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REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)

Friends of Lois Capps

ADDRESS (number and street) ☐ Check if different than previously reported.

PO Box 23940

CITY, STATE and ZIP CODE — STATE/DISTRICT

Santa Barbara, CA 93121 — CA-22

2. FEC IDENTIFICATION NUMBER
C00331389

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid-Year Report (Non-election Year Only)
☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
☒ 30-Day Post-Election Report following the General Election on Nov. 7, 2000 in the State of California
☐ 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 10/19/00 through 11/27/00		
6.	Net Contributions (other than loans)		
(a)	Total Contributions (other than loans) (from Line 11(a))	$128818.82	$1093131.66
(b)	Total Contribution Refunds (from Line 20(d))	0	$3325.00
(c)	Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	$128818.82	$1089806.66
7.	Net Operating Expenditures		
(a)	Total Operating Expenditures (from Line 17)	$473796.68	$1300524.75
(b)	Total Offsets to Operating Expenditures (from Line 14)	$400	$2912.88
(c)	Net Operating Expenditures (subtract Line 7(b) from 7(a))	$473396.68	$1297611.87
8.	Cash on Hand at Close of Reporting Period (from Line 27)	$302382.89	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

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: David Powdrell

Signature of Treasurer: David Powdrell — Date: 12/1/00

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

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

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

Name of Committee (In full): Friends of Lois Capps C00331389

Report Covering the Period: From: 10/19/00 To: 11/27/00

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	$57982.00		11(a)(i)
(ii) Unitemized	$20688.75		11(a)(ii)
(iii) Total of contributions from individuals	$78670.75	$680845.45	11(a)(iii)
(b) Political Party Committees	$0.00	$238.14	11(b)
(c) Other Political Committees (such as PACs)	$50148.07	$412048.077	11(c)
(d) The Candidate	$0.00	0	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	$128818.82	$1093131.66	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	$0.00	0	12
13. LOANS:			
(a) Made or Guaranteed by the Candidate	$0.00	0	13(a)
(b) All Other Loans	$0.00	0	13(b)
(c) TOTAL LOANS (add 13(a) and (b))	$0.00	0	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	$400.00	$2912.88	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	$284.76	$8495.24	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	$129503.58	$1104449.78	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	$473796.68	$1300526.75	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	$0.00	0	18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	$0.00	0	19(a)
(b) Of All Other Loans	$0.00	0	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	$0.00	0	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	$0.00	$2325.00	20(a)
(b) Political Party Committees	$0.00	0	20(b)
(c) Other Political Committees (such as PACs)	$0.00	$1000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	$0.00	$3325.00	20(d)
21. OTHER DISBURSEMENTS	$11700.00	$38650.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	$485496.68	$1342499.75	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 658375.99	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 129503.58	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 787879.51	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 485496.68	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 302382.89	27

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code Stephen Penner, Esq. 1215 De La Vina St. Suite K Santa Barbara, CA 93101 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Attorney Occupation Attorney Aggregate Year-to-Date > $ 400.	Date (month, day, year) 10/21/00	Amount of Each Receipt this Period $50.
B. Full Name, Mailing Address and ZIP Code Allegra Lewis 3044 Samarkand Drive Santa Barbara, CA 93103 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer self Occupation Writer Aggregate Year-to-Date > $ 750.	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period $250.
C. Full Name, Mailing Address and ZIP Code Daniel F. Martensen 200 Thames Parkway Park Ridge, IL 600683649 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Ev. Lutheran Church Occupation Clergy Aggregate Year-to-Date > $ 200.	Date (month, day, year) 10/31/00	Amount of Each Receipt this Period $100.
D. Full Name, Mailing Address and ZIP Code Bernard Friedman 2873 South Bradley Road Santa Maria, CA 93455 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > $ 200.	Date (month, day, year) 10/31/00	Amount of Each Receipt this Period $50.
E. Full Name, Mailing Address and ZIP Code David Geffen 10 Universal City Plaza, 27th Universal City, CA 91608 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Dream Works SKG Occupation President Aggregate Year-to-Date > $ 1000.	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period $1000.
F. Full Name, Mailing Address and ZIP Code Steven L. Saldo, Esquire 1042 Palm Street, Suite 203 San Luis Obispo, CA 93401 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Law Offices of Steve Occupation Attorney Aggregate Year-to-Date > $ 1250.	Date (month, day, year) 10/27/00	Amount of Each Receipt this Period $1000.
G. Full Name, Mailing Address and ZIP Code James Arnold 2425 Ellentown Road La Jolla, CA 92037 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer UCSD Occupation Professor Aggregate Year-to-Date > $ 1500.	Date (month, day, year) 11/4/00	Amount of Each Receipt this Period $1000.
SUBTOTAL of Receipts This Page (optional)			$3450.
TOTAL This Period (last page this line number only)			

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 27

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Toni Harlan Rosenwald 1736 Olive Avenue Santa Barbara, CA 93101	Planned Parenthood	11/4/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Nurse Practitioner Aggregate Year-to-Date > $ 500.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jonathan Sheinberg 10866 Wilshire Blvd 10th Floo Tanner, Mainstain, Hoffer Peyrot Los Angeles. CA 90024	The Bubble Factory,	11/7/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Producer Aggregate Year-to-Date > $ 1000.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bonnie Raitt PO Box 46037 Los Angeles, CA 90046	Self	11/4/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Singer Aggregate Year-to-Date > $ 1000.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Bower 1599 Sinaloa Drive Santa Barbara, CA 93108	Self-employed	11/26/00	$500.
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Real Estate Aggregate Year-to-Date > $ 1500.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Katzenberg 11400 Olympic Blvd. #550 Los Angeles, CA 90064	Self	10/25/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Producer Aggregate Year-to-Date > $ 1000.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eunice C. Smith 14 La Cumbre Circle Santa Barbara, CA 93105	Retired	10/25/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired RN Aggregate Year-to-Date > $ 975.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas Schrock 1409 Grand Avenue Santa Barbara, CA 93103	UCSB	11/2/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Professor Aggregate Year-to-Date > $ 225.		

