

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

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FEC MAIL ROOM

2009 OCT 16 A 1:00

USE FEC MARKING LABEL
TYPE OR PRINT

1. NAME OF COMMITTEE (In full) Solis for Congress		2. FEC IDENTIFICATION NUMBER CD0346296
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 8665 Wilshire Blvd., #220		
CITY, STATE and ZIP CODE Beverly Hills, CA 90211	STATE/DISTRICT CA/31	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 12-Day Pre-Election Report for the _____ (Type of Election)
<input type="checkbox"/> July 15 Quarterly Report	election on _____ in the State of _____
<input checked="" type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> 30-Day Post-Election Report following the General Election
<input type="checkbox"/> January 31 Year End Report	on _____ in the State of _____
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for: Primary Election General Election Special Election Runoff Election

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/2000</u> through <u>09/30/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	76,475.00	683,208.23
(b) Total Contribution Refunds (from Line 20(d))	0.00	40.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	76,475.00	683,168.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	33,154.87	687,956.76
(b) Total Offsets to Operating Expenditures (from Line 14)	548.20	3,888.48
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	32,606.67	684,068.28
8. Cash on Hand at Close of Reporting Period (from Line 27)	122,107.32	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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 Leticia Solis	Date 10/12/08
Signature of Treasurer 	

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

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

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

Name of Committee (In full) Solis for Congress	Report Covering the Period:	
	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
I. RECEIPTS		
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	36,550.00	
(ii) Unitemized	10,600.00	
(iii) Total of contributions from Individuals	47,150.00	518,527.73
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	29,325.00	164,680.50
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))	76,475.00	683,208.23
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.)	546.20	3,888.48
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	77,023.20	687,096.71
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	33,154.87	687,956.76
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	40.00
(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	40.00
21. OTHER DISBURSEMENTS	54,800.00	60,600.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	87,954.87	748,796.76
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	133,038.94
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	77,023.20
25. SUBTOTAL (add Line 23 and Line 24)	\$	210,062.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	87,954.87
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	122,107.32

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

Use separate schedule(s)
 for each category of the
 Detailed Summary Page
 (07/01/2000 - 08/31/2000)

PAGE OF
 1 16
 FOR LINE NUMBER
 11(a) (i)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Solis for Congress C00346296

<p>A. Full Name, Mailing Address and ZIP Code Aris Anagnos 5124 W. Third St., #200 Los Angeles, CA 90048</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Real Estate Dynamics Inc.</p> <p>Occupation Real Estate</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Lynne Appel 330 Cordova St., #345 Pasadena, CA 91101</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer So. CA Alcohol & Drug Program, Inc.</p> <p>Occupation Chief Fiscal Officer</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 09/28/2000</p>	<p>Amount of Each Receipt this Period 50.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Shahriyar Behjou 4700 Clair Del. Ave., Apt. 634 Long Beach, CA 90807</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Shahriyar Behjou</p> <p>Occupation Physician</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 09/28/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Carol O. Biondi 110 N. Rockingham Los Angeles, CA 90049</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Carol O. Biondi</p> <p>Occupation Community Activist</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 09/22/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Norris Gleaton 6701 Center Drive West, #925 Los Angeles, CA 90045</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Norris J. Gleaton, Jr. Atty At Law</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date (month, day, year) 09/22/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Ms. Elspeth Bobbs 630 E. Alameda Santa Fe, NM 87501</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Elspeth Bobbs</p> <p>Occupation Property Manager</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 08/21/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Ms. Priscilla Browning One Pleasant Grove Lane Ithaca, NY 14850-0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Unemployed</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date (month, day, year) 08/21/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>2,950.00</p>
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (07/31/2000 - 06/30/2000)

PAGE 2 OF 16
FOR LINE NUMBER 11(a) (1)

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NAME OF COMMITTEE (in Full)

Scie for Congress C09346296

<p>A. Full Name, Mailing Address and ZIP Code Joanne Bruggemann 3 Lido Circle Redwood City, CA 94065 1302</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer San Mateo County</p> <p>Occupation Community Worker</p> <p>Aggregate Year-to-Date > \$ 100.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Charles Brumbaugh 300 W. Broadway, #1250 Glendale, CA 91210</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Charles Brumbaugh</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Joseph Canino 13 Malaga Place West Manhattan Beach, CA 90266</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Charter Communications</p> <p>Occupation Vice President</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>D. Full Name, Mailing Address and ZIP Code John G. Champomier 2116 Dean Dr. Culverns Heights, CA 91745</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Alta Med Health Services</p> <p>Occupation Senior Vice President</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date(month, day, year) 09/28/2000</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Ema Colon 2727 Krim Drive Los Angeles, CA 90064-4607</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Ms. Jane Condon 18 Close Road Greenwich, CT 06831 0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Jane Condon</p> <p>Occupation Comedian</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Noemi Cruz 1900 N. Vine, #104 Los Angeles, CA 90069</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer PHCOS</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 275.00</p>	<p>Date(month, day, year) 08/03/2000 09/28/2000</p>	<p>Amount of Each Receipt this Period 125.00 150.00</p>

