

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1999 DEC 20 P 4 11

1. NAME OF COMMITTEE (in full) National Abortion and Reproductive Rights Action League PAC		2. FEC IDENTIFICATION NUMBER C00079541
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 1156 15th Street, NW Suite 700	3. <input checked="" type="checkbox"/> This committee qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE Washington, DC 20005		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid-Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
 Thirtieth day report following the General Election on
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-date
5. Covering Period <u>11/01/99</u> through <u>11/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$83915.60
(b) Cash on Hand at Beginning of Reporting Period	\$148481.26	
(c) Total Receipts (from Line 19)	\$128070.61	\$380734.74
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$274531.87	\$464650.34
7. Total Disbursements (from Line 30)	\$6016.73	\$196135.20
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$268515.14	\$268515.14
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

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

Signature of Treasurer *Glenn A. Jochen*

Date

12-20-99

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

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FEC FORM 3X
(Revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE National Abortion and Reproductive Rights Action League PAC	REPORT COVERING PERIOD FROM 11/01/99 TO: 11/30/99	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (Use Schedule A)	\$23798.00	\$38328.00
ii. Unitemized	\$103531.00	\$316700.00
iii. Total	\$127329.00	\$376058.99
b. Political Party Committees	\$0.00	\$0.00
c. Other Political Committees (such as PACs)	\$0.00	\$0.00
d. Total Contributions	\$127329.00	\$376058.99
12. Transfers From Affiliated/Other Party Committees	\$0.00	\$0.00
13. All Loans Received	\$0.00	\$0.00
14. Loan Repayments Received	\$0.00	\$0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	\$0.00	\$285.84
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	\$0.00	\$0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	\$741.61	\$4378.91
18. Transfers from Nonfederal Account for Joint Activity	\$0.00	\$0.00
19. Total Receipts	\$128070.61	\$380734.74
20. Total Federal Receipts	\$128070.61	\$380734.74
II. DISBURSEMENTS		
21. Operating Expenditures:		
a. Shared Federal/Non Federal Activity (from Schedule H4)		
i. Federal Share	\$0.00	\$0.00
ii. Non-Federal Share	\$0.00	\$0.00
b. Other Federal Operating Expenditures	\$16.73	\$118948.02
c. Total Operating Expenditures	\$16.73	\$118948.02
22. Transfers to Affiliated/Other Party Committees	\$0.00	\$0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$6000.00	\$75250.00
24. Independent Expenditures (use Schedule E)	\$0.00	\$3837.18
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	\$0.00	\$0.00
26. Loan Repayments Made	\$0.00	\$0.00
27. Loans Made	\$0.00	\$0.00
28. 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	\$0.00	\$0.00
29. Other Disbursements	\$0.00	\$0.00
30. Total Disbursements	\$8018.73	\$198135.20
31. Total Federal Disbursements	\$8018.73	\$198135.20
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	\$127329.00	\$376058.99
33. Total Contribution Refunds (from line 28d)	\$0.00	\$0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	\$127329.00	\$376058.99
35. Total Federal Operating Expenditures	\$16.73	\$118948.02
36. Offsets to Operating Expenditures (from line 15)	\$0.00	\$285.84
37. Net Operating Expenditures	\$16.73	\$118662.18

SCHEDULE A

ITEMIZED RECEIPTS

Any information copied from such Receipts 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 contributors.