SUBTOTAL of Receipts This Page (optional)	$3650.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
C. Douglas Johnson 951 Cocopah Drive Santa Barbara, CA 93110	UCSB	10/21/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: professor emeritus Aggregate Year-to-Date > $ 350.		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Otis Wickenhaeuser 1403 Manitou Road Santa Barbara, CA 93105	Retired	10/24/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 400.		
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jim Edmund Smith P.O. Box 1446 San Luis Obispo, CA 93406	Smith, Helenius & Ha	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 500.		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Carlyn Christianson P.O. Box 3807 San Luis Obispo, CA 93403	Coastal Anesth.	10/29/00	$25.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Administrator Aggregate Year-to-Date > $ 300.		
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Dr. Bruce Whitcher 149 Serrano Dr. San Luis Obispo, CA 93405	Self-Employed	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Oral Surgeon Aggregate Year-to-Date > $ 500.		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Mrs. Budd B. Jones 2 Sandstone Ct. San Rafael, CA 94903	Self	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Registered Nurse Aggregate Year-to-Date > $ 250.		
G. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Carole S. Marks 305 Vista de La Cumbre Santa Barbara, CA 93105	retired	10/25/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 200.		

SUBTOTAL of Receipts This Page (optional) ..... $1475.

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code Frank Sanitate 1152 Camino Manadero Street Santa Barbara, CA 93111	Name of Employer Self	Date (month, day, year) 10/27/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Management Trainer	Aggregate Year-to-Date > $ 250.	
B. Full Name, Mailing Address and ZIP Code Deborah Cox 1036 Sandpiper Lane Santa Barbara, CA 93110	Name of Employer self	Date (month, day, year) 11/2/00	Amount of Each Receipt this Period $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Physician	Aggregate Year-to-Date > $ 225.	
C. Full Name, Mailing Address and ZIP Code Thomas Morlan 4555 El Camino Real, Ste. H Atascadero, CA 93422	Name of Employer Self	Date (month, day, year) 10/27/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Attorney	Aggregate Year-to-Date > $ 250.	
D. Full Name, Mailing Address and ZIP Code Denis Adler 46 Barranca Avenue, No. 2 Santa Barbara, CA 93109	Name of Employer Retired	Date (month, day, year) 10/31/00	Amount of Each Receipt this Period $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired doctor	Aggregate Year-to-Date > $ 300.	
E. Full Name, Mailing Address and ZIP Code Alice Hutchins 900 Calle De Los Amigos No. W Santa Barbara, CA 93105	Name of Employer Self-employed	Date (month, day, year) 10/21/00	Amount of Each Receipt this Period $500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Artist	Aggregate Year-to-Date > $ 1200.	
F. Full Name, Mailing Address and ZIP Code Mary Aileen Newman 1050 Las Alturas Road Santa Barbara, CA 93103	Name of Employer Retired	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period $500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date > $ 550.	
G. Full Name, Mailing Address and ZIP Code Helen L. Pedotti 1915 Laguna Street Santa Barbara, CA 93101	Name of Employer Retired	Date (month, day, year) 11/4/00	Amount of Each Receipt this Period $500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date > $ 1000.	

SUBTOTAL of Receipts This Page (optional) ..... $2200.

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 27
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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth M. Holland 24 Peacock Court San Rafael, CA 94901	Conrad Motors Inc.	11/4/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: President	Aggregate Year-to-Date: $ 300.	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chris Casciola 1119 Palm Street San Luis Obispo, CA 93401	Stein & Casciola	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date: $ 250.	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Singer 122 Powers Avenue Santa Barbara, CA 93103	Self-employed	10/24/00	$200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Designer	Aggregate Year-to-Date: $ 200.	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Buttery 323 Indio Dr. Pismo Beach, CA 93449	Self	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date: $ 750.	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sondra Myers 2555 Pennsylvania Ave NW #710 Washington, DC 20037	Self-employed	10/27/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Consultant	Aggregate Year-to-Date: $ 550.	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurie Peare Zimmer 2590 Dorking Place Santa Barbara, CA 93105	UCSB	11/6/00	$400.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Professor	Aggregate Year-to-Date: $ 400.	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stephen Weiss 1 William St. New York, NY 10004	Self	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Businessman	Aggregate Year-to-Date: $ 500.	

SUBTOTAL of Receipts This Page (optional)	$1800.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Hill 486 Cambridge Court Santa Maria, CA 93455	Santa Maria H.S. Dis	11/4/00	$50.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: School nurse/Administrator Aggregate Year-to-Date > $ 200.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Milton Roisman 900 Calle de los Amigos Apt.N Santa Barbara, CA 93105	Tomkins Ind. Inc.	10/23/00	$50.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert D. Dengler P.O. Box 391 Morro Bay, CA 93443-0391	CA Dept. of Transpor	10/25/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Highway engineer Aggregate Year-to-Date > $ 275.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maria Hutkin 150 Vista Del Mar Pismo Beach, CA 93449	Self	10/27/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 250.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sharon Monsky 2401 Garden Street Santa Barbara, CA 93105	Schleroderma Foundat	11/4/00	$660.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Executive Director Aggregate Year-to-Date > $ 660.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jesse Alexander 665 Sand Point Road Carpinteria, CA 93013	Self-employed	10/27/00	$150.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Photographer Aggregate Year-to-Date > $ 500.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leann Zunich 3622 Rose Ave. Long Beach, CA 90807		10/23/00	$50.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 200.		

