20006	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		2,500.00
		2,500.00	
<b>E. Full Name, Mailing Address and ZIP Code</b> Transport Workers Union Political Contributions Committee 80 West End Avenue New York, NY 10023	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/30/95	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		1,000.00
		1,000.00	
<b>F. Full Name, Mailing Address and ZIP Code</b> U.A. Political Education Committee 901 Massachusetts Ave., N.W. Washington, DC 20001	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/12/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		1,000.00
		1,000.00	
<b>G. Full Name, Mailing Address and ZIP Code</b> Unite Campaign Committee 1710 Broadway New York, CA 10019	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/20/98	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$		1,000.00
		1,000.00	

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

8,500.00

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

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

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NAME OF COMMITTEE (in Full)  
 Barbara Lee for Congress C00331769

<b>A. Full Name, Mailing Address and ZIP Code</b> United Airlines, Inc. Political Action Committee P.O. Box 66423 Chicago, IL 60666	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	06/04/98	
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 500.00	
<b>B. Full Name, Mailing Address and ZIP Code</b> WAND PAC 691 Mass Ave. Arlington, MA 02174	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	05/26/98	
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$ 950.00	
<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 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/> Other (specify):		
Aggregate Year-to-Date >		\$	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	21,599.68

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (05/14/98 - 09/30/98)

PAGE 1 OF 12  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

Barbara Lee for Congress C00331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
V. Teri Adams 1055 16th St. Oakland, CA 94607	Food and beverage for Victory party Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/13/98	342.72
same as above	Office supplies, parking, Victory party and postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/16/98	181.67
same as above	Payroll period ending 05/31/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/98	1,068.62
same as above	Payroll period ending 5/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/10/98	1,068.62
same as above	Payroll period ending 6/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/16/98	1,068.62
same as above	Payroll period ending 6/30/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/30/98	1,068.62
same as above	Permit, filing fee, food and beverage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/98	279.62
same as above	Postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/30/98	32.00
same as above	Reimbursement for food & beverage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/21/98	19.72

SUBTOTAL of Disbursements This Page (optional)

5,140.21

TOTAL This Period (last page this line number only)

**SCHEDULE B**  
Operating Expenses

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page  
(06/14/98 - 06/30/98)

PAGE 2 OF 12  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

Barbara Loo for Congress CU0331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
same as above	Reimbursement for hotel taxes & associated costs for 5/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/21/98	144.11
same as above	Reimbursement for postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/27/98	35.00
same as above	Reimbursement for printing, parking and postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/21/98	46.73
same as above	Village Flat, Postage, Parking Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/25/98	167.98
American Express P.O. Box 0003 Los Angeles, CA 90096-0003	Credit Card Payment (See Below) Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/05/98 05/16/98	403.17 480.00
Oakland Marriott City Center 1001 Broadway Street Oakland, CA 94607	Accommodations election night Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/14/98	211.25 MEMO
Athens L. Applon P.O. Box 71463 Oakland, CA 94612	payroll period ending 03/31/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/98	235.06
same as above	payroll period ending 5/18/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/20/98	36.97
Autumn Press Inc. 1280 Sixty-Fifth Street Oakland, CA 94602	Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/02/98 05/27/98	4,055.24 616.52

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

6,281.68

**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 (05/14/98 - 06/30/98)

PAGE 3 OF 12  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Barbara Lee for Congress C00331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Charles Bradshaw 465 51st Street Oakland, CA 94609	Alameda County Registrar 4 copies Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/98	17.27
B. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 5/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/16/98	Amount of Each Disbursement this Period 582.95
C. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 5/31/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/01/98	Amount of Each Disbursement this Period 582.98
D. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 6/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/16/98	Amount of Each Disbursement this Period 582.98
E. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 6/30/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/30/98	Amount of Each Disbursement this Period 582.98
F. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Photocopying Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/10/98	Amount of Each Disbursement this Period 9.74
G. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Reimbursement for food and beverage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/21/98	Amount of Each Disbursement this Period 89.74
H. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Reimbursement for meals Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/27/98	Amount of Each Disbursement this Period 43.29
I. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Shipping charges, food and beverages Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/01/98	Amount of Each Disbursement this Period 50.30

SUBTOTAL of Disbursements This Page (optional)

3,572.26

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 (06/19/89 - 08/30/90)

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**NAME OF COMMITTEE (in Full)**

