

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
Votes For Choice Friends of Family Planning

ADDRESS (number and street) Check if different than previously reported
1010 Wisconsin Ave NW #410

CITY, STATE and ZIP CODE
Washington DC 20007

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
C00197355 P 5-10

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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 12/1/99 through 12/31/99		
6. (a) Cash on Hand January 1, 19 99		\$39,619.64
(b) Cash on Hand at Beginning of Reporting Period	\$107,141.00	
(c) Total Receipts (from Line 19)	\$32,733.09	\$272,319.28
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$139,874.09	\$311,938.92
7. Total Disbursements (from Line 30)	\$39,262.58	\$211,327.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$100,611.51	\$100,611.51
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ NONE	For further information contact: Federal Election Commission 899 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)	\$ NONE	

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: **Julie Burton Assistant Treasurer**

Signature of Treasurer: *Julie Burton* Date: **1/27/00**

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

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 8X

(revised 1/1/91)

NAME OF COMMITTEE

Voters For Choice Friends of Family Planning

REPORT COVERING PERIOD

FROM **12/1/99**

TO **12/30/99**

COLUMN A
Total This Period

COLUMN B
Calendar Year

I. Receipts

11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	21,838.33	188,529.09	11(a)(7)
ii. Unitemized	4,284.63	53,648.52	11(a)(8)
iii. Total (add i and ii) >	26,222.96	242,177.61	11(a)(10)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	26,222.96	242,177.61	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	173.78	4,472.48	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	236.35	1,885.90	17
18. Transfers from Nonfederal Account for Joint Activity	6,100.00	23,783.29	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	32,733.09	272,319.28	19
20. Total Federal Receipts (subtract line 18 from line 19) >	26,633.09	248,535.99	20

II. Disbursements

21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	22,961.50	104,938.35	21(a)(1)
ii. Non-Federal Share	6,078.23	28,586.34	21(a)(2)
b. Other Federal Operating Expenditures	9,222.85	71,302.72	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	38,262.58	204,827.41	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	5,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >		1,500.00	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	39,262.58	211,327.41	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	32,184.35	182,741.07	31

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans)(from line 11d)	26,222.96	242,177.61	32
33. Total Contribution Refunds (from line 28d)	Ø	Ø	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	26,222.96	242,177.61	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	32,184.35	176,241.07	35
36. Offsets to Operating Expenditures (from line 15)	173.78	4,472.48	36
37. Net Operating Expenditures (subtract line 36 from 35) >	32,010.57	171,768.59	37

Voters For Choice
Schedule A
Itemized Individual Contributions
12/01/99 - 12/31/99

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 names and address of any political committee to solicit contributions from such committee.

Boosler, Elayna Brooklyn Productions. 11061 Wrightwood Lane Studio City, CA 91604	Employer: Self Occupation: Comedian Aggregate Year to Date: 300.00	Date 12/09/99	Amount: 200.00
DiPerna, Paula 3270 N. Lakeshore Dr. Chicago, IL 60657	Employer: Foundation Occupation: President Aggregate Year to Date: 500.00	Date 12/09/99	Amount: 500.00
Gilbert, Sarah 1999 Hard Scrabble Place Boulder, CO 80303	Employer: NIST dept commerce Occupation: Physicist Aggregate Year to Date: 600.00	Date 12/09/99	Amount: 200.00
Glimcher, Mildred 435 East 52nd Street Apt 240 New York, NY 10022	Employer: Pace Wildenstein Occupation: Art Historian Aggregate Year to Date: 1,500.00	Date 12/09/99	Amount: 500.00
Harris, Irving 2 N. LaSalle St., Ste 400 Chicago, IL 60602	Employer: Pittway Corp. Occupation: Chairman Aggregate Year to Date: 1,000.00	Date 12/09/99	Amount: 1,000.00
Hicks, Carolina 1520 Silver King Drive Aspen, CO 81611	Employer: Self Occupation: Consultant Aggregate Year to Date: 200.00	Date 12/09/99	Amount: 100.00
Subtotal this Page			2,500.00

Voters For Choice
Schedule A
Itemized Individual Contributions
12/01/99 - 12/31/99