SUBTOTAL of Receipts This Page (optional)	$1310.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ira Distenfield 1501 State St. Santa Barbara, CA 93101-2556	Self-employed	11/2/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Legal Advisor	Aggregate Year-to-Date: $ 1000.	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Constance Duprey 4312 Lealand Lane Nashville, TN 37204	retired	10/27/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired	Aggregate Year-to-Date: $ 300.	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Ashbaugh 193 Los Cerros Drive San Luis Obispo, CA 93401	Self Employed	10/27/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date: $ 350.	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ellen M. Allred 3780 Pescadero Drive Santa Barbara, CA 93105	Santa Barbara City S	10/24/00	$20.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired teacher	Aggregate Year-to-Date: $ 260.	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beverly Gingg 880 Skyline Drive San Luis Obispo, CA 93405	Self-employed	10/19/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Investor/community proj. coord.	Aggregate Year-to-Date: $ 650.	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Garin Sinclair 221 E. Branch Street Arroyo Grande, CA 93420	self	10/27/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date: $ 1000.	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phyllis Koteen 300 Hot Springs Road No. 115E Santa Barbara, CA 93108	Retired	10/23/00	$200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired	Aggregate Year-to-Date: $ 200.	

SUBTOTAL of Receipts This Page (optional)	$2920.
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dianne L. Draze 1674 La Vineda Street San Luis Obispo, CA 93401	SLO county/Dandy Lio	10/29/00	$15.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Planner/Owner-Editor Aggregate Year-to-Date > $ 215.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeanne Kubes 129 San Nicholas Street Santa Barbara, CA 93109		10/24/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 200.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Lowenthal 1703 Paterna Road Santa Barbara, CA 93103	self	10/24/00	$25.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: interior designer Aggregate Year-to-Date > $ 845.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise Lamothe 4015 Corta Road Santa Barbara, CA 93110	Self	11/7/00	$200.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Mediator/arbitrator Aggregate Year-to-Date > $ 450.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Andrew Bermant 810 Coyote Rd. Santa Barbara, CA 93108-1017	Bermant Development C	11/6/00	$500.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: partner Aggregate Year-to-Date > $ 750.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Linda Distenfield 1501 State Street Santa Barbara, CA 93101	Self-employed	11/2/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Legal advisor Aggregate Year-to-Date > $ 1000.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ginny Browne 1339 Marsh St. San Luis Obispo, CA 93401	Self	10/27/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 250.		

SUBTOTAL of Receipts This Page (optional)	$2090.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Flum 400 E Pedregosa, H Santa Barbara, CA 93103	Self-employed	11/4/00	$500.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Consultant	Aggregate Year-to-Date > $ 599.	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Bellah 10 Mosswood Road Berkeley, CA 947041820	UC Berkley	10/25/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Professor	Aggregate Year-to-Date > $ 400.	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Johnson 86 Woodhill Rd. St. Cloud, MN 56301	Retired	10/27/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired	Aggregate Year-to-Date > $ 550.	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Root 1307 Mill Street San Luis Obispo, CA 93401	Retired	10/21/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired	Aggregate Year-to-Date > $ 500.	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Florence Michaelsen 4513 Carrage Hill Drive Santa Barbara, CA 93110	UCSB	10/24/00	$200.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Asst. Professor	Aggregate Year-to-Date > $ 500.	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Miller 30 Usonia Road Pleasantville, NY 10570	Self	10/31/00	$200.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: CRNA	Aggregate Year-to-Date > $ 200.	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Barrett 128 W. Arrellaga Street Apt. Santa Barbara, CA 93101	Retired	10/23/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired	Aggregate Year-to-Date > $ 200.	

SUBTOTAL of Receipts This Page (optional) ..... $1450.

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Lunsford 6140 La Goleta Rd. Goleta, CA 93117	State of California	11/6/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: State Park Ranger Aggregate Year-to-Date > $ 200.		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank Gibney 1901 East Las Tunas Road Santa Barbara, CA 93103	Romona College	10/24/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Professor Aggregate Year-to-Date > $ 450.		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas Federman 992 Monterey St., Ste. D San Luis Obispo, CA 93401	Ward & Federman	10/31/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 500.		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beryl Kreisel 811 Hot Springs Rd. Santa Barbara, CA 93108	Housewife	10/27/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Housewife Aggregate Year-to-Date > $ 500.		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jean M. Reiche 843 Via Campobello Street Santa Barbara, CA 93111	Retired	10/25/00	$200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 550.		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Myrna Gaskin 260 Rametto Road Santa Barbara, CA 93108	SB Co. Health Dept.	10/27/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Public Health Manager Aggregate Year-to-Date > $ 200.		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Crandall 6735 Avila Valley Drive San Luis Obispo, CA 93405	Self	10/23/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 250.		

SUBTOTAL of Receipts This Page (optional) ..... $1750.

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Effie Westervelt 26 Southridge East Tiburon, Ca 94920	Retired	10/23/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250.		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Dora Anne Little 370 El Cielito Rd. Santa Barbara, CA 93105	Self-employed	10/21/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Investor Aggregate Year-to-Date > $ 750.		
C. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Lucille Gilbert Skinner 333 Old Mill Road, No. 263 Santa Barbara, CA 93110-3599		10/21/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 200.		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Madeline Mixer 76 Bonnie Ln. Berkeley, CA 94708	Retired	10/23/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250.		
E. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Alfred Mann 18000 Devonshire St. Northridge, CA 91325-1219	MiniMed Technologies	11/2/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: CEO Aggregate Year-to-Date > $ 1000.		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Peter N. Brown 5371 Agana Drive Santa Barbara, CA 93111	Hatch & Parent	10/25/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 250.		
G. Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Judy D. Saltzman-Saveker 1459 Seventh Street Los Osos, CA 93402	Cal Poly	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Professor Aggregate Year-to-Date > $ 570.		

SUBTOTAL of Receipts This Page (optional) ..... $2350.