SUBTOTAL of Receipts This Page (optional) 2,125.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/2000 - 09/30/2000)

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FOR LINE NUMBER 11 (a) (1)

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NAME OF COMMITTEE (In Full)

Spilis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code Jeffrey Dennis 1370 Shagbark Drive Des Plaines, IL 60018-0000	Name of Employer Jeffrey D. Dennis	Date(month, day, year) 08/21/2000	Amount of Each Receipt this Period 250.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
B. Full Name, Mailing Address and ZIP Code Elizabeth Diaz 1459 Abajo Drive Monterey Park, CA 91754	Name of Employer Children's Planning Council	Date(month, day, year) 09/22/2000	Amount of Each Receipt this Period 150.00
	Occupation Program Director	Aggregate Year-to-Date > \$ 425.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and ZIP Code Lydia V. Diaz 11020 E. Maplefield South El Monte, CA 91733	Name of Employer El Monte Union High School	Date(month, day, year) 09/22/2000	Amount of Each Receipt this Period 500.00
	Occupation Educator	Aggregate Year-to-Date > \$ 600.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and ZIP Code Rudolph A. Diaz 1022 Delaware Rd. Burbank, CA 91504	Name of Employer Rio Grande Municipal Court	Date(month, day, year) 09/28/2000	Amount of Each Receipt this Period 250.00
	Occupation Judge	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and ZIP Code Joseph Diagonal 19824 Squire Dr. Covina, CA 91724	Name of Employer n/a	Date(month, day, year) 09/08/2000	Amount of Each Receipt this Period 500.00
	Occupation Retired	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and ZIP Code Ms. Constance Duprev 4312 Leonard Lane Nashville, TN 37204	Name of Employer n/a	Date(month, day, year) 08/21/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired	Aggregate Year-to-Date > \$ 400.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and ZIP Code Mary Ellen Healy 14643 Houston Street Sherman Oaks, CA 91403	Name of Employer Valley Presbyterian Hospital	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 250.00
	Occupation Information System Analyst	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional)

1,900.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
Detailed Summary Page
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NAME OF COMMITTEE (In Full)

Solis for Congress C00346296

<p>A. Full Name, Mailing Address and ZIP Code Peter Blims 102 Raymond Street Cambridge, MA 02140 3623</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer MLP</p> <p>Occupation Senior Lecturer</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Lawrence Felix 135 Malcolm Dr. Pasadena, CA 91105</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Soc. Efforts</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Teddy Fregoso 8455 Fountain Ave., #419 Los Angeles, CA 90059</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer XPRS Radio 1090 AM</p> <p>Occupation General Manager</p> <p>Aggregate Year-to-Date > \$ 225.00</p>	<p>Date(month, day, year) 07/25/2000</p>	<p>Amount of Each Receipt this Period 225.00</p>
<p>D. Full Name, Mailing Address and ZIP Code James Geccario 1748 Candlestick Ln. Newport Beach, CA 92660</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer James A. Geccario</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date > \$ 300.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 300.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Louis Gonda 1939 Ave. of the Stars, #2100 Los Angeles, CA 90067</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer Lexington Commercial Powers</p> <p>Occupation Director</p> <p>Aggregate Year-to-Date > \$ 1,000.00</p>	<p>Date(month, day, year) 07/25/2000</p>	<p>Amount of Each Receipt this Period 1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Wanda Grayson 9840 N. Heather Dr. Stemmer, CA 93720 1369</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 2,000.00</p>	<p>Date(month, day, year) 09/03/2000</p>	<p>Amount of Each Receipt this Period 2,000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Frankie Greenberg 1545 Connecticut Ave NW #602 Washington, DC 20008-0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Name of Employer J.S.E.P.A.</p> <p>Occupation Director Regional OPS</p> <p>Aggregate Year-to-Date > \$ 275.00</p>	<p>Date(month, day, year) 08/21/2000</p>	<p>Amount of Each Receipt this Period 275.00</p>

SUBTOTAL of Receipts This Page (optional)

2,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (2010/2000 - 09/002000)	PAGE	OF
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NAME OF COMMITTEE (In Full)

Solis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steven Harris 602 N. Rodeo Dr. Beverly Hills, CA 90210	Corporate Communications	08/03/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Iloela Hernandez 18034 Ventura Blvd., #280 Encino, CA 91516	The Legacy Corporation	08/03/2000	125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Public Affairs Consultant	Aggregate Year-to-Date > \$ 1,125.00	
C. Full Name, Mailing Address and ZIP Code Louis S. Herrera 1111 S. Atlantic Blvd. Los Angeles, CA 90022-4006	n/a	08/03/2000	375.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Dist. Employee	Aggregate Year-to-Date > \$ 575.00	
D. Full Name, Mailing Address and ZIP Code Kanya R. Hornel 846 Paseo Mira Mar Pasadena Palisades, CA 90272	Kanya R. Hornel	08/28/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Environmentalist	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code David C. Hwang 1408 Via Coronel Palos Verdes Estates, CA 90274	n/a	08/03/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 475.00	
F. Full Name, Mailing Address and ZIP Code Ms. Pamela Johansen 637 Crescent Lane Visca, CA 92084	Chicago Federation	08/21/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Urban Planner	Aggregate Year-to-Date > \$ 500.00	
G. Full Name, Mailing Address and ZIP Code Allen Conas 10313 W. Pico Blvd. Los Angeles, CA 90064	Jonas & Associates	07/25/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Real Estate Mgmt.	Aggregate Year-to-Date > \$ 1,000.00	
SUBTOTAL of Receipts This Page (optional)			3,250.00
TOTAL This Period (last page this line number only)			