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<p>Hirsch, Kathryn 17 Stratton Road Scarsdale, NY 10583</p>	<p>Employer: White Plains Cty Sch Occupation: Educator (retired) Aggregate Year to Date: 4,619.09</p>	<p>Date 12/09/99</p>	<p>Amount: 2,938.33</p>
<p>Holland, Jane 1607 N.W. 19th Circle Gainesville, FL 32605</p>	<p>Employer: Occupation: Aggregate Year to Date: 300.00</p>	<p>Date 12/09/99</p>	<p>Amount: 200.00</p>
<p>Okie, Richardson 30 Peninsula Road White Bear Lake, MN 55110</p>	<p>Employer: Self Occupation: Lawyer Aggregate Year to Date: 250.00</p>	<p>Date 12/09/99</p>	<p>Amount: 50.00</p>
<p>Petersen, Maria c/o Jess S. Morgan & Company 5750 Wilshire Blvd., Suite 590 Los Angeles, CA 90036</p>	<p>Employer: Requested Occupation: Requested Aggregate Year to Date: 500.00</p>	<p>Date 12/09/99</p>	<p>Amount: 500.00</p>
<p>Schwab, Louise 802 N. Linden Drive Beverly Hills, CA 90210</p>	<p>Employer: Self Occupation: Homemaker Aggregate Year to Date: 200.00</p>	<p>Date 12/09/99</p>	<p>Amount: 100.00</p>
<p>Stahl, Neil & Vonda 248 Rainbow Drive, PMB 14876 Livingston, TX 77399-2048</p>	<p>Employer: Retired Occupation: Professor Aggregate Year to Date: 350.00</p>	<p>Date 12/09/99</p>	<p>Amount: 100.00</p>

Subtotal this Page 3,888.33

Voters For Choice
Schedule A
Itemized Individual Contributions
12/01/99 - 12/31/99

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<p>Wijdenes, Susan 83 Hamilton Street Madison, NJ 07940</p>	<p>Employer: Drew U. Library Occupation: Library Assistant Aggregate Year to Date: 400.00</p>	<p>Date 12/09/99</p>	<p>Amount: 100.00</p>
<p>Beinecke, Elizabeth 21 East 79th Street New York, NY 10021</p>	<p>Employer: Retired Occupation: Retired Aggregate Year to Date: 1,000.00</p>	<p>Date 12/13/99</p>	<p>Amount: 1,000.00</p>
<p>Burrows, Linda 9171 Wilshire Blvd., Suite 530 Beverly Hills, CA 90210</p>	<p>Employer: Self Occupation: Activists Aggregate Year to Date: 7,500.00</p>	<p>Date 12/13/99</p>	<p>Amount: 5,000.00</p>
<p>Handler, Carole 10788 Lindbrook Drive Los Angeles, CA 90024</p>	<p>Employer: Kay, Scholer Occupation: Attorney Aggregate Year to Date: 500.00</p>	<p>Date 12/13/99</p>	<p>Amount: 250.00</p>
<p>Hull, M. Blair 311 S. Wacker Drive, Suite 1400 Chicago, IL 60606</p>	<p>Employer: Hull Trading, Inc. Occupation: Trader Aggregate Year to Date: 2,000.00</p>	<p>Date 12/13/99</p>	<p>Amount: 2,000.00</p>
<p>Danson, Cassandra 719 Kingman Avenue Santa Monica, CA 90402</p>	<p>Employer: self-employed Occupation: Actress/Int. Designr Aggregate Year to Date: 200.00</p>	<p>Date 12/21/99</p>	<p>Amount: 200.00</p>

Subtotal this Page 8,550.00

Voters For Choice
Schedule A
Itemized Individual Contributions
12/01/99 - 12/31/99

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Deardourff, John 8328 Georgetown Pike McLean, VA 22102	Employer: Self Occupation: Consultant Aggregate Year to Date: 1,000.00	Date 12/21/99	Amount: 1,000.00
Hanisch, A. 5018 Milward Drive Madison, WI 53711	Employer: Self-Employed Occupation: Film Producer Aggregate Year to Date: 250.00	Date 12/21/99	Amount: 250.00
Kazan, Nicholas 3014 3rd Avenue Santa Monica, CA 90405	Employer: Self Occupation: Writer Aggregate Year to Date: 500.00	Date 12/21/99	Amount: 100.00
Kolker, Ann 5524 39th Street, N.W. Washington, DC 20015	Employer: Ntl Womens Law Ctr Occupation: Policy Analyst Aggregate Year to Date: 500.00	Date 12/21/99	Amount: 500.00
Krosney, Rita 32 Meadow Road Scarsdale, NY 10583	Employer: Self Occupation: Homemaker Aggregate Year to Date: 200.00	Date 12/21/99	Amount: 200.00
Li, F. 3055 Pacific Avenue San Francisco, CA 94115	Employer: Occupation: Physician Aggregate Year to Date: 200.00	Date 12/21/99	Amount: 100.00