Barbara Lee for Congress (N0331769)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
name as above	Supplies for Victory party Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/15/98	7.08
B. Full Name, Mailing Address and ZIP Code Steve Brown 6225 Ross Street Oakland, CA 94618	Purpose of Disbursement payroll period ending 05/18/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/20/98	Amount of Each Disbursement this Period 119.59
C. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement payroll period ending 5/21/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/05/98	Amount of Each Disbursement this Period 158.38
D. Full Name, Mailing Address and ZIP Code Michael C. Butler 3144 College Avenue Berkeley, CA 94705	Purpose of Disbursement Payroll period ending 05/18/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/20/98	Amount of Each Disbursement this Period 109.89
E. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement payroll period ending 5/21/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/05/98	Amount of Each Disbursement this Period 94.70
F. Full Name, Mailing Address and ZIP Code COGS 520 Center Street San Carlos, CA 94070	Purpose of Disbursement Candidates' outdoor graphic service Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/26/98	Amount of Each Disbursement this Period 5,409.67
G. Full Name, Mailing Address and ZIP Code Congressional Federal Credit Union	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) 06/30/98	Amount of Each Disbursement this Period 2,175.87
H. Full Name, Mailing Address and ZIP Code Oakland Marriott City Center 1001 Broadway Street Oakland, CA 94607	Purpose of Disbursement Election night party hosted by Congresswoman Barbara Lee Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/02/98	Amount of Each Disbursement this Period 2,175.87 MEMO
I. Full Name, Mailing Address and ZIP Code John Connolly 2824 Symphony Court Berkeley, CA 94705	Purpose of Disbursement Computer consulting/data management Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/20/98	Amount of Each Disbursement this Period 350.00

SUBTOTAL of Disbursements This Page (optional)

8,425.18

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 (06/14/98 - 08/30/98)

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**NAME OF COMMITTEE (in Full)**

Barbara Lee for Congress C00331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Elizabeth A. Corner 401 Willow A Alameda, CA 94507	Payroll period ending 6/05/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/05/98	215.38
B. Full Name, Mailing Address and ZIP Code Copymaster of Northern California 24650 Arador St #122 Hayward, CA 94544	Purpose of Disbursement Photocopies Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/16/98	Amount of Each Disbursement this Period 602.45
C. Full Name, Mailing Address and ZIP Code Daniel Ziegler Design 1526 42nd Street Emeryville, CA 95608	Purpose of Disbursement Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/11/98	Amount of Each Disbursement this Period 579.14
D. Full Name, Mailing Address and ZIP Code Doreeblis L. Fessell 815 42nd Street Oakland, CA 94609	Purpose of Disbursement Payroll period ending 05/18/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/20/98	Amount of Each Disbursement this Period 111.51
E. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 6/05/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/05/98	Amount of Each Disbursement this Period 210.77
F. Full Name, Mailing Address and ZIP Code Kimberly Garfinkle 917 Centennial Avenue Alameda, CA 94501	Purpose of Disbursement Cleaning supplies, food & beverage office Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/05/98	Amount of Each Disbursement this Period 115.46
G. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 5/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/16/98	Amount of Each Disbursement this Period 835.50
H. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 5/31/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/01/98	Amount of Each Disbursement this Period 875.50
I. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Payroll period ending 6/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/16/98	Amount of Each Disbursement this Period 835.50

SUBTOTAL of Disbursements This Page (optional)

4,361.21

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 (05/14/98 - 08/31/98)

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NAME OF COMMITTEE (in Full)

Barbara Lee For Congress C00331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
same as above	Payroll period ending 6/30/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/30/98	495.50
same as above	Food and beverage for phone bank employees Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/98	71.11
Tom Goetz 1013 Keith Avenue Berkeley, CA 94705	city of Berkeley for refuse services Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/98	98.33
same as above	Bank Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/30/98 06/02/98	1,532.24 1,039.77
Ardin Graham 899 Rand Avenue Oakland, CA	Computer equipment Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/02/98	216.49
same as above	Printer cartridges Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/15/98	64.52
Handra Green 1227 E. 17th St. #1 Oakland, CA 94606	payroll period ending 05/18/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/20/98	169.70
same as above	payroll period ending 3/31/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/03/98	232.73
Claire Greensfelder 2267 Sumner Street Berkeley, CA 94709	Consulting fee for fundraising Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/18/98 06/03/98	2,000.00 3,000.00

SUBTOTAL of Disbursements This Page (optional)

6,062.11

TOTAL This Period (last page this line number only)