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

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NAME OF COMMITTEE (in Full)
Sols for Congress C00346296

A. Full Name, Mailing Address and ZIP Code Liliama Jounou 4837 Indianola Way La Canada, CA 91011	Name of Employer n/a	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Best Efforts	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
B. Full Name, Mailing Address and ZIP Code William Josephs 16456 Ventura Blvd., #201 Sherman Oaks, CA 91403	Name of Employer Clinical Consultant Inc.	Date(month, day, year) 05/21/2000	Amount of Each Receipt this Period 125.00
	Occupation Psychologist	Aggregate Year-to-Date > \$ 225.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and ZIP Code Harold Kapelovitz 611 Hillcrest Rd. Beverly Hills, CA 90210	Name of Employer Desmonds & K E R Properties	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 500.00
	Occupation Investor	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and ZIP Code Charmaine Kaplan P.O. Box 650 Rancho Santa Fe, CA 92067	Name of Employer n/a	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Homemaker	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and ZIP Code Lawrence Kasdar 11400 West Olympic Blvd., 7550 Los Angeles, CA 90054-1551	Name of Employer MK Films	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 500.00
	Occupation Film Production	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and ZIP Code Neal Keutman 1401 N. Bundy Dr. Los Angeles, CA 90043	Name of Employer Cedar Sinai	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Physician	Aggregate Year-to-Date > \$ 1,500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and ZIP Code Munson A. Swok 5474 W. 78th Street Los Angeles, CA 90045	Name of Employer Aerospace	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 125.00
	Occupation Engineer	Aggregate Year-to-Date > \$ 225.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional) 4,250.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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)
 Solis for Congress 00346296

A. Full Name, Mailing Address and ZIP Code Ms. Theresse Weil Lansburgh 3601 Carverbury Rd # 1101 Baltimore, MD 21218-2315	Name of Employer Theresse Weil Lansburgh	Date(month, day, year) 08/21/2000	Amount of Each Receipt this Period 250.00
	Occupation Social Worker		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code Richard Levin 15468 Albright St. Pacific Palisades, CA 90272	Name of Employer Skadden, Arps & slate	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Chin-Ho Liao 7095 Hollywood Blvd., #104 43B Hollywood, CA 90028	Name of Employer N/A	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 125.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 125.00		
D. Full Name, Mailing Address and ZIP Code Monica Lozano 3257 Purdue Avenue Los Angeles, CA 90066	Name of Employer La Opinion	Date(month, day, year) 09/28/2000	Amount of Each Receipt this Period 500.00
	Occupation Associate Publisher		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
E. Full Name, Mailing Address and ZIP Code Gabe Madenjian 13624 Via Del Palms Whittier, CA 90602	Name of Employer L.A. County Office of Education	Date(month, day, year) 09/08/2000	Amount of Each Receipt this Period 500.00
	Occupation Coordinator		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Ms. Margaret E. Martin 10450 Lotimford Road #4009 Mitchellville, MD 20721-0000	Name of Employer N/A	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
G. Full Name, Mailing Address and ZIP Code Eugene L. Masuda 100 E. Hincington Cr., #111 Alhambra, CA 91801	Name of Employer Sunrise Dental Laboratory	Date(month, day, year) 09/28/2000	Amount of Each Receipt this Period 750.00
	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 750.00		

SUBTOTAL of Receipts This Page (optional) 2,725.00

TOTAL This Period (last page this line number only)

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

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)
Solis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code CoAnne Manuda 1111 W. Sixth St., #101 Los Angeles, CA 90017 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer n/a	Date(month, day, year) 09/28/2000	Amount of Each Receipt this Period 750.00
	Occupation Best Efforts Aggregate Year-to-Date > \$ 750.00		
B. Full Name, Mailing Address and ZIP Code Linda Wight Mazer 9323 Wilshire Blvd., Ste. 510 Beverly Hills, CA 90211 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer W. Farbinger Ent., Inc.	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 250.00
	Occupation VP & General Counsel Aggregate Year-to-Date > \$ 350.00		
C. Full Name, Mailing Address and ZIP Code George Minter 251 Starlight Crest La Canada, CA 91011 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer So. CA Gas Co.	Date(month, day, year) 09/22/2000	Amount of Each Receipt this Period 250.00
	Occupation Director Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code Eugene Montgomery 3701 Boardwalk, #1018-1 Ocean Club Atlantic City, NJ 08401-3000 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer n/a	Date(month, day, year) 08/21/2000	Amount of Each Receipt this Period 250.00
	Occupation Retired Aggregate Year-to-Date > \$ 800.00		
E. Full Name, Mailing Address and ZIP Code Ms. Jan Montgomery 942 Via Fructoria Santa Barbara, CA 93110 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer n/a	Date(month, day, year) 08/21/2000	Amount of Each Receipt this Period 250.00
	Occupation Retired Aggregate Year-to-Date > \$ 500.00		
F. Full Name, Mailing Address and ZIP Code Mr. Richard Murray 236 Plymouth Avenue NE Grand Rapids, MI 49503 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer US Department of Justice	Date(month, day, year) 08/02/2000	Amount of Each Receipt this Period 250.00
	Occupation Attorney Aggregate Year-to-Date > \$ 500.00		
G. Full Name, Mailing Address and ZIP Code Mary Jeff 2013 S Praire La Ave Chicago, IL 60616 1322 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Name of Employer n/a	Date(month, day, year) 08/23/2000	Amount of Each Receipt this Period 50.00
	Occupation Retired Aggregate Year-to-Date > \$ 400.00		

