

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
FEDERAL ELECTION
COMMISSION

C00213611 060297
 1. ROBERT J WOOD
 LOUISE SLAUGHTER RE-ELECTION C
 COMMITTEE
 P O BOX 14117
 678 ST BRUCE LAWRENCE
 ROCHESTER NY 14614
 Rochester, NY 14614

2. FEC IDENTIFICATION NUMBER
 C00213611
 3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

- April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid-Year Report (Non-election Year Only)
 Twelfth day report preceding (Type of Election) election on _____ in the State of _____
 Thirtieth day report following the General Election on _____ in the State of _____
 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 |
|---|-------------------------|---|
| 7/1/97 through 12/31/97 | | |
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) | \$118,158.70 | \$190,907.48 |
| (b) Total Contribution Refunds (from Line 20(d)) | \$0.00 | \$0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) | \$118,158.70 | \$190,907.48 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) | \$44,061.84 | \$86,448.13 |
| (b) Total Offsets to Operating Expenditures (from Line 14) | \$611.31 | \$3,830.44 |
| (c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) | \$43,450.53 | \$82,617.69 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27) | \$162,054.41 | For further information contact: |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) | \$0.00 | Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420 |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | \$0.00 | |

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: Robert J. Wood
 Signature of Treasurer: *Robert J. Wood*
 Date: 1/27/98

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

Of Receipts and Disbursements

(Page 2, FEC FORM 3)

| | | |
|--|-----------|--|
| Name of Committee (in full) Louise Slaughter Re-election Committee | C00213611 | Report Covering the Period: From: 7/1/97 To: 12/31/97 |
|--|-----------|--|

| I. RECEIPTS | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM: | | |
| (e) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | \$35,300.00 | |
| (ii) Unitemized..... | \$20,629.00 | |
| (iii) Total Contributions from Individuals..... | \$55,929.00 | \$80,953.78 |
| (b) Political Party Committees..... | \$0.00 | \$0.00 |
| (c) Other Political Committees (such as PACs)..... | \$62,227.70 | \$99,953.70 |
| (d) The Candidate..... | \$0.00 | \$0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i),(ii),(b),(c), and (d)) | \$118,156.70 | \$190,907.48 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..... | \$0.00 | \$0.00 |
| 13. LOANS: | | |
| (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 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)..... | \$611.31 | \$3,830.44 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)..... | \$1,897.70 | \$1,982.25 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15)..... | \$120,465.71 | \$196,720.17 |
| II. DISBURSEMENTS | | |
| 17. OPERATING EXPENDITURES..... | \$44,061.64 | \$66,448.13 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES..... | \$0.00 | \$0.00 |
| 19. LOAN REPAYMENTS | | |
| (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 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (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 |
| 21. OTHER DISBURSEMENTS..... | \$0.00 | \$0.00 |
| 22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d), and 21)..... | \$44,061.64 | \$66,448.13 |

III. CASH SUMMARY

| | |
|--|---------------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | \$85,650.34 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16)..... | \$120,465.71 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | \$206,116.05 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | \$44,061.64 |
| 27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)..... | \$162,054.41 |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of this

PAGE 1 OF 10
FOR LINE NUMBER 11(a)(9)

Contributions from Individuals

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 committees.

NAME OF COMMITTEE (In Full) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|--|--|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code Fisher, Ann P. O. Box 546 Pittsford NY 14634</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Housewife</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/2/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Davis, Ossie Unkown City ST 00000</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Entertainer</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 8/18/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Wyss, John 1776 K Street, N.W. Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Attorney</p> <p>Aggregate Year-to-Date > 00.00 50.00</p> | <p>Date (month, day, year) 10/21/97</p> | <p>Amount of Each Receipt this Period \$50.00 MEMO Partnership Attributed</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Doian, Charles H. 1730 North Huntington St. Arlington VA 22205</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Lobbyist</p> <p>Aggregate Year-to-Date > \$260.00</p> | <p>Date (month, day, year) 9/24/97</p> | <p>Amount of Each Receipt this Period \$260.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Downey, D. Chris 2727 34th Place NW Washington DC 20007</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation homemaker</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 9/24/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Eber, Lester 15 Coral Way Rochester NY 14618</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Owner</p> <p>Aggregate Year-to-Date > \$1,100.00</p> | <p>Date (month, day, year) 12/28/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Kelly, Barbara 346 Beach Ave. Rochester NY 14612</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation V.P. Corp. Communications</p> <p>Aggregate Year-to-Date > \$600.00</p> | <p>Date (month, day, year) 7/7/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |

| | |
|--|-------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$4,000.00</p> |
| <p>TOTAL This Period (last page this form number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/87 TO 12/31/87

Use separate schedules for each category of the

PAGE 2 OF 10

FOR LINE NUMBER 11(8)(H)

Contributions from Individuals

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) **Louise Slaughter Re-election Committee** C00213811

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-------------------------------------|------------------------------------|
| Fink, Thomas 157 Monteroy Rd. Rochester NY 14618 | Davidson Fink Cook & Gate | 12/11/87 | \$600.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Attorney | Aggregate Year-to-Date > \$500.00 | |
| Curtis, Richard 1215 Midtown Tower Rochester NY 14604 | Contra Financial Group | 11/19/87 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Attorney | Aggregate Year-to-Date > \$500.00 | |
| Free, James 1500 K Street, N.W. No. 325 Washington DC 20005 | The Smith-Free Group | 10/27/87 | \$250.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation President and CEO | Aggregate Year-to-Date > \$250.00 | |
| Giugni, Henry 12003 Titian Way Potomac MD 20864 | Information Pending - <i>CASEDY & ASSOCIATES</i> | 8/24/87 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation <i>VICE-CHAIRMAN</i> Information Pending | Aggregate Year-to-Date > \$500.00 | |
| Gradinger, Sanford 91 Douglas Rd. Rochester NY 14610 | Central Financial Group | 11/4/87 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Consultant | Aggregate Year-to-Date > \$1,000.00 | |
| Grossman, Barbara PhD 30 Huntington Rd. Newton MA 02158 | Tufts University | 11/18/87 | \$500.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation Drama Professor | Aggregate Year-to-Date > \$500.00 | |
| Hallowell, Howard 139 Ellingwood Drive Rochester NY 14618 | retired | 11/20/87 | \$1,000.00 |
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Occupation retired | Aggregate Year-to-Date > \$1,000.00 | |