**SCHEDULE B**  
Operating Expenses

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**

Barbara Lee for Congress C00331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
same as above	Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/98	37.89
same as above	Purpose of Disbursement Stationery, envelopes, paper products and beverages Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/16/98	Amount of Each Disbursement This Period 139.64
C. Full Name, Mailing Address and ZIP Code Helen T. Duich 654 Vernon Street Oakland, CA 94610	Purpose of Disbursement payroll period ending 05/18/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/20/98	Amount of Each Disbursement This Period 90.05
D. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement payroll period ending 5/31/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/05/98	Amount of Each Disbursement This Period 232.73
E. Full Name, Mailing Address and ZIP Code J. Lee Halterman 5401 Bay St. #8421 Emeryville, CA 94608	Purpose of Disbursement Campaign consulting Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/21/98	Amount of Each Disbursement This Period 2,000.00
F. Full Name, Mailing Address and ZIP Code Harbor Bay Property Management 885 Island Drive #203 Alameda, CA 94502	Purpose of Disbursement Rent Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/30/98 06/02/98 05/26/98	Amount of Each Disbursement This Period 350.00 700.00 725.00
G. Full Name, Mailing Address and ZIP Code Marvin C. Hegler 1109 85th Ave. Oakland, CA 94621	Purpose of Disbursement payroll period ending 05/15/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/20/98	Amount of Each Disbursement This Period 129.68
H. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement payroll period ending 5/31/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 06/05/98	Amount of Each Disbursement This Period 144.56
I. Full Name, Mailing Address and ZIP Code Crystal Howard Laverne 3423 52nd Ave. Oakland, CA 94605	Purpose of Disbursement payroll period ending 05/10/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 05/20/98	Amount of Each Disbursement This Period 129.85

SUBTOTAL of Disbursements This Page (optional)

1,604.93

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 (05/14/96 - 09/30/98)

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**NAME OF COMMITTEE (In Full)**

Barbara Lee for Congress 000331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement payroll period ending 5/31/98	Date(month, day, year) 06/05/98	Amount of Each Disbursement this Period 153.92
name as above  B. Full Name, Mailing Address and ZIP Code Jewish Bulletin of Northern California 225 Bush St., #1480 San Francisco, CA 94104-4281	Purpose of Disbursement Advertising in 6/5/98 Bulletin  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 06/25/98	Amount of Each Disbursement this Period 268.00
name as above  C. Full Name, Mailing Address and ZIP Code  name as above	Purpose of Disbursement Newspaper advertising  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 06/11/98	Amount of Each Disbursement this Period 268.00
D. Full Name, Mailing Address and ZIP Code Laurie S. Earp Development Consultant 4200 Park Boulevard, Suite 128 Oakland, CA 94602	Purpose of Disbursement Billed expenses for fundraising  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 06/02/98	Amount of Each Disbursement this Period 2,320.08
name as above  E. Full Name, Mailing Address and ZIP Code  name as above	Purpose of Disbursement Consulting fee for fundraising  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 06/02/98 05/27/98	Amount of Each Disbursement this Period 1,500.00 1,500.00
F. Full Name, Mailing Address and ZIP Code Low Key Press 1062 - 55th Street Oakland, CA 94608	Purpose of Disbursement PRINTING  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 05/27/98	Amount of Each Disbursement this Period 465.79
G. Full Name, Mailing Address and ZIP Code Carolyn L. Millard 912 Centennial Ave. Alameda, CA 94501	Purpose of Disbursement payroll period ending 5/31/98  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 06/05/98	Amount of Each Disbursement this Period 245.65
H. Full Name, Mailing Address and ZIP Code National Democratic Club 30 Ivy Street, S.E. Washington, DC 20003-4071	Purpose of Disbursement Annual dues  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 05/22/98	Amount of Each Disbursement this Period 177.50
I. Full Name, Mailing Address and ZIP Code  name as above	Purpose of Disbursement Breakfast event May 20, 1998  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date(month, day, year) 05/22/98	Amount of Each Disbursement this Period 102.09

SUBTOTAL of Disbursements This Page (optional)

7,261.83

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 (05/14/98 - 09/30/98)

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**NAME OF COMMITTEE (In Full)**