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code Alta J. Johnson 3350 Edgewood Drive San Luis Obispo, CA 93401	Name of Employer Retired	Occupation Retired	Date (month, day, year) 11/6/00	Amount of Each Receipt this Period $50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 450.			
B. Full Name, Mailing Address and ZIP Code Phillip Newell 1229 Higuera San Luis Obispo, CA 93401	Name of Employer Self-employed	Occupation Attorney	Date (month, day, year) 10/21/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 250.			
C. Full Name, Mailing Address and ZIP Code Betty Hatch 4352 Via Esperanza Street Santa Barbara, CA 93110	Name of Employer La Belle	Occupation executive director	Date (month, day, year) 11/2/00	Amount of Each Receipt this Period $450.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1500.			
D. Full Name, Mailing Address and ZIP Code Christopher J. Duenow P. O. Box 12410 San Luis Obispo, CA 93406	Name of Employer self	Occupation Attorney	Date (month, day, year) 10/31/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 250.			
E. Full Name, Mailing Address and ZIP Code Susan Sheinberg 10866 Wilshire Blvd 10th Floo Tanner, Mainstain, Hoffer Peyrot Los Angeles, CA 90024	Name of Employer Self	Occupation Actress/mother	Date (month, day, year) 11/7/00	Amount of Each Receipt this Period $1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1000.			
F. Full Name, Mailing Address and ZIP Code Harold Janssen 2960 Torito Rd Montecito, CA 93108-1632	Name of Employer Retired	Occupation Retired	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period $200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 375.			
G. Full Name, Mailing Address and ZIP Code Judge William Thomson 970 Hillcrest Drive Cambria, CA 93428	Name of Employer State of CA	Occupation Retired Judge	Date (month, day, year) 10/29/00	Amount of Each Receipt this Period $25.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 575.			

SUBTOTAL of Receipts This Page (optional) ..... $2225.

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code Frederick Eissler 4623 More Mesa Drive Santa Barbara, CA 93110	Name of Employer Retired	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period $200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date > $ 200.	
B. Full Name, Mailing Address and ZIP Code Mark Juergensmeyer 6637 Del Playa Drive Goleta, CA 93117	Name of Employer UCSB	Date (month, day, year) 10/24/00	Amount of Each Receipt this Period $200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Professor	Aggregate Year-to-Date > $ 200.	
C. Full Name, Mailing Address and ZIP Code Tamara Asseyev 464 Hot Springs Road Santa Barbara, CA 93108	Name of Employer Self	Date (month, day, year) 11/4/00	Amount of Each Receipt this Period $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Film Producer	Aggregate Year-to-Date > $ 200.	
D. Full Name, Mailing Address and ZIP Code Peter Claydon 216 Arboleda Rd. Santa Barbara, CA 93110	Name of Employer self	Date (month, day, year) 11/4/00	Amount of Each Receipt this Period $50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation psychologist	Aggregate Year-to-Date > $ 320.	
E. Full Name, Mailing Address and ZIP Code Barry Siegel 180 Hermosillo Road Santa Barbara, CA 931082415	Name of Employer Retired	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date > $ 250.	
F. Full Name, Mailing Address and ZIP Code Esther Leah Ritz 626 E. Kilbourn Ave. Apt 2301 Milwakee, WI 53202	Name of Employer Retired	Date (month, day, year) 11/4/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date > $ 600.	
G. Full Name, Mailing Address and ZIP Code Kristina Klehl 2275 Summit Drive Hillsborough, CA 94010	Name of Employer Self-employed	Date (month, day, year) 11/4/00	Amount of Each Receipt this Period $500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Philanthropist	Aggregate Year-to-Date > $ 500.	

SUBTOTAL of Receipts This Page (optional) ..... $1550.

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

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol Ray PO Box 5850 Evergreen Farm West Stateline, NV 89449	retired	11/4/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 350.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeanette Duncan 256 Puffin Way Templeton, CA 93465	People's Self Help Housing	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Housing Director Aggregate Year-to-Date > $ 500.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nurith Adizes 1807 Fernald Point Lane Santa Barbara, CA 93108	Self-employed	11/4/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Business woman Aggregate Year-to-Date > $ 750.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Christopher James Cameron 1482 East Valley Road, Suite Santa Barbara, CA 93108	Self	10/21/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Event Planning Aggregate Year-to-Date > $ 250.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kristin Linehan 4282 Rancho Asoleado Santa Barbara, CA 93110	Mother	11/4/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Mother Aggregate Year-to-Date > $ 1000.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene Montgomery 3101 Boardwalk Apt. 1012-1 Ocean Club Atlantic City, NJ 08401	retired	10/27/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 400.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Zimmerman 482 Camino Talavera Street Goleta, CA 93117	Self	10/21/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Architect Aggregate Year-to-Date > $ 250.		

SUBTOTAL of Receipts This Page (optional)	$2350.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eli Luria PO Box 3417 Santa Barbara, CA 93130	Luria Development Co	10/25/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Owner	Aggregate Year-to-Date > $	700.
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William R. Prindle 1556 Crestline Drive Santa Barbara, CA 93105	Self-employed	10/23/00	$50.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Research director	Aggregate Year-to-Date > $	250.
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patrick Perry 1339 Marsh Street San Luis Obispo, CA 93401	Self	10/27/00	$500.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > $	500.
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sam Armstrong 5 Los Palos Drive San Luis Obispo, CA 93401	Retired	10/29/00	$25.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired	Aggregate Year-to-Date > $	225.
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patricia Mitchell 1784 Ocean Oaks Rd. Carpinteria, CA 93013-3025	Self-employed	10/21/00	$500.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: social worker	Aggregate Year-to-Date > $	750.
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel Fithian 316 East Los Olivos Street Santa Barbara, CA 93105	Self-employed	10/23/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Investor	Aggregate Year-to-Date > $	500.
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Laws 1714 Derrynane Drive Manchester, MO 63021-7115	BJC Healthcare	11/2/00	$200.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: CRNA	Aggregate Year-to-Date > $	200.

SUBTOTAL of Receipts This Page (optional) ..... $1625.