Subtotal this Page 2,150.00

Voters For Choice
Schedule A
Itemized Individual Contributions
12/01/99 - 12/31/99

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Middlebrook, Diane 1101 Green Street, Apt 1501 San Francisco, CA 94109	Employer: Stanford University Occupation: Professor Aggregate Year to Date: 500.00	Date 12/21/99	Amount: 500.00
Pritzker, Susan 1518 North Astor Street Chicago, IL 60610	Employer: Self Occupation: Activist Aggregate Year to Date: 2,000.00	Date 12/21/99	Amount: 1,000.00
Roach, Deborah 73 East Elm Street Chicago, IL 60611	Employer: Requested Occupation: Requested Aggregate Year to Date: 200.00	Date 12/21/99	Amount: 100.00
Welfer, Nancy 1420 Centre Ave. Pittsburgh, PA 15219	Employer: Retired Occupation: Retired Aggregate Year to Date: 250.00	Date 12/21/99	Amount: 150.00
Hunting, John 218 Maryland Avenue, NE Washington, DC 20002	Employer: John Hunting Associa Occupation: Investor Aggregate Year to Date: 3,000.00	Date 12/30/99	Amount: 3,000.00
		Subtotal this Page	4,750.00
Total Number of Receipts:	29	Grand Total all Receipts:	21,838.33

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NAME OF COMMITTEE (in Full)

Votes For Choice Friends of Family Planning

A. Full Name, Mailing Address and ZIP Code US Postmaster 900 Brentwood Road Washington, DC 20066 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bre Refund Occupation Aggregate Year-to-Date \$	Date (month, day, year) 12/21/99	Amount of Each Receipt this Period 117.00
B. Full Name, Mailing Address and ZIP Code Amy Buttsford 7823 Mount Washly place Alexandria, VA 22306 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Travel Expense Refund Occupation Aggregate Year-to-Date \$	Date (month, day, year) 12/21/99	Amount of Each Receipt this Period 56.78
C. 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
D. 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
E. 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
F. 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
G. 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)

173.78

TOTAL This Period (last page this line number only)

173.78

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NAME OF COMMITTEE (In Full)
Voters For Choice Friends of Family Planning

A. Full Name, Mailing Address and ZIP Code Bank of America P.O. Box 27025 Richmond, VA 23261	Name of Employer Interact Occupation	Date (month, day, year) 12/30/99	Amount of Each Receipt this Period 38.51
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 206.38	
B. Full Name, Mailing Address and ZIP Code Meinl Lynch 1850 K Street NW Washington DC 20006	Name of Employer Interact Occupation	Date (month, day, year) 12/30/99	Amount of Each Receipt this Period 197.84
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,679.22	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) **236.35**

TOTAL This Period (last page this line number only) **236.35**

**METHOD OF ALLOCATION FOR SHARED FEDERAL
AND NON-FEDERAL ADMINISTRATIVE EXPENSES
AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE

Voters For Choice Friends of Family Planning

NATIONAL PARTY COMMITTEES

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) %
 PRESIDENTIAL YEAR (65%)
 ALL OTHER YEARS (60%)

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (65%) (IF CHECKED, ENTER 65% IN BOX TO RIGHT) %
 OR
 FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR.