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| SUBTOTAL of Receipts This Page (optional) | \$4,250.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use spaces scheduled for each category of the

PAGE 3 OF 10

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in Full) **Louise Slaughter Re-election Committee** C00213811

| | | | |
|---|--|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code Abraham, George MD 1300 Waterloo-Ganeva Rd. Waterloo NY 13166</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/26/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Hursh, Robert 2795 East Avenue Rochester NY 14610</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Lawyer's Cooperative</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/7/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Fabiani, Barbara 6533 Gilliams Rd. Mc Lean VA 22102</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 9/30/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Bruner, Beth 311 Mendon Ctr. Road Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer homemaker</p> <p>Occupation homemaker</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 12/31/97</p> | <p>Amount of Each Receipt this Period \$600.00 Memo Reattribution</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Aziz, Haris 33 Northfield Gate Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer The Genesee Hospital</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 8/12/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Blanton, Jack 2727 Allen Parkway Suite 1535 Houston TX 77019</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Eddy Refining Co.</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 12/1/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Blanton, Jack Jr. 700 Louisiana Suite 3920 Houston TX 77002</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer JEM Foundation</p> <p>Occupation Mnagar</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 12/1/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$5,250.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

Contributions from Individuals

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NAME OF COMMITTEE (In Full) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|--|--|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code Bouyoucos, John 1 Stonagate Ln Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Hydroacoustics</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/20/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Bouyoucos, Kristine 1 Stonagate Ln Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer HOMEMAKER</p> <p>Occupation HOMEMAKER</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/18/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Dennis, Lyle 15310 Iris Ln Dumfries VA 22026</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer CR Associates</p> <p>Occupation Legislative Consultant</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 10/18/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Bruner, Joshua 311 Mendon Center Rd Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Artist</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/14/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Cohn, Marcus 1333 New Hampshire Ave. N.W. Washington DC 20035</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$600.00</p> | <p>Date (month, day, year) 12/16/97</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Bruner, Joshua 311 Mendon Center Rd Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Artist</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 12/31/97</p> | <p>Amount of Each Receipt this Period (\$500.00) Memo Reattributed</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Brush, R. 900 Linden Ave Rochester NY 14625</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer John D. Brush Co</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$800.00</p> | <p>Date (month, day, year) 12/10/97</p> | <p>Amount of Each Receipt this Period \$800.00</p> |

| | |
|--|------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>64,250.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

PAGE 5 OF 10
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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NAME OF COMMITTEE (In Full) **Louise Slaughter Re-election Committee** C00213811

| | | | |
|---|--|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code Buckingham, William 24 Berkeley St Rochester NY 14607</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/18/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Burgher, Sonya 1120 Park Ave. Rochester NY 14610</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Retired</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 11/17/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Burr, Ann 5 Wexford Glen Pittsford NY 14634</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Time Warner</p> <p>Occupation Cable TV</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 11/18/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Cassidy, Loretta 700 - 13th St. NW Suite 400 Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Cassidy and Associates</p> <p>Occupation Lobbyist</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 9/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Clohart, William 447 Nantasket Ave. Hull MA 02045</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 9/29/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Brandt, W. S. C/O Nixon Hargrave Clinton Square Rochester NY 14614</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Nixon Hargrave</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 10/24/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Wiley Rein and, Fielding 1776 K Street, N.W. Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/21/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |

| | |
|---|--------------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$3,500.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedule for each category of the

PAGE 6 OF 10

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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) **Louise Slaughter Re-election Committee** G00215611

| | | | |
|--|--|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code Stanton, and Associates 1310 19th St., N.W. Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 10/22/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Holladay, Wilhelmina 3216 R Street, NW Washington DC 20007</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Volunteer Aggregate Year-to-Date > \$300.00</p> | <p>Date (month, day, year) 11/12/97</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Stewart, Sue 1894 Strong Rd. Victor NY 14564</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Nixon Hargrave Occupation Lawyer Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 10/24/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Sutton, Barbara 4689 Lawton Way Apt 202 Alexandria VA 22311</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Cassidy and Associates Occupation Senior Vice President Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 8/24/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Trevett, Margaret 34 Landsdowne Lane Rochester NY 14618</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Chase Manhattan Bank Occupation Trust Officer Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/29/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Langston, Andrew 883 E. Main St. Rochester NY 14605</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer WDKX Occupation Chairman Aggregate Year-to-Date > \$800.00</p> | <p>Date (month, day, year) 8/4/97</p> | <p>Amount of Each Receipt this Period \$100.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Westphal Haynie, Gloria 30 Laureldale Dr. Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self Employed Occupation Consultant Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 12/11/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |

| | |
|--|-------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$2,200.00</p> |
| <p>TOTAL This Period (last page, this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

See separate schedule(s) for each category of the

PAGE 7 OF 10

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|--|--|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code Smith, Jules 16 W. Main St. No.207 Rochester NY 14614</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Berman, King</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/6/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Zoller, Lois 3180 N. Lake Shore Dr. No. 5-E Chicago IL 60657</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Investor</p> <p>Aggregate Year-to-Date > \$350.00</p> | <p>Date (month, day, year) 12/17/97</p> | <p>Amount of Each Receipt this Period \$250.00 From Conduit</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Holden, Katherine 1776 K Street, N.W. Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Wiley, Rein and Fielding</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$0.00 / 00.00</p> | <p>Date (month, day, year) 10/21/97</p> | <p>Amount of Each Receipt this Period \$100.00 MEMO Partnership Attributed</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Krulwich, Andrew 1776 K Street, N.W. Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Wiley, Rein and Fielding</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$0.00 / 00.00</p> | <p>Date (month, day, year) 10/21/97</p> | <p>Amount of Each Receipt this Period \$100.00 MEMO Partnership Attributed</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Price, Alan 1776 K Street, N.W. Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Wiley, Rein and Fielding</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$0.00 / 50.00</p> | <p>Date (month, day, year) 10/21/97</p> | <p>Amount of Each Receipt this Period \$50.00 MEMO Partnership Attributed</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Queen, Thomas 1776 K Street, N.W. Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Wiley, Rein and Fielding</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$0.00 / 00.00</p> | <p>Date (month, day, year) 10/21/97</p> | <p>Amount of Each Receipt this Period \$100.00 MEMO Partnership Attributed</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Stanton, James 1310 19th St., N.W. Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Stanton and Associates</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$0.00 / 250.00</p> | <p>Date (month, day, year) 10/22/97</p> | <p>Amount of Each Receipt this Period \$250.00 MEMO Partnership Attributed</p> |