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 18 OF 27
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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code Alan Sieroty 6022 Wilshire Boulevard No. 2 Los Angeles, CA 90036	Name of Employer Sieroty Co., Inc. Occupation Real Estate Management Aggregate Year-to-Date > $ 250.	Date (month, day, year) 11/4/00	Amount of Each Receipt this Period $250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
B. Full Name, Mailing Address and ZIP Code Chauncey S. Goodrich 4445 Shadow Hills Blvd S Santa Barbara, CA 93105	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > $ 200.	Date (month, day, year) 10/24/00	Amount of Each Receipt this Period $50.
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
C. Full Name, Mailing Address and ZIP Code Orson Mozes 1115 Clover Lane Santa Barbara, CA 93108	Name of Employer Self-employed Occupation Businessman Aggregate Year-to-Date > $ 500.	Date (month, day, year) 11/26/00	Amount of Each Receipt this Period $500.
Receipt For: [X] Primary [ ] General [ ] Other (specify):			
D. Full Name, Mailing Address and ZIP Code Roger Wood 5323 Paseo Rio Street Santa Barbara, CA 93111	Name of Employer UCSB Occupation Professor Emeritus Aggregate Year-to-Date > $ 200.	Date (month, day, year) 11/6/00	Amount of Each Receipt this Period $100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
E. Full Name, Mailing Address and ZIP Code Warren A. Sinsheimer 1745 Tiburon Way San Luis Obispo, CA 93401	Name of Employer Sinsheimer, Schiebel Occupation Attorney Aggregate Year-to-Date > $ 1600.	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period $500.
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
F. Full Name, Mailing Address and ZIP Code Betty K. Schetzer 225 Almond Street San Luis Obispo, CA 93405	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > $ 300.	Date (month, day, year) 10/23/00	Amount of Each Receipt this Period $250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):			
G. Full Name, Mailing Address and ZIP Code Sally Hamilton 820 Coronel Street Santa Barbara, CA 93109	Name of Employer Self Occupation Mother Aggregate Year-to-Date > $ 1000.	Date (month, day, year) 11/6/00	Amount of Each Receipt this Period $1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):			

SUBTOTAL of Receipts This Page (optional) ..... $2650.

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Adler 1401 East Pepper Lane Santa Barbara, CA 93108		11/2/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: info requested Aggregate Year-to-Date: $ 200.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Vohryzek 2934 Boathouse Ave. Davis, CA 95616	CA Statewide CDC	11/4/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Executive Director Aggregate Year-to-Date: $ 250.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Art Burke 5383 Hollister Ave., Ste. 150 Santa Barbara, CA 93111	Patterson Associates	11/4/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Business owner Aggregate Year-to-Date: $ 2000.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank K. Kelly 34 East Padre Street Santa Barbara, CA 93105	Self-employed	10/24/00	$50.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: writer Aggregate Year-to-Date: $ 300.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Edwards 1020 Bath Street Santa Barbara, CA 93101	Vetronix Corp.	10/27/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Programmer Aggregate Year-to-Date: $ 250.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gordon West 6506 Flores Road Atascadero, CA 93422	Atascadero School Di	10/27/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Custodian Aggregate Year-to-Date: $ 400.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shirley Miller 1465 Edgecliff Lane Santa Barbara, CA 93108	Homemaker	10/23/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 1000.		

SUBTOTAL of Receipts This Page (optional) ..... $2900.

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dorothy M. Leutz 366 Chaplin Lane San Luis Obispo, CA 93405	Retired	10/29/00	$30.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date: $ 230.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alex Madonik 1533 Keoncrest Drive Berkeley, CA 94702	Applied Biosystems	10/31/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Scientist Aggregate Year-to-Date: $ 400.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara L. Partridge P.O. Box 1893 Paso Robles, CA 93447	City of Paso Robles	10/21/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Head of Recreation Department Aggregate Year-to-Date: $ 250.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Ruffo PO Box 458 Medina, NY 14103	info requested	11/6/00	$200.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: info requested Aggregate Year-to-Date: $ 200.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Horton 222 Chaplin Lane San Luis Obispo, CA 93405	Cal Poly	10/27/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Professor Aggregate Year-to-Date: $ 725.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James R. Murphy 221 E. Branch Street Arroyo Grande, CA 93420	Self-employed	10/27/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: attorney Aggregate Year-to-Date: $ 1000.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeff Dozier 905 Via Fruteria Santa Barbara, CA 93110	UCSB	10/23/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Professor Aggregate Year-to-Date: $ 1000.		

SUBTOTAL of Receipts This Page (optional)	$2680.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
G. Nelson Stringer 1304 Cavalier Lane San Luis Obispo, CA 93405	United Methodist Chu	10/23/00	$200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Minister Aggregate Year-to-Date > $ 200.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Peter Rodgers Melnick 116 Miramar Avenue Santa Barbara, CA 93108	Self-employed	10/21/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Composer Aggregate Year-to-Date > $ 350.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jacquelyn C. Wheeler 3303 Barranca Court San Luis Obispo, CA 93401	Self-employed	10/27/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Counselor Aggregate Year-to-Date > $ 800.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise Arnold 2425 Ellentown Road La Jolla, CA 92037	Homemaker	10/25/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > $ 1000.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Rose 415 Donze Avenue Santa Barbara, CA 93101	Self-employed	10/23/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Consultant Aggregate Year-to-Date > $ 200.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neil Tardiff PO Box 1446 San Luis Obispo, CA 93406	Smith, Tardiff & Hay	10/27/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 500.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rev. John G. Simmons 500 University Avenue Burbank, CA 91504-3921	Retired	10/23/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Clergy-Pastor Aggregate Year-to-Date > $ 300.		