Barbara Lee for Congress C00331765

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Oakland Marriott City Center 100 Broadway Street Oakland, CA 94607	Final payment for banquet. May 16, 1998 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/15/98	3,017.00
same as above	Requining balance from May 16, 1998 event. Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/03/98	222.29
Pacific Bell Payment Center Sacramento, CA 94557-0001	Telephone Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/25/98	681.05
Pacific Bell Payment Center Sacramento, CA 95887-0001	Telephone Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/30/99 06/01/98 05/27/98	285.60 653.77 111.62
Pacific Bell Political Accounts 668 Polson Street, Room 1123 San Francisco, CA 94107	telephone Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/11/98	292.20
Political Data Inc. P.O. Box 1705 Barbark, CA 91507	Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/27/98	1,648.75
Reukho, Johannes & Purcell 220 Montgomery Street, Suite 200 San Francisco, CA 94104	Legal services Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/27/98	1,354.72
Santa Fe Bar and Grill 1110 University Avenue Berkeley, CA 94702	Reception service for May 20th event Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/11/98	1,000.00
U.S. Bank 980 - 9th Street Sacramento, CA 95814	Federal payroll 60596 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/11/98 06/03/98 05/25/98 05/21/98	518.55 799.39 314.47 801.69

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

11,740.40

**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 Expenditure Page (05/14/99 - 05/30/98)

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NAME OF COMMITTEE (in Full)

Barbara Lee for Congress C00331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Returned item fee	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/14/98	3.00
B. Full Name, Mailing Address and ZIP Code Votantes Unidos 1470 Fruitvale Ave. Oakland, CA 94601	Purpose of Disbursement Donation - community education	Date (month, day, year) 06/30/98	Amount of Each Disbursement this Period 1,000.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code Judie L. Wallace 49 Woodcliff Court Oakland, CA 94605	Purpose of Disbursement payroll period ending 05/13/98	Date (month, day, year) 05/20/98	Amount of Each Disbursement this Period 394.62
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement payroll period ending 5/31/98	Date (month, day, year) 06/05/98	Amount of Each Disbursement this Period 295.25
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code Washington Executive Sedan 7642 East Hill Road Mt. Airy, MD 21771	Purpose of Disbursement Transportation during inauguration	Date (month, day, year) 05/27/98	Amount of Each Disbursement this Period 1,352.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code Don Wilcox 24843 Del Prado #515 Dana Point, CA 92629	Purpose of Disbursement Billed expenses Hotel rooms for conv	Date (month, day, year) 06/05/98	Amount of Each Disbursement this Period 190.90
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Billed expenses - photocopies, gas, office supplies	Date (month, day, year) 06/25/98	Amount of Each Disbursement this Period 100.35
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Campaign consulting	Date (month, day, year) 06/02/98	Amount of Each Disbursement this Period 1,000.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code same as above	Purpose of Disbursement Consulting fee	Date (month, day, year) 06/11/98	Amount of Each Disbursement this Period 250.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional)

4,371.92

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 (05/14/98 - 06/30/98)

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NAME OF COMMITTEE (in Full)

Barbara Lee For Congress CD0331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
same as above	Consulting fee for the period 4/10 to 4/30/98 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/27/98	500.00
same as above	Reimburse for CDC lunch Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/20/98	75.00
same as above	Reimburse for Xerox's badges for staff Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/20/98	77.60
same as above	Reimburse for airfare to DC Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/20/98	570.00
same as above	Reimburse for airport parking Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/20/98	20.00
same as above	Reimburse for mailing labels Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/20/98	75.73
Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003 (contributor)	Reimburse materials Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/22/98	500.00 in-kind received
National Organization for Women PAC 1000 16th Street, N.W., Suite 700 Washington, DC 20036-5705 (contributor)	Reimburse labels Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/24/98	99.68 in-kind received
Unitized operating expenses (less than \$200) This Period: 05/14/98 06/30/98	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		2,575.34

SUBTOTAL of Disbursements This Page (optional)

4,493.35

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 (1010788-023) (88)

PAGE 12 OF 12  
FOR LINE NUMBER 17

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)

Barbara Lee for Congress C00331769

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

65,345.08

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

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**  
Debts Owed By the Committee


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

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Barbara Lee for Congress				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor J. St. Girard Jordan, Esquire 6 Rockledge Court, Twin Peaks Marlton, NJ 08053	480.00	0.00	0.00	480.00
Nature of Debt (Purpose): Advanced event expenses held in home				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Patrick J. Kozlowski Accountancy Corp. 1127 11th Street, Suite 225 Sacramento, CA 95814	0.00	5,569.75	0.00	5,569.75
Nature of Debt (Purpose): Campaign accounting services				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) .....				6,049.75
2) TOTAL This Period (last page this line only) .....				6,049.75
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) .....				0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) .....				6,049.75

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 7/15/98
<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	7/19/98 DATE PREPARED