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|--|-------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$1,250.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/87 TO 12/31/87

Use separate schedules for each category of use

PAGE 8 OF 10

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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) **Louise Slaughter Re-election Committee** C00213511

| | | | |
|--|---|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code Verdil, Charles 1776 K Street, N.W. Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Wiley, Rein and Fielding</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$5.00 / 100.00</p> | <p>Date (month, day, year) 10/21/87</p> | <p>Amount of Each Receipt this Period \$100.00 MEMO Partnership Attributed</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Warburg, Gerald 2325 N. Jackson St. Arlington VA 22201</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Information pending</p> <p>Occupation Information pending</p> <p>Aggregate Year-to-Date > \$200.00</p> | <p>Date (month, day, year) 9/14/87</p> | <p>Amount of Each Receipt this Period \$200.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Moss, Kate 1626 Foxhall Rd. N. W. Washington DC 20007</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 11/2/87</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Langston, Andrew 683 E. Main St. Rochester NY 14606</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer WDKX</p> <p>Occupation Chairman</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 11/28/87</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Lesser, Marshall C/O Hydroacoustics Inc. PO Box 23447 Rochester NY 14692</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Hydroacoustics Inc.</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 11/13/87</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Levy, Marlon 333 E. 68th St. New York NY 10021</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Self</p> <p>Occupation Writer</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 10/4/87</p> | <p>Amount of Each Receipt this Period \$250.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Linehan, Judy 289 Smith Rd. Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Homemaker</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/6/87</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |

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|--|-------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$2,500.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

PAGE 9 OF 10
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|--|---|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code Loewke, Mike 190 Murray St. Rochester NY 14606</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer 190 Murray St Associates</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/20/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Stein, Jay 6 Great Oak Lane Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer U of R</p> <p>Occupation Senior Vice President</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/12/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Mooney, Thomas 805 Pittsford-Victor Rd. Pittsford NY 14534</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Chamber of Commerce</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 12/23/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Slaughter, Robert 14 Manor Hill Dr Fairport NY 14450</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer retired</p> <p>Occupation retired</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/20/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Ramonas, George 1350 I Street N.W. Suite 680 Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Advocacy Group</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 8/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Robfogal, Nathan 1090 Park Ave. Rochester NY 14610</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer R.I.F.</p> <p>Occupation Govt. Relations</p> <p>Aggregate Year-to-Date > \$1,200.00</p> | <p>Date (month, day, year) 11/20/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Rooney, Fred B. 700 Thirteenth St. NW Suite 400 Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Cassidy & Associates</p> <p>Occupation Lobbyist</p> <p>Aggregate Year-to-Date > \$250.00</p> | <p>Date (month, day, year) 5/24/97</p> | <p>Amount of Each Receipt this Period \$250.00</p> |

| | |
|---|-------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$5,350.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedule(s) for each category of the

PAGE 10 OF 10
FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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) **Louise Slaughter Re-election Committee** C00213611

| A. Full Name, Mailing Address and ZIP Code Rosen, Hilary 2318 Ashboro Dr. Chevy Chase MD 20815 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Recording Industry of America Occupation President Aggregate Year-to-Date > \$250.00 | Date (month, day, year) 12/8/97 | Amount of Each Receipt this Period \$250.00 |
|---|---|-------------------------------------|--|
| B. Full Name, Mailing Address and ZIP Code Rowan, James Sr. 73 St. Andrew Road Boston MA 02128 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer information pending Occupation information pending Aggregate Year-to-Date > \$650.00 | Date (month, day, year) 8/24/87 | Amount of Each Receipt this Period \$250.00 |
| C. Full Name, Mailing Address and ZIP Code Scurlock, E P.O. Box 185 Houston TX 77001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Homemaker Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year) 12/1/87 | Amount of Each Receipt this Period \$1,000.00 |
| D. Full Name, Mailing Address and ZIP Code Shanahan, Paul 504 Executive Office Building Rochester NY 14614 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Shanahan Law Office Occupation attorney Aggregate Year-to-Date > \$350.00 | Date (month, day, year) 11/20/87 | Amount of Each Receipt this Period \$250.00 |
| E. Full Name, Mailing Address and ZIP Code Luxenberg, David 1055 Harvard St. Rochester NY 14610 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer LaCasse Construction Occupation Principal Aggregate Year-to-Date > \$1,000.00 | Date (month, day, year) 11/18/87 | Amount of Each Receipt this Period \$1,000.00 |
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |

| | |
|---|-------------|
| SUBTOTAL of Receipts This Page (optional) | \$2,750.00 |
| TOTAL This Period (last page this line number only) | \$36,300.00 |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedule(s) for each category of the

Contributions from Other Political Committees

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NAME OF COMMITTEE (in Full) **Louise Slaughter Re-election Committee** C00213411

| | | | |
|--|---|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, RGE Empl Fed 89 East Ave. Rochester NY 14649</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/9/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, Seafarers 5201 Auth Way Suitland MD 20746</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 7/16/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code PAC, OCAW 1126 16th St S 411 Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 6/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, NALC COLCPE 100 Indiana Ave NW Washington DC 20001</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/18/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code PAC, Morgan Co. 60 Wall Street New York NY 10260</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$2,000.00</p> | <p>Date (month, day, year) 10/18/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, NAPUS 8 Herbert Street Alexandria VA 22305</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/18/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, AF of M Tempo 1601 Broadway New York NY 10038</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$100.00</p> | <p>Date (month, day, year) 12/22/97</p> | <p>Amount of Each Receipt this Period \$100.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$4,100.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedule(s) for each category of the

FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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)
Louise Slaughter Re-election Committee C00213811

| | | | |
|--|---|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, Am Podiatric 9312 Old Georgetown Rd Bethesda MD 20814</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/17/97</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Pac, Am Hospital Asc 325 Seventh Street, N.W. Washington DC 20004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/8/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Pac, First Chicago One First National Plaza Chicago IL 60670</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/22/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, Williams Jensen 111155 - 21st St. NW Suite 300 Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 9/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code PAC, IUE District 3 355 Murray Hill Parkway East Rutherford NJ 07073</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 8/8/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, Am. Speech Lang 10801 Rockville Pike Rockville MD 20862</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/12/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, U. A. 901 Massachusetts Ave. NW Washington DC 20001</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$2,000.00</p> | <p>Date (month, day, year) 7/7/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |

| | |
|---|--------------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$5,000.00</p> |
| <p>TOTAL This Period (test page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

PAGE 3 OF 11

FOR LINE NUMBER

11(c)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|---|---|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, Women in Psych 3900 East Camelback Suite 200 Phoenix AZ 85018</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$6,000.00</p> | <p>Date (month, day, year) 10/9/97</p> | <p>Amount of Each Receipt this Period \$5,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, Machinists 9000 Machinists Place Upper Marlboro MD 20772</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$5,000.00</p> | <p>Date (month, day, year) 10/17/97</p> | <p>Amount of Each Receipt this Period \$800.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Committee Re-Elect, Joe Moaklay 89 Summer Street - Suite 1250 Boston MA 02110</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/16/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, Ocean Spray 225 Water St. Plymouth MA 02360</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/18/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code PAC, CAP 1400 K Street NW Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/3/97</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Darrick, Frnds of Butler 5521 Hawthorne Pl NW Washington DC 20016</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 8/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Pac, NCEC 10 East 39th Street New York NY 10018</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$2,500.00</p> | <p>Date (month, day, year) 7/1/97</p> | <p>Amount of Each Receipt this Period \$2,500.00 In-kind</p> |

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|---|--------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$10,500.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213811

| | | | |
|--|--|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, American Optoma 1505 Prince St, No. 300 Alexandria VA 22314</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, NEA 1201 16th St., NW Washington DC 20038</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/17/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code PAC, ASEA Brown 1001 15th St., N.W. No. 600 Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$600.00</p> | <p>Date (month, day, year) 10/27/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, Citicorp 1101 Pennsylvania Ave. NW Suite 1000 Washington DC 20004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$1,500.00</p> | <p>Date (month, day, year) 10/22/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code PAC, Am Medical 1101 Vermont Ave. NW Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/23/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, Treasury Emplie 901 E. Street NW Suite 600 Washington DC 20004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/29/97</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, Chase Manhattan For Good Government 270 Park Avenue New York NY 10017</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$1,800.00</p> | <p>Date (month, day, year) 10/22/97</p> | <p>Amount of Each Receipt this Period \$800.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$4,000.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedule(s) for each category of the

PAGE 5 OF 11
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|---|---|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, RochJointBoard 750 East Ave Rochester NY 14504</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/13/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, Am Bankers 1120 Connecticut NW Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/6/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code PAC, Nationsbank 100 N. Tryon Street Charlotte NC 28202</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 8/30/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, Am Optometric 1605 Prince St. Suite 300 Alexandria VA 22314</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Noel Brazil-Director</p> <p>Occupation Noel Brazil-Director</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code PAC, NARFE 1633 New Hampshire NW Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$3,000.00</p> | <p>Date (month, day, year) 10/28/97</p> | <p>Amount of Each Receipt this Period \$2,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, Sheet Metal Wrk 1750 New York Ave NW Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/22/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, CLIC 101 Constitution NW Washington DC 20001</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,500.00</p> | <p>Date (month, day, year) 8/18/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$6,000.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedule(s) for each category of the

PAGE 6 OF 11
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|---|---|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, Am Fed Teachers 555 New Jersey Ave. Washington DC 20001</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$2,100.00</p> | <p>Date (month, day, year) 10/20/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, NRLCA 1630 Duke St 4th Floor Alexandria VA 22314</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/20/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code PAC, Transportation 14600 Detroit Ave Lakewood OH 44107</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$1,800.00</p> | <p>Date (month, day, year) 10/14/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, PriceWaterhouse 1301 K St, NW Suite 800W Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 11/6/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code PAC, ACB 900 19th Street, N.W. Suite 400 Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$600.00</p> | <p>Date (month, day, year) 11/3/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, American Dental 1111- 14th Nw/Suite 1100 Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$1,800.00</p> | <p>Date (month, day, year) 11/6/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, UMW 900 15th Street NW Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/21/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$3,500.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/87 TO 12/31/87

Use separate schedules for each category of the

PAGE 7 OF 11

FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213811

| | | | |
|--|---|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, NatComPrsSS/Mad 2000 K. Street NW Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer PAC</p> <p>Occupation PAC</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/27/87</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, ALPA 1826 Mass Ave. NW Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/11/87</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Pac, Physical Therap 1111 N. Fairfax St. Alexandria VA 22314</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$600.00</p> | <p>Date (month, day, year) 10/28/87</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, Frontier Corp 180 S. Clinton Ave. Rochester NY 14646</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/28/87</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code PAC, AICPA 1465 Penn. Avenue NW Washington DC 20004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/19/87</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, Responsible Cit 3 Research Place Rockville MD 20850</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$800.00</p> | <p>Date (month, day, year) 11/18/87</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, AFSCME 1625 L St NW Washington DC 20036</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$5,000.00</p> | <p>Date (month, day, year) 10/31/87</p> | <p>Amount of Each Receipt this Period \$3,000.00</p> |

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| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$7,000.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