SUBTOTAL of Receipts This Page (optional)	$2600.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ellen Anderson 111 Skyline Circle Santa Barbara, CA 93109	Self	10/21/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Playwright Aggregate Year-to-Date > $ 250.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Kimo Campbell P. O. Box 127 Kentfield, CA 94914	Self-employed	11/4/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Philanthropist Aggregate Year-to-Date > $ 500.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Wallner 325 West End Ave., Apt. 3A New York, NY 10023-8137	Self	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Businessman Aggregate Year-to-Date > $ 500.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Esther R. Yunck 3150 Montecielo Street Santa Ynez, CA 93460	Retired	10/21/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 200.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hope Smith 5243 University Drive Santa Barbara, CA 93111	Retired	10/27/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 200.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeannette Nelson 2017 APS Santa Barbara, CA 93103	Retired	10/23/00	$200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 200.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Clifford B. Holser 672 Serrano Drive, #13 San Luis Obispo, CA 93405	Retired	10/23/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 500.		

SUBTOTAL of Receipts This Page (optional)	$1850.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 21 OF 27
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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. Ruth Lynn Craig 5 Bell Waver Way Oakland, CA 94619	Self-employed	10/27/00 11/4/00	$100. $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Physician/consultant Aggregate Year-to-Date > $ 450.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James R. Baird 20 La Casita Lane Walnut Creek, CA 94595	Bay Area Development	11/4/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: CEO Aggregate Year-to-Date > $ 1000.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elspeth G. Bobbs 630 East Alameda Santa Fe, NM 87501	Self-Employed	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Prpoerty manager Aggregate Year-to-Date > $ 250.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Layne 14800 Rinaldi St. Mission Hills, CA 91345-1230	NOVA Development Co.	11/7/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Owner Aggregate Year-to-Date > $ 450.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James Duenow P. O. Box 12410 San Luis Obispo, CA 93406	Self-employed	10/31/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 250.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn Ezzes 811 Hot Springs Rd. Santa Barbara, CA 93108		11/2/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 250.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allen Minker 2730 Pecho Valley Rd. Los Osos, CA 93402-4108		10/29/00	$15.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: info requested Aggregate Year-to-Date > $ 265.		

SUBTOTAL of Receipts This Page (optional)	$2065.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carolee Krieger 808 Romero Canyon Road Santa Barbara, CA 93108	Nuclear Age Peace Foundation	10/23/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney/President Aggregate Year-to-Date > $ 205.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dale Francisco 4337 Renaissance Drive #316 San Jose, CA 95134	Cisco Systems	11/6/00	$300.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Manager, Software Development Aggregate Year-to-Date > $ 300.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James F. Kane 1229 E. De La Guerra St. Santa Barbara, CA 93103		10/24/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 400.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeffrey Stulberg 1042 Palm St Ste 204 San Luis Obispo, CA 93401	self	10/31/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: attorney Aggregate Year-to-Date > $ 250.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph C. Gallas P.O. Box 1357 Santa Maria, CA 93454	Self-employed	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 250.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dr. James McNamara 1669 Las Canoas Road Santa Barbara, CA 93105	Sansum Medical Clinic	10/24/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Physician Aggregate Year-to-Date > $ 200.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jean White 413 Arbutus Avenue Morro Bay, CA 93442	Retired	10/24/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250.		

SUBTOTAL of Receipts This Page (optional)	$1150.
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code Marianne D. Lakatos 409 9th St. Santa Monica, CA 90402	Name of Employer Retired	Occupation Retired.	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period $50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	300.	
B. Full Name, Mailing Address and ZIP Code June Henderson 4039 Constellation Rd. Lompoc, CA 93436	Name of Employer retired	Occupation retired	Date (month, day, year) 10/21/00 10/27/00 11/2/00	Amount of Each Receipt this Period $50. $15. $25.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	240.	
C. Full Name, Mailing Address and ZIP Code Jeffrey Stein 1119 Palm Street San Luis Obispo, CA 93401	Name of Employer Self	Occupation Attorney	Date (month, day, year) 10/27/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	250.	
D. Full Name, Mailing Address and ZIP Code Ben F. Conway 255 Penny Ln. Santa Barbara, CA 93108	Name of Employer Retired	Occupation Retired	Date (month, day, year) 10/27/00	Amount of Each Receipt this Period $250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	700.	
E. Full Name, Mailing Address and ZIP Code Margaret A. Connell 7114 Del Norte Drive Goleta, CA 93117	Name of Employer Retired	Occupation Retired	Date (month, day, year) 10/24/00	Amount of Each Receipt this Period $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	369.	
F. Full Name, Mailing Address and ZIP Code Thomas Downey 1225 I Street NW Ste 350 Washington, DC 20005	Name of Employer Downey McGrath Group	Occupation Chairman	Date (month, day, year) 10/27/00	Amount of Each Receipt this Period $500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	500.	
G. Full Name, Mailing Address and ZIP Code T.S. Wiley 1620 Eucalyptus Hill Road Santa Barbara, CA 93103	Name of Employer self	Occupation writer	Date (month, day, year) 10/31/00	Amount of Each Receipt this Period $1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	1000.	

SUBTOTAL of Receipts This Page (optional) ..... $2240.

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

SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise Dickinson 1 Park Avenue Dallas, PA 18612	Retired	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ruth Roes 970 Veronica Springs Rd Santa Barbara, CA 93105	Retired	10/21/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 200.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patricia Gomez 1711 Southwood Drive San Luis Obispo, CA 93401	Self-employed	10/19/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney Aggregate Year-to-Date > $ 272.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bradley J. Hill 1577 el Camino Real Arroyo Grande, CA 93420	Self	10/27/00	$200.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Lawyer Aggregate Year-to-Date > $ 250.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Theresa Weiseglass 4420 Meadowlark Lane Santa Barbara, CA 93105	SB School District	10/25/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Healthy Start Coordinator Aggregate Year-to-Date > $ 250.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chauncy Peterson 630 East Orange Street Santa Maria, CA 93454	Retired	10/21/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 250.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Roger F. Kennedy 7 Vista Sabana Rancho Santa Margarita, CA 92688	Retired	10/23/00	$50.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $ 350.		