NAME OF COMMITTEE (In Full)
 National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code Victoria Adams 2330 Medford Ct E Fort Worth, TX 76109- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$365.00	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$365.00
Full Name, Mailing Address and Zip Code Mr. & Mrs. Arnold 6211 S Kramerla St Englewood, CO 80111- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code G. E. Asselestine 4408 Country Club Rd Minneapolis, MN 55424- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$365.00	Date (month, day, year) 11/08/99	Amount of Each Receipt this Period \$365.00
Full Name, Mailing Address and Zip Code Jean Bach 60 Washington News New York, NY 10003-6608 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Robert H. Berkley 900 Palisade Ave #18-M Fort Lee, NJ 07024-4140 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$100.00
Full Name, Mailing Address and Zip Code Margaret L. Brennan 265 Vallejo Court Millbrae, CA 94030-2835 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/05/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Linda D. Burgess 1223 Alexander Court Saint Helena, CA 94574-1701 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)	\$1883.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code Pamela Cipriano 4349 Cloudmont Dr Hollywood, SC 29449-5808 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Virginia R. Ciriza 4515 Tremont Ln Corona Del Mar, CA 92625-3129 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Patti Colevas 119 Dickerman Rd Newton, MA 02461- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Brigham and Women's Hospital Occupation Requested Physician Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Shirley Evans 345 E Quincy St Riverside, IL 60546-2133 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Retired Occupation Requested None Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 11/15/99	Amount of Each Receipt this Period \$400.00
Full Name, Mailing Address and Zip Code Emily Maulkner 10463 Baldy Mtn Rd Sandpoint, ID 83864-7274 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Neva Fritsche 5800 Clover Ln Westerville, OH 43081-8617 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$218.00	Date (month, day, year) 11/05/99	Amount of Each Receipt this Period \$218.00
Full Name, Mailing Address and Zip Code Clara Goldbeck 40 Hillview Ave Franklin Park, NJ 08823-1220 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Retired Occupation Requested None Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)	\$2118.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code	Name of Employer Requested	Date (month, day, year)	Amount of Each Receipt this Period
Ambrose Hampton Rt. 1 Box 392 Chapin, SC 29036-8703 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	None	11/05/99	\$250.00
		Aggregate Year-to-Date ->	\$250.00
Sheryl Henley 404 Parkridge Tampa, FL 33617-4145 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Homemaker	11/01/99	\$500.00
		Occupation	None
		Aggregate Year-to-Date ->	\$500.00
Anita Heyman 101 Lindsey Ln Lincroft, NJ 07738-1814 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Requested	11/01/99	\$365.00
		Occupation	Requested
		Aggregate Year-to-Date ->	\$365.00
Dianna Holder 22641 Marietta Rd Salinas, CA 93908-9699 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Requested	11/12/99	\$365.00
		Occupation	None
		Aggregate Year-to-Date ->	\$365.00
Nina Houghton 431 Beloit Ave Los Angeles, CA 90049-3405 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Inverness Research Associates	11/01/99	\$250.00
		Occupation	Educational Researcher
		Aggregate Year-to-Date ->	\$250.00
Robert C. Hunt 5635 E Paseo de la Tirada Tucson, AZ 85730-1437 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Requested	11/18/99	\$500.00
		Occupation	Requested
		Aggregate Year-to-Date ->	\$500.00
Marylou Ingwersen 1218 Cherry St Winnetka, IL 60093-2117 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Self-employed	11/01/99	\$500.00
		Occupation	Artist
		Aggregate Year-to-Date ->	\$500.00
SUBTOTAL of Receipts This Page (optional)			\$2730.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedulers for each category of the Detailed Summary Page

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Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gemey Kaliff 3510 Turtle Creek Blvd Apt 170 Dallas, TX 75219-5545	Self-employed Occupation investor	11/01/99	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$250.00
Benita T. Kaplan 20 S Summit Ave Gaithersburg, MD 20877-2936	Retired Occupation None	11/01/99	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
Katherine B. Soone 5903 SE 14th Ave Portland, OR 97202-5201	Requested Occupation Requested	11/24/99	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$500.00
John Kluge 1833 Crestview Dr New Ulm, MN 56073-3726	Emergency Practice Associates Occupation Physician	11/05/99	\$365.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$365.00
Lynn Sibers 1330 Jackson Avenue River Forest, IL 60305-	IBM Occupation Consultant	11/08/99	\$350.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$350.00
Elizabeth J. Mackay 62 Cambridge Court Madison, NJ 07940-	Bear, Stearns, & Co. Occupation Investment Analyst	11/24/99	\$350.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$350.00
William Maginn 1 Candlelight Court #D Clifton Park, NY 12065-4156	Requested Occupation Requested	11/17/99	\$210.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		\$210.00