PAGE 8 OF 11

FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|---|--------------------------|-------------------------|---|
| A. Full Name, Mailing Address and ZIP Code PAC, Machinists 9000 Machinists Place Upper Marlboro MD 20772 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$4,000.00 |
| | Occupation | 11/13/97 | |
| | Aggregate Year-to-Date > | \$4,000.00 | |
| B. Full Name, Mailing Address and ZIP Code PAC, Am Postal Work 1300 L St, N.W. Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Occupation | 11/8/97 | |
| | Aggregate Year-to-Date > | \$500.00 | |
| C. Full Name, Mailing Address and ZIP Code PAC, UAW 8000 East Jefferson Detroit MI 48214 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Occupation | 10/30/97 | |
| | Aggregate Year-to-Date > | \$1,000.00 | |
| D. Full Name, Mailing Address and ZIP Code Schroeder, For Congress 2000 Gaylord St Denver CO 80205 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Occupation | 8/24/97 | |
| | Aggregate Year-to-Date > | \$500.00 | |
| E. Full Name, Mailing Address and ZIP Code PAC, NARAL 1156 15th Street NW Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Occupation | 10/24/97 | |
| | Aggregate Year-to-Date > | \$1,000.00 | |
| F. Full Name, Mailing Address and ZIP Code PAC, Am Fed Teachers 655 New Jersey Ave. Washington DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$1,500.00 |
| | Occupation | 12/16/97 | |
| | Aggregate Year-to-Date > | \$2,500.00 | |
| G. Full Name, Mailing Address and ZIP Code PAC, Am Oc Therapy 4720 Montgomery Lane P. O. Box 31220 Bethesda MD 20824 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period \$500.00 |
| | Occupation | 11/25/97 | |
| | Aggregate Year-to-Date > | \$500.00 | |

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional) | \$8,000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedule(s) for each category of tax

PAGE 9 OF 11

FOR LINE NUMBER 11(a)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|---|---|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, AICPA 1455 Penn. Avenue NW Washington DC 20004</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,500.00</p> | <p>Date (month, day, year) 10/24/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, American Dental 1111- 14th Nw/Suite 1100 Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,500.00</p> | <p>Date (month, day, year) 11/18/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code PAC, J and J One Johnson and Johnson Plaza New Brunswick NJ 08933</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 11/10/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, IAFF 1750 New York Ave NW Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 12/10/97</p> | <p>Amount of Each Receipt this Period \$1,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Pac, Mass. Mutual 1295 State Street Springfield MA 01111</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/28/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, Golden State 11356 W. Olympic Biv Los Angeles CA 90064</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$500.00</p> | <p>Date (month, day, year) 10/8/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, NRLGA 1830 Duke St 4th Floor Alexandria VA 22314</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 11/14/97</p> | <p>Amount of Each Receipt this Period \$500.00</p> |

| | |
|--|-------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$4,500.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

PAGE 10 OF 11

FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213511

| | | | |
|--|---|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, JAG PO Box 106 Highland Park IL 60035</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$0.00</p> | <p>Date (month, day, year) 12/31/97</p> | <p>Amount of Each Receipt this Period</p> <p>\$700.00 MEMO ACTED AS CONDUIT</p> |
| <p>B. Full Name, Mailing Address and ZIP Code PAC, U. A. 901 Massachusetts Ave. NW Washington DC 20001</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$2,000.00</p> | <p>Date (month, day, year) 12/17/97</p> | <p>Amount of Each Receipt this Period</p> <p>\$1,500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code PAC, SEIU Cope Fund 1313 L St NW Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,500.00</p> | <p>Date (month, day, year) 12/18/97</p> | <p>Amount of Each Receipt this Period</p> <p>\$1,500.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code PAC, CLIC 101 Constitution NW Washington DC 20001</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,500.00</p> | <p>Date (month, day, year) 12/9/97</p> | <p>Amount of Each Receipt this Period</p> <p>\$600.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Pac, Butler Derrick 5521 Hawthorne Place N.W. Washington DC 20015</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$127.70</p> | <p>Date (month, day, year) 10/7/97</p> | <p>Amount of Each Receipt this Period</p> <p>\$127.70 In-Kind</p> |
| <p>F. Full Name, Mailing Address and ZIP Code PAC, DCCC 430 S. Capitol St. Washington DC 20003</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 12/19/97</p> | <p>Amount of Each Receipt this Period</p> <p>\$1,000.00 In-Kind</p> |
| <p>G. Full Name, Mailing Address and ZIP Code PAC, DCCC 430 S. Capitol St. Washington DC 20003</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$1,000.00</p> | <p>Date (month, day, year) 10/22/97</p> | <p>Amount of Each Receipt this Period</p> <p>\$500.00 In-Kind</p> |

| | |
|--|-------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$4,827.70</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/87 TO 12/31/87

Use separate schedule for each category of tax

PAGE 11 OF 11

FOR LINE NUMBER 11(e)

Contributions from Other Political Committees

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) **Louise Slaughter Re-election Committee** C00213811

| | | | |
|--|--|---|--|
| <p>A. Full Name, Mailing Address and ZIP Code PAC, UFCW 1775 K. Street NW Washington DC 20006</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$3,000.00</p> | <p>Date (month, day, year) 11/7/87</p> | <p>Amount of Each Receipt this Period \$2,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Pac, Dean Witter 1300 I St., N.W., Suite 1200 West Washington DC 20005</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$600.00</p> | <p>Date (month, day, year) 10/22/87</p> | <p>Amount of Each Receipt this Period \$600.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code PAC, ANA 600 Maryland Ave SW Suite 100 West Washington DC 20024</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date > \$2,500.00</p> | <p>Date (month, day, year) 12/18/87</p> | <p>Amount of Each Receipt this Period \$2,500.00</p> |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date ></p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date ></p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date ></p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date ></p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |

| | |
|--|--------------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$3,000.00</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p>\$82,227.70</p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