SUBTOTAL of Receipts This Page (optional) ..... $1000.

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

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Shapiro 17022 Hartsoote St. Encino, CA 91316	Uptown Drug	11/4/00	$492.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Pharmicist Aggregate Year-to-Date: $ 1000.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Beverly Sanders 518 Las Fuentes Drive Santa Barbara, CA 93108	Homemaker	10/27/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Homemaker Aggregate Year-to-Date: $ 250.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ira Alpert 860 Skyline Drive San Luis Obispo, CA 93405	Wilshire Foundation	11/6/00	$750.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Health Care Executive Aggregate Year-to-Date: $ 850.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Brown 1411 Marsh St., Ste. 108 San Luis Obispo, CA 93401	Self-employed	11/4/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Attorney Aggregate Year-to-Date: $ 750.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Maurice J. Duca P. O. Box 5609 Santa Barbara, CA 93150	Self-employed	10/21/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Businessman Aggregate Year-to-Date: $ 1000.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Edmondson 536 Woodgreen Way Nipomo, CA 93444-9234	retired	10/21/00	$100.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: retired Aggregate Year-to-Date: $ 350.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Melissa Schulman 9020 Lupine Den Drive Vienna, VA 22182	Bergner Bockorny, In	10/27/00	$250.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Vice President Aggregate Year-to-Date: $ 250.		

SUBTOTAL of Receipts This Page (optional)	$2942.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred Jamner 325 San Ysidro Road Santa Barbara, CA 93108		11/6/00	$100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: retired Aggregate Year-to-Date > $ 300.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Georgia Noble 3511 Sea Ledge Ln. Santa Barbara, CA 93109	Self-Employed	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Psychotherapist Aggregate Year-to-Date > $ 350.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carol A. Leif 1462 Rising Glen Road Los Angeles, CA 90069	Self-employed	10/27/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Comic/Writer Aggregate Year-to-Date > $ 500.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lynda Levine-Schwartz 25264 ElDorado Meadow Hidden Hills, CA 91302		10/27/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Housewife Aggregate Year-to-Date > $ 500.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Patricia S. Foley 3463 State Street #446 Santa Barbara, CA 93105		10/27/00 10/24/00	$500. $500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Homemaker Aggregate Year-to-Date > $ 1000.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Y. Devereaux 3709-B Mariana Way Santa Barbara, CA 93105	Country Inn by the Sea	10/23/00 11/6/00	$60. $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Manager Aggregate Year-to-Date > $ 210.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Levy C/O William Levy Investments 120 El Paseo Street Santa Barbara, CA 93101	William Levy Investm	10/31/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: CEO Aggregate Year-to-Date > $ 1000.		

SUBTOTAL of Receipts This Page (optional)	$3510.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code William Nisbet 126 Garces Drive San Fransisco, CA 94132	Name of Employer Retired	Date (month, day, year) 10/25/00	Amount of Each Receipt this Period $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date $ 200.	
B. Full Name, Mailing Address and ZIP Code Robert W. Halstead 904 East Bell Street Lompoc, CA 93436	Name of Employer Retired	Date (month, day, year) 10/24/00	Amount of Each Receipt this Period $100.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Retired	Aggregate Year-to-Date $ 400.	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ 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: ☐ Primary ☐ 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: ☐ Primary ☐ 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: ☐ Primary ☐ 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: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date $	

SUBTOTAL of Receipts This Page (optional)	$200.
TOTAL This Period (last page this line number only)	$57982.

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ASCAP LEG FUND FOR THE ARTS 1 Lincoln Plaza New York, NY 10023	Occupation	11/6/00	$300.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 800.		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LITTON EMPLOYERS POLITICAL ASSISTANCE COMMITTEE 21240 BURBANK BLVD BEVERLY HILLS, CA 91367	Occupation	10/27/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1500.		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CONGRESSIONAL AGENDA 90'S 3220 N Street NW., #178 Washington, DC 20007	Occupation	11/26/00	$250.
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 250.		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
UNITED FOOD AND COMMERCIAL WORKERS PAC 1775 K Street, N.W. Washington D.C., 20006-1598	Occupation	10/27/00	$5000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 5000.		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CALIFORNIA P.A.C. 3415 S. Sepulveda Blvd. #640 Los Angeles, CA 90034	Occupation	11/4/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1000.		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN ACADEMY OF DERMATOLOGY PAC 1350 I Street, NW Ste. 880 Washington, DC 20005-3319	Occupation	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 500.		

G. Full Name, Mailing Address and ZIP Code	Name of Employer (MI-HIS)	Date (month, day, year)	Amount of Each Receipt this Period
KILPATRICK FOR UNITED STATES CONGRESS P.O. Box 44322 Detroit, MI 48244	Occupation	11/6/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1000.		

SUBTOTAL of Receipts This Page (optional)	$9050.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 7
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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PACIFIC LIFE INSURANCE CO. PAC 700 Newport Center Drive Newport Beach, CA 92660	Occupation	11/8/00	$1500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	2500.	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THE WEXLER GROUP PAC 1317 F Street, NW Ste. 600 Washington, DC 20004	Occupation	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	600.	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PACIFICARE PAC 3120 Lake Center PO Box 25186 Santa Ana, CA 92799	Occupation	11/6/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	1000.	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MOTOROLA CIVIC ACTION CAMPAIGN FUND 1350 I Street NW Ste. 400 Washington, DC 20005	Occupation	11/7/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	500.	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THE PAC OF THE DIRECTORS GUILD OF AMERICA, INC. 7920 Sunset Blvd. Los Angeles, CA 93346	Occupation	10/27/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	1000.	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STUPAK FOR CONGRESS (MI - 11) PO Box 143 Menominee, MI 498583146	Occupation	11/6/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	1000.	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RAYTHEON PAC 1100 Wilson Blvd., Suite 1500 Arlington, VA 22209-2297	Occupation	11/7/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	2000.	