SUBTOTAL of Receipts This Page (optional) \$2525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code Albert Richardson 830 Washington Place Erie, PA 16502-1048 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Date (month, day, year) 11/24/99 Aggregate Year-to-Date -> \$400.00	Amount of Each Receipt this Period \$200.00
Full Name, Mailing Address and Zip Code Edward Roach 6 Sea View Ave Oakland, CA 94611-3519 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Date (month, day, year) 11/17/99 Aggregate Year-to-Date -> \$300.00	Amount of Each Receipt this Period \$300.00
Full Name, Mailing Address and Zip Code Ann R. Roberts 3500 Plantation Pl Dayton, OH 45434-7333 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Date (month, day, year) 11/01/99 Aggregate Year-to-Date -> \$450.00	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Hugh Rosaan 508 Tulip Ln Vero Beach, FL 32963-2233 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Date (month, day, year) 11/24/99 Aggregate Year-to-Date -> \$250.00	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Diane Rosenberg 1125 Longvalley Rd Glenview, IL 60025-3415 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Date (month, day, year) 11/01/99 Aggregate Year-to-Date -> \$500.00	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Joan Rosenthal 119 Greenspring Rd Wilmington, DE 19807-2202 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Date (month, day, year) 11/12/99 Aggregate Year-to-Date -> \$365.00	Amount of Each Receipt this Period \$365.00
Full Name, Mailing Address and Zip Code Linda Roth 50 Whetton Rd W Hartford, CT 06117-2856 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Date (month, day, year) 11/18/99 Aggregate Year-to-Date -> \$225.00	Amount of Each Receipt this Period \$225.00

SUBTOTAL of Receipts This Page (optional) \$2090.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

See separate schedule for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
 National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code Pamela Massey 1299 San Ildefonso Los Alamos, NM 87544-2854 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/05/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Maxine McMurray 15418 Sutton St Sherman Oaks, CA 91403-3808 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation None Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$400.00
Full Name, Mailing Address and Zip Code Karen Moe 3551 Creekview Dr Bonita Springs, FL 34134-1634 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Eugene Montgomery 3101 Broadwalk #1012-1 Atlantic City, NJ 08401-5100 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$300.00
Full Name, Mailing Address and Zip Code Richard Moyer 14 Manchester Court Berwyn, PA 19312-1863 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Mary Pennock 285 S 20th Ave Brighton, CO 80601- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$1000.00
Full Name, Mailing Address and Zip Code Lisa Polisar 408 Seward Square SE #3 Washington, DC 20003-6103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional) \$2950.00