PAGE 1 OF 1
FOR LINE NUMBER 14

Offsets to Operating Expenditures

Any information copied from such Reports and Statements may not be 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) **Louise Slaughter Re-election Committee** C08213811

| A. Full Name, Mailing Address and ZIP Code State Insurance Fund 199 Church St. New York NY 10007 | Name of Employer Occupation Aggregate Year-to-Date > \$811.31 | Date (month, day, year) 10/18/97 | Amount of Each Receipt this Period \$811.31 Refund Expenditure Refund |
|--|---|-------------------------------------|---|
| Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | | | |
| Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date > | 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): | | | |
| Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date > | 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): | | | |
| Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date > | 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): | | | |
| Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date > | 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): | | | |
| Full Name, Mailing Address and ZIP Code | Name of Employer Occupation Aggregate Year-to-Date > | 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): | | | |

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional) | > \$811.31 |
| TOTAL This Period (last page this line number only) | > \$811.31 |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use space scheduled for each category of the

PAGE 1 OF 2

FOR LINE NUMBER 15

Other Receipts

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|--|---|--|--|
| <p>A. Full Name, Mailing Address and ZIP Code Progressive Nghbhd Fed Cr Un Nghbhd F 504 Thurston Rd. Rochester NY 14619</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$163.58</p> | <p>Date (month, day, year) 9/30/97</p> | <p>Amount of Each Receipt this Period \$76.64 Interest for 3d qtr INTEREST/DIVIDE ND</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Fleet Bank Bank, Fleet Crossroads Building Rochester NY 14638</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$379.21</p> | <p>Date (month, day, year) 12/31/97</p> | <p>Amount of Each Receipt this Period \$84.86 Interest INTEREST/DIVIDE ND</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Fleet Bank Bank, Fleet Crossroads Building Rochester NY 14638</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$379.21</p> | <p>Date (month, day, year) 11/28/97</p> | <p>Amount of Each Receipt this Period \$28.42 Interest INTEREST/DIVIDE ND</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Fleet Bank Bank, Fleet Crossroads Building Rochester NY 14638</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$379.21</p> | <p>Date (month, day, year) 10/31/97</p> | <p>Amount of Each Receipt this Period \$19.84 Interest INTEREST/DIVIDE ND</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Fleet Bank Bank, Fleet Crossroads Building Rochester NY 14638</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$379.21</p> | <p>Date (month, day, year) 9/30/97</p> | <p>Amount of Each Receipt this Period \$8.49 Interest INTEREST/DIVIDE ND</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Fleet Bank Bank, Fleet Crossroads Building Rochester NY 14638</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$379.21</p> | <p>Date (month, day, year) 8/29/97</p> | <p>Amount of Each Receipt this Period \$7.57 Interest INTEREST/DIVIDE ND</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Fleet Bank Bank, Fleet Crossroads Building Rochester NY 14638</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$379.21</p> | <p>Date (month, day, year) 7/31/97</p> | <p>Amount of Each Receipt this Period \$42.64 Interest INTEREST/DIVIDE ND</p> |

| | |
|--|-----------------|
| <p>SUBTOTAL of Receipts This Page (optional)</p> | <p>\$248.85</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE A

ITEMIZED RECEIPTS

FROM 7/1/97 TO 12/31/97

Use separate schedules for each category of the

PAGE 2 OF 2
FOR LINE NUMBER 15

Other Receipts

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) **Louise Slaughter Re-election Committee** C00213611

| A. Full Name, Mailing Address and ZIP Code First National Bank 35 State Street Rochester NY 14614 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > \$1,449.65 | Date (month, day, year) 12/31/97 | Amount of Each Receipt this Period \$1,449.65 Interest thru 12/31/97 INTEREST/DIVIDE |
|--|---|-------------------------------------|---|
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |
| Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Name of Employer Occupation Aggregate Year-to-Date > | Date (month, day, year) | Amount of Each Receipt this Period |

| | |
|---|------------|
| SUBTOTAL of Receipts This Page (optional) | \$1,449.65 |
| TOTAL This Period (last page this line number only) | \$1,697.70 |

SCHEDULE B ITEMIZED DISBURSEMENTS

Operating Expenditures

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) **Louise Slaughter Re-election Committee** C00215811

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|---|--|-------------------------|---|
| ADP Payroll Service 400 West Covina Blvd San Dimas CA 91773 | Payroll Service Payroll Service Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/4/97 | 32.70 |
| ADP Payroll Service 400 West Covina Blvd San Dimas CA 91773 | Payroll Tax Payroll Tax Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/4/97 | 842.46 |
| ADP Payroll Service 400 West Covina Blvd San Dimas CA 91773 | Payroll Tax Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/31/97 | 247.01 |
| ADP Payroll Service 400 West Covina Blvd San Dimas CA 91773 | Payroll Service Payroll Service Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/31/97 | 32.70 |
| AFSCME 1625 L Street N.W. Washington DC 20036 | Phone Bank Payment of debt Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/18/97 | 2,825.00 |
| All Occasions Catering 349 W. Commercial Street East Rochester NY 14446 | Catering Catering Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/2/97 | 431.25 |
| Aspen Software Corp. 1019 Juniper St. Quakertown PA 18951 | Computer Expenses Computer Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/23/97 | 3,885.80 |
| Associates, Townhouse 1155 21st Street N. W. Suite 300 Washington DC 20036 | IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/11/97 | 35.00 |
| Autumn Publishing 7219 Nathan Ct Manassas VA 22110 | Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/2/97 | 2,064.84 |

| | |
|---|------------------|
| SUBTOTAL of Disbursements This Page (optional) | 39,738.96 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

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) **Louise Slaughter Re-election Committee** C00213811

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|--|--|-------------------------|---|
| Cantrell/Cutter Printing Inc. 499 S Capitol St SW Washington DC 20003 | Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/16/97 | 1,024.72 |
| Cantrell/Cutter Printing Inc. 499 S Capitol St SW Washington DC 20003 | Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/2/97 | 254.86 |
| Citizens for Terry Schmitt 121 East Ave. Rochester NY 14604 | Political Contributions Political Contributions Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/28/97 | 200.00 |
| Copy Central 1780 Monroe Ave. Rochester NY 14618 | Copying Copying Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/16/97 | 1.10 |
| Dem Congress Campaign Comm 430 S. Capitol St. Washington DC 20003 | Political Committees Political Committees Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/18/97 | 6,000.00 |
| Eric Vitallano For Congress P.O. Box 80802 Staten Island NY 10308 | Political Contributions Political Contributions Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/22/97 | 1,000.00 |
| Fed. of German Am. Societies 284 Malden St. Rochester NY 14615 | Print Ads Print Ads Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/20/97 | 83.00 |
| Fleet Bank Crossroads Building Rochester NY 14638 | Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/21/97 | 17.18 |
| Fleet Bank Crossroads Building Rochester NY 14638 | Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 9/18/97 | 16.78 |