SUBTOTAL of Receipts This Page (optional)	1,950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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)

Solis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code Steven Nichols P.O. Box 6626 Malibu, CA 90265	Name of Employer K-Swiss Inc.	Date(month, day, year) 02/21/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
B. Full Name, Mailing Address and ZIP Code Pauline Nightingale 121 N. Coast Ave. Los Angeles, CA 90048	Name of Employer Pauline Nightingale	Date(month, day, year) 07/25/2000 08/28/2000	Amount of Each Receipt this Period 250.00 100.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
C. Full Name, Mailing Address and ZIP Code Ms. Constance Beckard 1140 5th Avenue New York, NY 10128	Name of Employer n/a	Date(month, day, year) 08/21/2000	Amount of Each Receipt this Period 250.00
	Occupation Retired	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
D. Full Name, Mailing Address and ZIP Code Mary S. Parker 214 S. Figueroa St., #1230 Los Angeles, CA 90012	Name of Employer n/a	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 125.00
	Occupation Retired	Aggregate Year-to-Date > \$ 350.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
E. Full Name, Mailing Address and ZIP Code David Perez 16000 Hill St. City of Industry, CA 91744	Name of Employer Valley Vista Services	Date(month, day, year) 09/22/2000	Amount of Each Receipt this Period 750.00
	Occupation Manager	Aggregate Year-to-Date > \$ 750.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
F. Full Name, Mailing Address and ZIP Code Margaret Picco 2526 Beverly Ave. Santa Monica, CA 90405	Name of Employer Picco & Eraloy	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 250.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			
G. Full Name, Mailing Address and ZIP Code Leon D. Ralph 722 W. Double Tree Ln. Long Beach, CA 90815	Name of Employer Los Angeles CIC	Date(month, day, year) 08/03/2000	Amount of Each Receipt this Period 250.00
	Occupation President	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):			

SUBTOTAL of Receipts This Page (optional)

2,975.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/2000 - 04/30/2000)	PAGE	OF
	10	16
FOR LINE NUMBER		11 (a) (i)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Solia for Congress C00346296

A. Full Name, Mailing Address and ZIP Code Bruce Ramer 132 South Rodeo Dr. Beverly Hills, CA 90212	Name of Employer Bruce M. Ramer	Date(month, day, year) 09/08/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00		
B. Full Name, Mailing Address and ZIP Code Ms. Marilyn Raney PO Box 349 Solvang, CA 94920	Name of Employer n/a	Date(month, day, year) 06/21/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code Harvey Reichard 501 Shatto Pl., #100 Los Angeles, CA 90020	Name of Employer Harvey Reichard	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 250.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and ZIP Code Ms. Esther Ritz 628 E Kilbourn Ave Apt 2301 Milwaukee, WI 53202	Name of Employer n/a	Date(month, day, year) 08/21/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 350.00		
E. Full Name, Mailing Address and ZIP Code Sylvia Sobledo 2055 Barnwell Way Los Angeles, CA 90032	Name of Employer CA Hospital Medical Center	Date(month, day, year) 05/03/2000	Amount of Each Receipt this Period 250.00
	Occupation Director of Public Affairs		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code Ms. Laura Wood Super 316 Riverside Drive Washington, NC 27889-5246	Name of Employer n/a	Date(month, day, year) 09/21/2000	Amount of Each Receipt this Period 50.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code Loren Rothschild 1201 Tower Grove Dr. Beverly Hills, CA 90210	Name of Employer AV Protection Industries	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 250.00
	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional)

1,500.00

TOTAL This Period (last page line number only)

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

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NAME OF COMMITTEE (in Full)
Solis for Congress C00346290