TOTAL This Period (Last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (In Full)
National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code Frederick Rudolph PO Box 515 Williamstown, MA 01267-0515 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Linda MacLay Sandhaus 201 Rt 9-W Palisades, NY 10964-1619 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Mary B. Serene 460 Augusta Dr Statesville, NC 28625-4608 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation None Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$400.00
Full Name, Mailing Address and Zip Code Mimi Shapiro 40 E 84th St#17-3 New York, NY 10028-1105 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation None Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 11/02/99	Amount of Each Receipt this Period \$350.00
Full Name, Mailing Address and Zip Code Barbar Shemp 1520 Grant Rd Northbrook, IL 60062-4719 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/17/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Sally Sokolski 204 Pamela Dr Warren, PA 16363-4116 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$500.00
Full Name, Mailing Address and Zip Code Mary Jane Sprague 175 Bee Hill Rd Williamstown, MA 01267-2703 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Retired Occupation None Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)	\$2500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code Melissa J. Stevens 2514 Woodbridge Dr Austin, TX 78703-2536 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Eleanor J. Stockwell 6718 Montour Dr Falls Church, VA 22043-1746 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$300.00
Full Name, Mailing Address and Zip Code Angela Sturgis Rd 7 Hillcrest Ave Brewster, KY 10503-9807 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$225.00
Full Name, Mailing Address and Zip Code Janet Surkin 549E S South Shore Dr #5-N Chicago, IL 60615-3994 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$365.00	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$365.00
Full Name, Mailing Address and Zip Code Suzann Tensenbaum 75 Amherst Rd Albertain, NY 11507-2223 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Tinka Topping PO Box 292 Sagaponack, NY 11962-0292 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 11/19/99	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and Zip Code Jeanette Tully 2306 Century Hill Los Angeles, CA 90067-3507 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 11/19/99	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional) \$2140.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code Fish Van Camp Box 806 Point Reyes Station, CA 94956-0806 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$365.00 Aggregate Year-to-Date -> \$365.00
Full Name, Mailing Address and Zip Code Wendy Volkmann PO Box 6516 Santa Fe, NM 87502- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
Full Name, Mailing Address and Zip Code Mary Jane Wagle 10794 Weyburn Avenue Los Angeles, CA 90024-3119 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested	Date (month, day, year) 11/12/99	Amount of Each Receipt this Period \$2000.00 Aggregate Year-to-Date -> \$2300.00
Full Name, Mailing Address and Zip Code Pamela Weatherbee 236 Sweetbrook Rd Williamstown, MA 01267-3061 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested	Date (month, day, year) 11/31/99	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Ann Wolff 915 Fisher Ln Winnetka, IL 60093-1503 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$1250.00 Aggregate Year-to-Date -> \$1250.00
Full Name, Mailing Address and Zip Code Avanelle Word 4CD1 Diamond Loch West Fort Worth, TX 76180-8721 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested	Date (month, day, year) 11/01/99	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
Full Name, Mailing Address and Zip Code Roberta Zaslansky 94 Harbor View W Lawrence, NY 11559-1913 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Requested Occupation Requested	Date (month, day, year) 11/24/99	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00

SUBTOTAL of Receipts This Page (optional)	\$4865.00
TOTAL This Period (last page this line number only)	\$23798.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code First Union 1425 K St., NW Washington, DC 20005- Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer Occupation None Aggregate Year-to-Date ->	Date (month, day, year) 11/30/99 \$4379.91	Amount of Each Receipt this Period \$741.61
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
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)	\$741.61
TOTAL This Period (last page this line number only)	\$741.61

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule (a) for each category of the Detailed Summary Form

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)
 National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
First Union 1425 K St., NW Washington, DC 20005-	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/03/99	\$16.73
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)	/ /	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)	/ /	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)	/ /	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)	/ /	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)	/ /	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)	/ /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	\$16.73
TOTAL This Period (last page this line number only)	\$16.73

SCHEDULE B

ITEMIZED DISBURSEMENTS

See separate schedule (a) for each category of the Detailed Summary Page

PAGE 1 OF 2

FUR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joe Baca for Congress PO Box 362 San Bernardino, CA 92402-	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/12/99	\$500.00
Jeff Bingaman, A Lot of P 236 Massachusetts Ave NE #202 Washington, DC 20002-	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/24/99	\$1000.00
Dianne Byrum for Congress PO Box 26191 Lansing, MI 48909-	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/24/99	\$1000.00
Nancy Keener for Montana PO Box 9249 Helena, MT 59604-	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/24/99	\$1000.00
Sander Levin for Congress Committee P.O. Box 990 Washington, DC 20004-	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/24/99	\$1000.00
Gerrold Nadler for Congress 379 W. Broadway, #305 New York, NY 10012-	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/24/99	\$500.00
Rothman for Congress 38 Ivy St., SE Washington, DC 20003-	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/19/99	\$500.00

SUBTOTAL of Disbursements This Page (optional)	\$5500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
National Abortion and Reproductive Rights Action League PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Slaughter Re-election Committee P.O. Box 75214 Washington, DC 20013-		11/24/99	\$500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	
Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	\$500.00
TOTAL This Period (last page this line number only)	\$6000.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>12-20-95</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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	
<i>Jm 13</i> PREPARER	<i>12-21-95</i> DATE PREPARED