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| SUBTOTAL of Disbursements This Page (optional) | 77,574.63 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B ITEMIZED DISBURSEMENTS

Operating Expenditures

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) **Louise Slaughter Re-election Committee** C00213011

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|---|--|-------------------------|---|
| Fleet Bank Crossroads Building Rochester NY 14638 | Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/20/97 | 38.16 |
| Fleet Bank Crossroads Building Rochester NY 14638 | Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 11/19/97 | 42.88 |
| Fleet Bank Crossroads Building Rochester NY 14638 | Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/10/97 | 28.98 |
| Fleet Bank Crossroads Building Rochester NY 14638 | Bank Service Charge Bank Service Charge Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/22/97 | 34.86 |
| Fraioli Inc. 80 F. St. NW No 804 Washington DC 20001 | Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 9/18/97 | 1,535.03 |
| Fraioli Inc. 80 F. St. NW No 804 Washington DC 20001 | Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/16/97 | 1,524.28 |
| Fraioli Inc. 80 F. St. NW No 804 Washington DC 20001 | Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 11/13/97 | 2,723.81 |
| Fraioli Inc. 80 F. St. NW No 804 Washington DC 20001 | Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/13/97 | 2,828.12 |
| Fraioli Inc. 80 F. St. NW No 804 Washington DC 20001 | Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/29/97 | 1,892.81 |

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| SUBTOTAL of Disbursements This Page (optional) | 510,349.06 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B ITEMIZED DISBURSEMENTS

Operating Expenditures

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|--|--|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code Fraiofi Inc. 80 F. St. NW No 804 Washington DC 20001</p> | <p>Purpose of Disbursement Campaign Consultant Campaign Consultant Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 8/18/87</p> | <p>Amount of Each Disbursement this Period 1,803.24</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Greater Rochester Jaycees P.O. Box 26802 Rochester NY 14626</p> | <p>Purpose of Disbursement Print Ads Print Ads Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 8/18/87</p> | <p>Amount of Each Disbursement this Period 60.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Grace Police Patrolmans Assoc. P.O. Box 16106 Rochester NY 14616</p> | <p>Purpose of Disbursement Print Ads Ad Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 7/26/87</p> | <p>Amount of Each Disbursement this Period 125.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Jewish Ledger 3385 Bri-Hen TL Road Rochester NY 14623</p> | <p>Purpose of Disbursement Print Ads Print Ads Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 10/23/87</p> | <p>Amount of Each Disbursement this Period 165.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Labor News Inc. 509 N. Goodman St. Rochester NY 14609</p> | <p>Purpose of Disbursement Print Ads Print Ads Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 8/18/87</p> | <p>Amount of Each Disbursement this Period 109.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Lyell Area Revitalization Com. 1259 Lyell Ave. Rochester NY 14606</p> | <p>Purpose of Disbursement Print Ads Print Ads Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 9/10/87</p> | <p>Amount of Each Disbursement this Period 45.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Mental Health Association 339 East Ave. Suite 201 Rochester NY 14604</p> | <p>Purpose of Disbursement Print Ads Print Ads Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 11/13/87</p> | <p>Amount of Each Disbursement this Period 66.00</p> |
| <p>H. Full Name, Mailing Address and ZIP Code Monroe County Democratic Comm. 121 East Avenue Rochester NY 14614</p> | <p>Purpose of Disbursement Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 10/16/87</p> | <p>Amount of Each Disbursement this Period 80.00</p> |
| <p>I. Full Name, Mailing Address and ZIP Code Monroe County Democratic Comm. 121 East Avenue Rochester NY 14614</p> | <p>Purpose of Disbursement Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 12/4/87</p> | <p>Amount of Each Disbursement this Period 75.00</p> |

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| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p>\$2,487.84</p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p></p> |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

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) **Louise Slaughter Re-election Committee** CD0218611

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|---|--|-------------------------|---|
| Monroe County Democratic Comm. 121 East Avenue Rochester NY 14614 | Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/11/97 | 1,040.62 |
| Monroe County Democratic Comm. 121 East Avenue Rochester NY 14614 | Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/18/97 | 50.00 |
| Monroe Cty Vol Firemans PO Box 128 East Rochester NY 14445 | Print Ads Ad Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/20/87 | 125.00 |
| National Democratic Club 30 Ivy Street S.E. Washington DC 20003 | Fundraising Fundraising Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 11/13/97 | 237.74 |
| NYS Dem Senate Campaign Comm. 111 Washington Ave. Albany NY 12210 | Political Committee Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/16/97 | 250.00 |
| Oneals 49 West 64th St. New York NY 10023 | Catering Fundraising reception expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/28/87 | 393.25 |
| Pac, Butler Demik 5621 Hawthorne Place N.W. Washington DC 20016 | IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/7/97 | 127.70 |
| PAC, DCCC 430 S. Capitol St. Washington DC 20003 | IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/19/97 | 1,000.00 |
| PAC, DCCC 430 S. Capitol St. Washington DC 20003 | IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/22/97 | 600.00 |

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|---|------------|
| SUBTOTAL of Disbursements This Page (optional) | \$3,724.31 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B ITEMIZED DISBURSEMENTS

Operating Expenditures

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) **Louise Slaughter Re-election Committee** C00213611