A. Full Name, Mailing Address and ZIP Code Sarkis Sasounian 716 S. Olive St. Los Angeles, CA 90014	Name of Employer n/a	Date(month, day, year) 09/28/2000	Amount of Each Receipt this Period 500.00
	Occupation Best Efforts Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code W. Ford Johnson 3612 E. Vereda Solana Scottsdale, AZ 85255-3600	Name of Employer n/a	Date(month, day, year) 06/21/2000	Amount of Each Receipt this Period 500.00
	Occupation Retired Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 750.00	
C. Full Name, Mailing Address and ZIP Code Tamara Simkharamian 933 S. 4th St. Montebello, CA 90640	Name of Employer n/a	Date(month, day, year) 09/08/2000	Amount of Each Receipt this Period 500.00
	Occupation Student Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Marvin N. Shapiro 1643 Sheridge Drive Sherman Oaks, CA 91403	Name of Employer Rose, Klein & Marine	Date(month, day, year) 07/25/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Mrs. Olive Walker Swinney 9229 Arlington Boulevard Apt. # 560 Fairfax, VA 22031 0003	Name of Employer n/a	Date(month, day, year) 05/21/2000	Amount of Each Receipt this Period 100.00
	Occupation Retired Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code Carl Thetford 1262 Newbury Park Rd., #13 Newbury Park, CA 91320	Name of Employer n/a	Date(month, day, year) 08/01/2000	Amount of Each Receipt this Period 1,000.00
	Occupation Best Efforts Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code Marie S. Torres 2116 Joan Dr. Hacienda Heights, CA 91745	Name of Employer Aita Med Health Services	Date(month, day, year) 09/28/2000	Amount of Each Receipt this Period 150.00
	Occupation Senior Vice President Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date > \$ 400.00	

SUBTOTAL of Receipts This Page (optional)	3,250.00
TOTAL This Period (last page this line number only)	

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

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NAME OF COMMITTEE (In Full)
Solis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code Julie Vega 1577 Las Palomas La Habra Heights, CA 90631	Name of Employer Julie Vega	Date (month, day, year) 09/28/2000	Amount of Each Receipt this Period 150.00
	Occupation Podiatrist		
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 350.00		
B. Full Name, Mailing Address and ZIP Code Mabel B. Walters 7324 N.W. Penridge Road Portland, OR 97229 6850	Name of Employer Mabel B. Walters	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 100.00
	Occupation Fundraiser		
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Rev. Theodora E. Naring 45 Rochester Road Newton, MA 02458 2517	Name of Employer n/a	Date (month, day, year) 08/21/2000	Amount of Each Receipt this Period 50.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 350.00		
D. Full Name, Mailing Address and ZIP Code Howard E. Welch 15120 B. Valley Blvd. City of Industry, CA 91744	Name of Employer Haddick's Auto Body	Date (month, day, year) 09/22/2000	Amount of Each Receipt this Period 750.00
	Occupation Owner		
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 750.00		
E. Full Name, Mailing Address and ZIP Code George Woodverton 6222 Wilshire Blvd., #602 Los Angeles, CA 90048	Name of Employer Shuckwell, Harris, Anderson et al	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 250.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code Rae D. Wymann 3069 Crestroad E Rancho Palos Verdes, CA 90275	Name of Employer Rae D. Wymann	Date (month, day, year) 08/03/2000	Amount of Each Receipt this Period 500.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code John Yales 1900 Vine St., #104 Los Angeles, CA 90068	Name of Employer Law Offices of John R. Yales, Jr.	Date (month, day, year) 09/28/2000	Amount of Each Receipt this Period 150.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Other (specify): <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > \$ 275.00		

SUBTOTAL of Receipts This Page (optional)	1,950.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
for each category of the
Detailed Summary Page
(07/01/2000 - 02/28/2001)

PAGE 13 OF 16
FOR LINE NUMBER 11 (a) (1)

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)

Solis for Congress C00346296

<p>A. Full Name, Mailing Address and ZIP Code Dzovig Zetlian 1005 N. Lexington Ave. Montebello, CA 90640</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Zetlian Bakery</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date(month, day, year) 09/02/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Ms. Katharine Massei 266 Del Monte Carmel Carmel, CA 93923</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date(month, day, year) 08/16/2000 (earmarked; see below)</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Diane Post 35 Corte Alegre Greenbrae, CA 94924 0000</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer n/a</p> <p>Occupation Homemaker</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date(month, day, year) 08/28/2000 (earmarked; see below)</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Ms. Lynn Worlington 11216 Agua Vista Street Studio City, CA 91602</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Freelance</p> <p>Occupation Actress</p> <p>Aggregate Year-to-Date > \$ 150.00</p>	<p>Date(month, day, year) 07/21/2000 (earmarked; see below)</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>E. Full Name, Mailing Address and ZIP Code NOTE: Above earmarked through: Emily's List 805 - 15th St., N.W., #400 Washington, DC 20005</p> <p>Receipt For: <input 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 > \$</p>	<p>Date(month, day, year)</p> <p>Total amount of earmarked contributions received from committee: 147,267.00</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code City Sports Medicine 5900 Wilshire Blvd., 2nd Fl. Los Angeles, CA 90036</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer (Partnership)</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date(month, day, year) 08/03/2000 SEE ATTACHMENT BELOW</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>G. Full Name, Mailing Address and ZIP Code David Coleman 5400 Wilshire Blvd. Los Angeles, CA 90036</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer City Sports Medicine</p> <p>Occupation D.C.</p> <p>Aggregate Year-to-Date > \$ 250.00</p>	<p>Date(month, day, year) 08/03/2000</p>	<p>Amount of Each Receipt this Period 250.00 MEMO</p>