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL 75 %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL 25 %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

	NUMBER OF POINTS
1. PRESIDENT <input type="checkbox"/> (1 POINT)	<input type="text"/>
2. U.S. SENATE <input type="checkbox"/> (1 POINT)	<input type="text"/>
3. U.S. CONGRESS <input type="checkbox"/> (1 POINT)	<input type="text"/>
4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3)	<input type="text"/>
5. GOVERNOR <input type="checkbox"/> (1 POINT)	<input type="text"/>
6. OTHER STATEWIDE OFFICE(S) <input type="checkbox"/> (1 OR 2 POINTS)	<input type="text"/>
7. STATE SENATE <input type="checkbox"/> (1 POINT)	<input type="text"/>
8. STATE REPRESENTATIVE <input type="checkbox"/> (1 POINT)	<input type="text"/>
9. LOCAL CANDIDATES <input type="checkbox"/> (1 OR 2 POINTS)	<input type="text"/>
10. EXTRA NON-FEDERAL POINT <input type="checkbox"/> (1 POINT)	<input type="text"/>
11. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10)	<input type="text"/>
12. TOTAL POINTS (LINE 4 PLUS LINE 11)	<input type="text"/>

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 %

ALLOCATION RATIOS

NAME OF COMMITTEE

Voters For Choice Friends of Family Planning

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

- I. FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. EXEMPT activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared DIRECT CANDIDATE support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
<p><i>Ny 91 - New York Event</i></p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	80	20
<p><i>LA - LA Luncheon</i></p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	80	20
<p><i>Dem. Direct mail</i></p> <p>ACTIVITY IS: <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	80	20
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	FEDERAL %	NON-FEDERAL %
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	FEDERAL %	NON-FEDERAL %
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	FEDERAL %	NON-FEDERAL %
<p>NAME OF ACTIVITY OR EVENT</p> <p>ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED</p>	FEDERAL %	NON-FEDERAL %

RECEIPT SCHEDULE H3
(effective 1/1/91)

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE Voters For Choice Friends of Family Planning		TOTAL AMOUNT TRANSFERRED
NAME OF ACCOUNT Restricted		\$ 3,400. ⁰⁰
		DATE OF RECEIPT 12/2/99

BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	980.64		
ii) Direct Fundraising (List Events-Amount for Each)			
a) NY		47.42	
b) LA		2,371.94	
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT State/Local		TOTAL AMOUNT TRANSFERRED
		\$ 2,700. ⁰⁰
		DATE OF RECEIPT 12/2/99

BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive	354.41		
ii) Direct Fundraising (List Events-Amount for Each)			
a) LA		1,321.10	
b) Dem		1,124.49	
c) _____			
d) _____			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)			
a) _____			
b) _____			
c) _____			
d) _____			
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support			

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
SUBTOTAL THIS PAGE	1,335.05	4,764.95	6,100.00
TOTAL THIS PERIOD	1,335.05	4,764.95	6,100.00

NAME OF COMMITTEE

Voter For Choice Friends of Family Planning

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
RB Associates 1054 31st St NW Washington, DC 20007	Rent	12/1/99	650.00	487.50	162.50
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 40,285.35 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
ups P.O. Box 4980 Hagerstown, MD 21747	Countr	12/1/99	45.00	33.75	11.25
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 40,330.35 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
The Hartford P.O. Box 7938 Philadelphia, PA 19101	office Insurance	12/1/99	1,303.00	977.25	325.75
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 41,633.35 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Bell Atlantic P.O. Box 15124 Albany, NY 12212	NY Phone	12/1/99	47.42	37.93	9.49
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 41,680.77 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
A Long Case Man 526W West Pico Blvd Los Angeles, CA 90019	LA Catering	12/1/99	11,212.81	8,970.24	2,242.57
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 52,892.58 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
A/R 5508 Cahvoja Blvd North Hollywood, CA 91601	LA reporting news Service	12/1/99	75.00	60.00	15.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 52,967.58 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					

SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE 13,333.23 10,566.67 2,766.56

TOTAL THIS PERIOD (last page for each line entry)(Fed. share to 21 a i and non-Fed. share to 21 a 8) ...

TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)

NAME OF COMMITTEE

Voted For Choice Funds of Family Planning

A. FULL NAME, MAILING ADDRESS & ZIP CODE			PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Petric Alexandra Studios 1525 Vally Drive Topanga, CA 90290			LA photographer	12/1/99	571.82	457.45	114.37
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 30,356.29 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT							
B. FULL NAME, MAILING ADDRESS & ZIP CODE			PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Postmark P.O. Box 7247-0166 Philadelphia, PA 19170			Postage on meter	12/1/99	2,000.00	1,500.00	500.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 43,633.35 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT							
C. FULL NAME, MAILING ADDRESS & ZIP CODE			PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Network Solutions P.O. Box 17305 Baltimore, MD 21297			Domain name	12/1/99	70.00	52.50	17.50
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 43,703.35 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT							
D. FULL NAME, MAILING ADDRESS & ZIP CODE			PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Bell Atlantic P.O. Box 646 Baltimore, MD 21265			Phone	12/20/99	206.55	154.91	51.64
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 43,909.90 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT							
E. FULL NAME, MAILING ADDRESS & ZIP CODE			PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Working Assets P.O. Box 2041 Mechanicsburg, PA 17055			Long Distance	12/20/99	121.00	90.75	30.25
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 44,030.90 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT							
F. FULL NAME, MAILING ADDRESS & ZIP CODE			PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Sprint P.O. Box 530503 Atlanta, GA 30353			Phone	12/20/99	19.40	14.55	4.85
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 44,050.30 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT							
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE					2,988.77	2,270.16	718.61
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a i and non-Fed. share to 21 a ii) ...							
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 81 of the detailed summary page) ...							

NAME OF COMMITTEE

Voten For Choice Friends of Family Planning

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Alest Delivery Service P.O. Box 4250 Rockville, MD 20849	Courier	12/20/99	98.51	73.88	24.63
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 44,148.81 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Federal Express P.O. Box 1140 Memphis, TN 38101	Courier	12/20/99	105.27	78.95	26.32
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 44,254.08 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
PSI net P.O. Box 485 Herndon, VA 20192	Computer Host	12/20/99	375.00	281.25	93.75
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 44,629.08 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
T/c mailing 809 Keith lane Owings, MD 20736	Dm 99 mail house	12/20/99	5,622.41	4,497.92	1,124.49
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 10,705.94 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
American Express Sntc 0001 Chicago, IL 60679	Don't fee Internet	12/20/99 12/20/99	55.00 356.05	41.25 267.03	13.75 89.02
CATEGORY: <input checked="" type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 45,040.13 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Classic Party Rentals 8476 Staller Drive Colver City, CA 90232	LA Rentals	12/20/99	6,105.49	4,884.39	1,221.10
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ 36,461.78 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			12,717.73	10,124.67	2,593.06
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a i and non-Fed. share to 21 a ii)			29,039.73	22,961.50	6,078.23
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 21 (B)

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)

Voters For Choice Friends of Family Planning

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy Gold 3500 North Lakeshore Drive Chicago, IL 60659	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/1/99	225.00
Linda Solomon 8951 Town Center Largo, MD 20974	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/2/99 12/3/99 12/12/99	321.06 321.06 321.06
Jill Erickson 509 State Lane Alexandria, VA 22314	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/2/99 12/11/99 12/30/99	337.95 337.95 337.95
Amy Rutherford 7823 Mount Woody Place Alexandria, VA 22306	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/99 12/17/99 12/20/99	936.17 936.17 936.17
Betsy Mauer 2519 3rd St NW Washington, DC 20007	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/99 12/17/99 12/20/99	373.75 373.25 373.75
Bank of America P.O. Box 27025 Richmond, VA 23261	Payroll Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/99 12/17/99 12/20/99	793.80 729.52 665.24
DC Government P.O. Box 7792 Washington, DC 20044	State Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/99	81.00
Comptroller of the Treasury P.O. Box 17122 Baltimore, MD 21297	State Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/99	15.00
Virginia Dept of Tourism P.O. Box 27264 Richmond, VA 23261	State Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/99	246.00

SUBTOTAL of Disbursements This Page (optional)

8,662.85

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 21 (B)

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NAME OF COMMITTEE (In Full)

Voters For Choice Friends of Family Planning

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
De Treasurer P.O. Box 419 Washington, DC 20004	Tax Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/99	73.06
Bank of America P.O. Box 27025 Richmond, VA 23261	Bank fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/30/99	487.44
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

560.50

TOTAL This Period (last page this line number only)

9,222.85

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 111 OF 23 FOR LINE NUMBER 23

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)

Voters For Choice Friends of Family Planning

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Mrs. Theresa For Congress 795 Terrace Hill Drive Salt Lake City, UT 84103	D. 2. ut Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/3/99	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	1,000.00

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>1-28-00</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>[Signature]</i> PREPARER	<i>1-29-00</i> DATE PREPARED