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement this Period |
|---|---|-------------------------|---|
| Pac, NCEC 10 East 39th Street New York NY 10016 | IN-KIND RECEIVED Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/1/97 | 2,500.00 |
| B. Full Name, Mailing Address and ZIP Code Perinton Publishing 17 Chipping Ridge Fairport NY 14450 | Printing Printing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/23/97 | 1,213.77 |
| C. Full Name, Mailing Address and ZIP Code Petty Cash Street Required City ST 00000 | Office Expenses Office Expenses Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 11/13/97 | 500.83 |
| D. Full Name, Mailing Address and ZIP Code Public Storage Inc. 1693 East Avenue Rochester NY 14610 | Office Rent Storage space D 114 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/28/97 | 75.00 |
| E. Full Name, Mailing Address and ZIP Code Public Storage Inc. 1693 East Avenue Rochester NY 14610 | Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 12/2/97 | 75.00 |
| F. Full Name, Mailing Address and ZIP Code Public Storage Inc. 1693 East Avenue Rochester NY 14610 | Office Rent Storage space D114 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 7/28/97 | 75.00 |
| G. Full Name, Mailing Address and ZIP Code Public Storage Inc. 1693 East Avenue Rochester NY 14610 | Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/18/97 | 75.00 |
| H. Full Name, Mailing Address and ZIP Code Public Storage Inc. 1693 East Avenue Rochester NY 14610 | Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 8/23/97 | 75.00 |
| I. Full Name, Mailing Address and ZIP Code Public Storage Inc. 1693 East Avenue Rochester NY 14610 | Office Rent Office Rent Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | 10/23/97 | 75.00 |

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| SUBTOTAL of Disbursements This Page (optional) | \$4,284.80 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B ITEMIZED DISBURSEMENTS

Operating Expenditures

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) **Louise Slaughter Re-election Committee** C00213611

| | | | |
|--|---|---|---|
| <p>A. Full Name, Mailing Address and ZIP Code Roch. Vincent Lombardi Lodge 181 Saymour Rd. Rochester NY 14609</p> | <p>Purpose of Disbursement Print Ads Print Ads</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 9/23/87</p> | <p>Amount of Each Disbursement this Period 100.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Schroeder, Ervin 47 Lilac Drive Apt5 Rochester NY 14620</p> | <p>Purpose of Disbursement Postage Postage</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 11/13/87</p> | <p>Amount of Each Disbursement this Period 7.64</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Schroeder, Ervin 47 Lilac Drive Apt5 Rochester NY 14620</p> | <p>Purpose of Disbursement Campaign Workers' Salaries Salary</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 7/14/87</p> | <p>Amount of Each Disbursement this Period 544.47</p> |
| <p>D. Full Name, Mailing Address and ZIP Code Schroeder, Ervin 47 Lilac Drive Apt5 Rochester NY 14620</p> | <p>Purpose of Disbursement Postage Postage</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 12/13/87</p> | <p>Amount of Each Disbursement this Period 18.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code Schroeder, Ervin 47 Lilac Drive Apt5 Rochester NY 14620</p> | <p>Purpose of Disbursement Copying Copying</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 10/16/87</p> | <p>Amount of Each Disbursement this Period 3.28</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Schroeder, Ervin 47 Lilac Drive Apt5 Rochester NY 14620</p> | <p>Purpose of Disbursement Office Expenses Reimbursement for phone bill</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 7/29/87</p> | <p>Amount of Each Disbursement this Period 33.83</p> |
| <p>G. Full Name, Mailing Address and ZIP Code Schroeder, Ervin 47 Lilac Drive Apt5 Rochester NY 14620</p> | <p>Purpose of Disbursement Campaign Workers' Salaries Campaign Workers' Salaries</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 12/4/87</p> | <p>Amount of Each Disbursement this Period 1,056.89</p> |
| <p>H. Full Name, Mailing Address and ZIP Code Two Moms On The Run 160 North Carolina Avenue SE Washington DC 20003</p> | <p>Purpose of Disbursement Catering Catering</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 12/2/87</p> | <p>Amount of Each Disbursement this Period 1,700.00</p> |
| <p>I. Full Name, Mailing Address and ZIP Code U. S. Postmaster Federal Building Rochester NY 14614</p> | <p>Purpose of Disbursement Postage Stamps</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p> | <p>Date (month, day, year) 7/1/87</p> | <p>Amount of Each Disbursement this Period 32.80</p> |

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| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p>\$3,491.13</p> |
| <p>TOTAL This Period (last page, this line number only)</p> | <p></p> |

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate
schedule for each
category of the

PAGE 8 OF 8

FOR LINE NUMBER
17

Operating Expenditures

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) | | C00213811 | |
|--|---|--|--|
| A. Full Name, Mailing Address and ZIP Code U. S. Postmaster Federal Building Rochester NY 14814 | Purpose of Disbursement Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Date (month, day, year) 8/10/97 | Amount of Each Disbursement this Period 1,509.54 |
| B. Full Name, Mailing Address and ZIP Code U. S. Postmaster Federal Building Rochester NY 14614 | Purpose of Disbursement Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Date (month, day, year) 9/10/97 | Amount of Each Disbursement this Period 32.00 |
| C. Full Name, Mailing Address and ZIP Code U. S. Postmaster Federal Building Rochester NY 14614 | Purpose of Disbursement Postage Postage for Christmas mailing Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Date (month, day, year) 12/8/97 | Amount of Each Disbursement this Period 800.08 |
| D. Full Name, Mailing Address and ZIP Code U. S. Postmaster Federal Building Rochester NY 14614 | Purpose of Disbursement Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Date (month, day, year) 12/13/97 | Amount of Each Disbursement this Period 32.00 |
| E. Full Name, Mailing Address and ZIP Code U. S. Postmaster Federal Building Rochester NY 14614 | Purpose of Disbursement Postage Postage Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Date (month, day, year) 11/13/97 | Amount of Each Disbursement this Period 32.00 |
| F. Full Name, Mailing Address and ZIP Code Wilson, Roberta 22 Oliver St Rochester NY 14607 | Purpose of Disbursement Fundraising Fundraising Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Date (month, day, year) 12/2/97 | Amount of Each Disbursement this Period 29.82 |
| 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 |
| 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 |
| Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): | Date (month, day, year) | Amount of Each Disbursement this Period |

SUBTOTAL of Disbursements This Page (optional)

\$2,436.13

TOTAL This Period (last page this line number only)

\$44,061.64

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

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

D.A.O.
PREPARER

2/4/98
DATE PREPARED