SUBTOTAL of Receipts This Page (optional)

1,200.00

TOTAL This Period (last page this line number only)

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/2000 - 05/03/2000)

PAGE 10 OF 16
FOR LINE NUMBER 11(a)(1)

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)

Solita for Congress 500346296

<p>A. Full Name, Mailing Address and ZIP Code Curriel & Parker Law Offices of 3113 Fico Blvd. Santa Monica, CA 90405</p>	<p>Name of Employer (Partnership) Occupation</p>	<p>Date(month, day, year) 08/02/2000 ATTRIBUTION DOES NOT REACH REPORTING THRESHOLDS</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>		
<p>B. Full Name, Mailing Address and ZIP Code Koszina, Fialco & Shorly 5151 Van Noye Blvd. Van Noye, CA 91401</p>	<p>Name of Employer (Partnership) Occupation</p>	<p>Date(month, day, year) 07/25/2000 ATTRIBUTION DOES NOT REACH REPORTING THRESHOLDS</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 350.00</p>		
<p>C. Full Name, Mailing Address and ZIP Code L & S Gold Family Trust 211 Spaulding Dr., #101 A Beverly Hills, CA 90212</p>	<p>Name of Employer (Partnership) Occupation</p>	<p>Date(month, day, year) 09/08/2000 SEE ATTRIBUTION BELOW</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>		
<p>D. Full Name, Mailing Address and ZIP Code Lesang Gold 211 Spaulding Dr., #101A Beverly Hills, CA 90212</p>	<p>Name of Employer Mitchell, Silberberg & Knapp Occupation Attorney</p>	<p>Date(month, day, year) 09/08/2000 MEMO</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250.00</p>		
<p>E. Full Name, Mailing Address and ZIP Code Larry Levine & Associates 13701 Riverside Dr., #604 Sherman Oaks, CA 91423-2449</p>	<p>Name of Employer (Partnership) Occupation</p>	<p>Date(month, day, year) 08/03/2000 SEE ATTRIBUTION BELOW</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 500.00</p>		
<p>F. Full Name, Mailing Address and ZIP Code Larry Levine 13701 Riverside Dr., #604 Sherman Oaks, CA 91423-2449</p>	<p>Name of Employer Larry Levine & Associates Occupation Consultant</p>	<p>Date(month, day, year) 08/03/2000 MEMO</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 500.00</p>		
<p>G. Full Name, Mailing Address and ZIP Code Marjorie P. Love Living Trust 2442 17th Ave. Carmel, CA 93923</p>	<p>Name of Employer (Partnership) Occupation</p>	<p>Date(month, day, year) 09/22/2000 SEE ATTRIBUTION BELOW</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 100.00</p>		

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>1,100.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

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

Use separate schedule(s)
for each category of the
Detailed Summary Page
(01/01/2000 - 09/30/2000)

PAGE OF
15 16
FOR LINE NUMBER
11 (a) (i)

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NAME OF COMMITTEE (in Full)

Scie for Congress C00346296

A. Full Name, Mailing Address and ZIP Code	Name of Employer n/a	Date(month, day, year)	Amount of Each Receipt this Period
Marjorie P. Love 2442 17th Avenue Carmel, CA 93923-9129		09/22/2000	100.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Retiree	Aggregate Year-to-Date > \$ 350.00	
B. Full Name, Mailing Address and ZIP Code Nancy Morgan Ritter Living Trust 9100 Wilshire Blvd., #25E Beverly Hills, CA 90212	Name of Employer (Partnership)	Date(month, day, year)	Amount of Each Receipt this Period
		07/25/2000	250.00 SEE ATTRIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code Nancy M. Ritter 9100 Wilshire Blvd., #25E Beverly Hills, CA 90212	Name of Employer Nancy Morgan Inv.	Date(month, day, year)	Amount of Each Receipt this Period
		07/25/2000	250.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Producer	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code O'Rourke, Brumhead, Peng & Allan 101 North Belmont, 3rd Fl. Glendale, CA 91206	Name of Employer (Partnership)	Date(month, day, year)	Amount of Each Receipt this Period
		08/03/2000	1,000.00 SEE ATTRIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
E. Full Name, Mailing Address and ZIP Code Roderick Peng 104 N. Belmont, 3rd Fl. Glendale, CA 91206	Name of Employer Roderick Peng	Date(month, day, year)	Amount of Each Receipt this Period
		08/03/2000	1,000.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code Shusterman, Carl Law Offices of 624 S. Grand Ave., #1608 Los Angeles, CA 90017	Name of Employer (Partnership)	Date(month, day, year)	Amount of Each Receipt this Period
		07/25/2000	250.00 SEE ATTRIBUTION BELOW
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Carl Shusterman 624 S. Grand Ave., #1608 Los Angeles, CA 90017	Name of Employer Law Offices of Carl Shusterman	Date(month, day, year)	Amount of Each Receipt this Period
		07/25/2000	250.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)	1,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A ITEMIZED RECEIPTS
Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page (2751/2000 - 08/03/2000)

PAGE 16 OF 16
FOR LINE NUMBER 11 (a) (1)

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)

Salis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code	Name of Employer (Partnership)	Date (month, day, year)	Amount of Each Receipt this Period
LN Investments 2690 S. Oak Knoll San Marino, CA 91103		09/28/2000	1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 1,500.00	SEE ATTENTION BELOW
B. Full Name, Mailing Address and ZIP Code Nalini Solanki 2690 S. Oak Knoll San Marino, CA 91103	LN Investments	09/28/2000	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Investor		
	Aggregate Year-to-Date >	\$ 750.00	MEMO
C. Full Name, Mailing Address and ZIP Code Uka Solanki 2690 S. Oak Knoll San Marino, CA 91103	LN Investments	09/29/2000	750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation Investor		
	Aggregate Year-to-Date >	\$ 750.00	MEMO
D. Full Name, Mailing Address and ZIP Code Yates, Jr. John R. Law Offices of 1900 Vine St., #104 Los Angeles, CA 90068	(Partnership)	08/03/2000	125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$ 125.00	SEE ATTENTION BELOW
E. Full Name, Mailing Address and ZIP Code John Yates 1900 Vine St., #104 Los Angeles, CA 90068	Law Offices of John R. Yates, Jr.	08/03/2000	125.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation ATTORNEY		
	Aggregate Year-to-Date >	\$ 275.00	MEMO
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 Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
	Aggregate Year-to-Date >	\$	
SUBTOTAL of Receipts This Page (optional)			1,625.00
TOTAL This Period (last page this line number only)			37,050.00

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/2000 - 08/31/2000)

PAGE 1 OF 3
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (In Full)

Solis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code American Federation of Government Employees PAC 80 F St., NW Washington, DC 20001	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	08/21/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 500.00	
B. Full Name, Mailing Address and ZIP Code American Federation of Teachers PAC 555 New Jersey Ave., N.W. Washington, DC 20001	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	09/25/2000	4,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code American Nurses Association PAC 600 Maryland Ave., SW, #100 West Washington, DC 20024 2575	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	09/09/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 5,000.00	
D. Full Name, Mailing Address and ZIP Code Boilermakers Blacksmiths Legislative Education Action Program 753 State Ave., #565 Kansas City, KS 66101-2511	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	08/03/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Brotherhood of Locomotive Engineers 1370 Ontario St. Cleveland, OH 44113-1702	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	09/08/2000	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 250.00	
F. Full Name, Mailing Address and ZIP Code CA Acupuncture Medical Association 1342 S. San Gabriel Blvd. San Gabriel, CA 91776	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	08/03/2000	375.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 375.00	
G. Full Name, Mailing Address and ZIP Code Dealers Election Action Committee of the National Automobile Dealers Assn. 9400 Westpark Dr. McLean, VA 22102	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	Occupation	08/14/2000	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 5,000.00	

SUBTOTAL of Receipts This Page (optional)

11,625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (7701/2000 - 04/29/2000)

PAGE 2 OF 3
FOR LINE NUMBER 11 (c)

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)

Solis for Congress 070346296

A. Full Name, Mailing Address and ZIP Code Laborer's Western Political League 620 Sunbeam Ave. Sacramento, CA 95814	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/28/2000	2,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code New Fund For Children & Public Education 1201 16th St., N.W., #421 Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/21/2000	3,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 3,000.00	
C. Full Name, Mailing Address and ZIP Code PAC to the Future, Congresswomen Nancy Pelosi 268 Bank St., PMB 9200 San Francisco, CA 94104	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/24/2000	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 5,000.00	
D. Full Name, Mailing Address and ZIP Code Nancy Pelosi for Congress One Bank St., #1100 San Francisco, CA 94104	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/24/2000	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Salvadoran American PAC 1701 W 85th St. Los Angeles, CA 90047	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/28/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 500.00	
F. Full Name, Mailing Address and ZIP Code San Gabriel Valley Democratic Women's Club POB 40003 Pasadena, CA 91114	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	09/22/2000	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 200.00	
G. Full Name, Mailing Address and ZIP Code Universal Studios PAC 100 Universal City Plaza Universal City, CA 91608	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	08/21/2000	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Aggregate Year-to-Date >	\$ 500.00	

SUBTOTAL of Receipts This Page (optional)	14,200.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from Other Political Committees

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/2000 - 06/30/2000)

PAGE 3 OF 3
FOR LINE NUMBER 11 (c)

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NAME OF COMMITTEE (in Full)

Solis For Congress C00346296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Woman's Political Committee Federal PAC 501 S. Figueroa St., 29rd Flr. Los Angeles, CA 90017		07/25/2000	3,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	3,500.00
B. 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 Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
		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 Other (specify):	Occupation		
		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 Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation		
		Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts This Page (optional)			3,500.00
TOTAL This Period (last page this line number only)			29,375.00

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)

Solis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mercury Mailing Systems, Inc. 8223 Santa Monica Blvd. West Hollywood, CA 90046	Refund	9/30/2000	548.20
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 548.20	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
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):	Occupation	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):	Occupation	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):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

548.20

TOTAL This Period (last page this line number only)

548.20

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/2000 - 09/30/2000)

PAGE 1 OF 2
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Solis for Congress C00346296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Adrianna Debior 1531 Purdue Avenue Los Angeles, CA 90025	Fundraising Fee	04/07/2000	2,250.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	06/08/2000	2,250.00
	Other (specify):	07/05/2000	2,750.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Nidia Bautista 1513 Hartview Ave. Valinda, CA 91744	Voter Registration Organizer	09/29/2000	1,200.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Andrew Cartwright 3430 Cabrillo Blvd. Los Angeles, CA 90066	Fundraising Fee	09/07/2000	1,250.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	08/08/2000	1,250.00
	Other (specify):	07/05/2000	1,250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Eastern Grove Publications, Inc. 2500 S Atlantic Blvd., Bldg. A Los Angeles, CA 90040	AG	09/26/2000	300.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Hilda Solis 555 Capitol Mall, Suite 1425 Sacramento, CA 95814	Airfare	08/08/2000	220.53
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
La Opinion 411 West Fifth St. Los Angeles, CA 90013	Ad	07/24/2000	245.07
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Lori LaFave 6252 Occoquan Forest Drive Manassas, VA 20112	Fundraising Fee	09/28/2000	1,500.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	08/24/2000	1,500.00
	Other (specify):	06/08/2000	1,500.00
		07/13/2000	1,500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Mercury Mailing System 8220 Santa Monica Blvd. West Hollywood, CA 90046	Postage	09/13/2000	1,767.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Elizabeth Keller Miller 2605 Whitcomb Pl. Thousand Oaks, CA 91320 5358	Fundraising Fee	09/07/2000	500.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General	08/08/2000	500.00
	Other (specify):		

SUBTOTAL of Disbursements This Page (optional)

21,672.70

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenses

Use separate schedule(s) for each category of the Detailed Summary Page (07/01/2000 - 05/31/2000)	PAISE	OF
	2	2
FOR LINE NUMBER		17

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NAME OF COMMITTEE (In Full)

Soia for Congress C00346296

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Pacific Bell Payment Center Van Nuys, CA 91348 0001	Telephone Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/17/2000	40.58
same as above	Telephone Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/11/2000 08/18/2000 07/06/2000	39.24 40.85 104.94
Pacific & Associates 8665 Wilshire Blvd., #220 Beverly Hills, CA 90211	Accounting Fee & Expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/11/2000 09/08/2000	1,026.19 2,078.53
Precision Printing & Design 14344 Kaswick Street Van Nuys, CA 91405	Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/14/2000	773.99
Regal Baltimore Hotel 506 So Grand Ave. Los Angeles, CA 90011-2607	P/R Event Costs Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/06/2000	2,000.00
The Stationery Place 1327 W. 12th Place Los Angeles, CA 90015	Printing Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/26/2000	966.84
U.S. Postmaster	Postage Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/13/2000 07/14/2000 07/05/2000	660.00 833.34 825.00
Westin Bonaventure Hotel 404 S. Figueroa St. Los Angeles, CA 90071	Lodging during D.N.C. Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/02/2000	1,138.00
Itemized operating expenses (less than \$200) This Period: 07/01/2000 - 09/30/2000	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		951.67

SUBTOTAL of Disbursements This Page (optional)	31,482.17
TOTAL This Period (last page this line number only)	33,154.87

SCHEDULE B

ITEMIZED DISBURSEMENTS

Other Disbursements

Use separate schedule(s)
for each category of the
Detailed Summary Page
(07/01/2000 - 08/09/2000)

PAGE 1 OF 1
FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full)

Solis For Congress C00346296


A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
CA League of Conservation Voters 10536 Culver Blvd. Culver City, CA 90232	Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/22/2000	1,500.00
B. Full Name, Mailing Address and ZIP Code California Women Vote 2000 805 - 15th St., NW, #400 Washington, DC 20005	Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/20/2000	2,500.00
C. Full Name, Mailing Address and ZIP Code California Young Democrats 106 Park Ave., #305 Long Beach, CA 90804	Nonfederal Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	08/08/2000	250.00
D. Full Name, Mailing Address and ZIP Code Clean Water Fund 23 Grant Ave., 3rd Fl. San Francisco, CA 94108	Contribution Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/15/2000	250.00
E. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 S. Capital St., S.E. Washington, DC 20003	Contribution from external campaign funds Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	09/13/2000	50,000.00
F. Full Name, Mailing Address and ZIP Code Margarita Mordez/Juan Ranco Endowed Fund University of Southern California Los Angeles, CA 90089-0411	Donation Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	07/24/2000	250.00
G. Full Name, Mailing Address and ZIP Code Itemized other disbursements (less than \$200) This Period: 07/01/2000 - 09/30/2000	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		50.00
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)	54,800.00
TOTAL This Period (last page this line number only)	54,800.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	10/16/2000 DATE PREPARED