SUBTOTAL of Receipts This Page (optional)	$6000.
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
REAL ESTATE INVESTMENT TRUST PAC 1875 I Street, NW Washington, DC 20006-5413	Occupation	10/27/00	$2500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	2500.	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN OPTOMETRIC ASSOCIATION PAC 1505 Prince St. Ste. 300 Alexandria, VA 22314	Occupation	11/26/00	$1500.
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	2500.	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CALIFORNIA COALITION OF NURSE PRACTITIONERS 19841 Flagstone Ln. Huntington Beach, CA 92646	Occupation	10/23/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	250.	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PG&E EMPLOYEES' FEDERAL PAC 77 Beale Street P.O. Box 770000 San Fransisco, CA 94177	Occupation	10/27/00 11/6/00	$500. $1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	2500.	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PETE STARK RE-ELECTION COMMITTEE (CA-HR) P.O. Box 121 Hayward, CA 94543	Occupation	10/27/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	2000.	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SOUTHERN CALIFORNIA FUND PAC 555 S. Flower St., Suite 4510 c/o David Gould Company Los Angeles, CA 90071	Occupation	11/7/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	1000.	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ATASCADERO DEMOCRATIC CLUB P.O. Box 1231 Atascadero, CA 93422	Occupation	10/27/00	$250.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	550.	

SUBTOTAL of Receipts This Page (optional)	$8000.
TOTAL This Period (last page this line number only)	

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SCHEDULE A — ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHIL HART DEMOCRATIC CLUB 31119 Rothbury Way Chesterfield, MI 48047	Occupation	11/7/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $	1000.	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
INTERNATIONAL UNION OF OPERATING ENGINEERS PAC 1125 17th Street, N.W. Washington, DC 20036	Occupation	10/21/00 11/6/00	$500. $3500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $	6000.	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ANHEUSER-BUSCH PAC 1776 I ST, NW #200 WASHINGTON, DC 20006	Occupation	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $	500.	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MAYPAC 611 Olive Street St. Louis, MO 63101	Occupation	11/6/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $	1500.	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NAT'L ASSC. OF SOCIAL WORKERS PAC 750 First Street, NE, Ste. 70 Washington, DC 20002-4241	Occupation	11/6/00	$1000.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $	2000.	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN BANKERS ASSOCIATION PAC 1120 Conneticut Avenue, NW Washington, DC 20036	Occupation	10/27/00	$2500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $	3500.	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HEWLETT-PACKARD CAOMPANY PAC 3000 Hanover Street Palo Alto, CA 94304	Occupation	11/6/00	$500.
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date $	500.	

SUBTOTAL of Receipts This Page (optional)	$10500.
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 7
	FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EVERGREEN FUND PAC 607 Fourteenth Street, NW Washington, DC 20005	Occupation	10/27/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date	$ 1000.	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FED PAC-FEDERATION OF AMERICAN HEALTH SYSTEMS 801 Pennsylvania NW Ste. 245 Washington, DC 20004	Occupation	11/6/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date	$ 1500.	

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CREDIT UNION LEGISLATIVE ACTION COUNCIL 805 15th St. NW Ste 300 Washington, DC 200052207	Occupation	11/26/00	$500.
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date	$ 1000.	

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KAPTUR FOR CONGRESS (OH - 9) PO Box 899 Toledo, OH 43697	Occupation	11/6/00	$1000.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date	$ 1000.	

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PLANNED PARENTHOOD ACTION FUND INC. 810 Seventh Ave. New York, NY 10019	Occupation	11/6/00	$500.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date	$ 1500.	

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN ASSOCIATION OF NURSE ANETHESISTS CRNA PAC 222 South Prospect Avenue Park Ridge, IL 60068	Occupation	10/27/00	$3500.
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date	$ 3500.	

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
NATIONAL CABLE TELEVISION PAC 1724 Massachusetts Ave. NW Washington, DC 20036	Occupation	11/6/00	$3336.75
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date	$ 4336.75	

SUBTOTAL of Receipts This Page (optional)	$10837.
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 6 OF 7
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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C 00331389

A. Full Name, Mailing Address and ZIP Code TREASURY EMPLOYEES PAC 901 E. Street NW Suite 600 Washington, DC 20004 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 2000.	Date (month, day, year) 10/27/00	Amount of Each Receipt this Period $1000.
B. Full Name, Mailing Address and ZIP Code KPMG PARTNERS, PRINCIPALS & EMPLOYEES PAC PO Box 18254 Washington, DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 4000.	Date (month, day, year) 11/6/00	Amount of Each Receipt this Period $2000.
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)			$3000.
TOTAL This Period (last page this line number only)			

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SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code Sierra Club Political Committee 408 C Street, NE Washington, DC 20002 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ 6147.82	Date (month, day, year) 10/31/00 11/7/00	Amount of Each Receipt this Period $94.82 (InKind) $2003.00 (In-Kind)
B. Full Name, Mailing Address and ZIP Code National Cable Television Political 1724 Massachusetts, Ave., NW Washington, DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Action Committee Occupation Aggregate Year-to-Date > $ 5000.	Date (month, day, year) 10/31/00	Amount of Each Receipt this Period $663.25 In-Kind
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) .....

TOTAL This Period (last page this line number only) ..... $ 50148.07

FE5AN144

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 14

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NAME OF COMMITTEE (In Full)
FreFriends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code City of Santa Barbara Recreation Refund Account Box 1990 Santa Barbara, CA 93102 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 11/6/00	Amount of Each Receipt this Period $100.00 (Refund)
B. Full Name, Mailing Address and ZIP Code San Luis Obispo County Historical Society Box 1391 San Luis Obispo, CA 93406 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 11/10/00	Amount of Each Receipt this Period $300.00 (refund)
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)	
TOTAL This Period (last page this line number only)	400.00

FE6AN144

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 16

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NAME OF COMMITTEE (in Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code

Santa Barbara Bank & Trust
20 E. Carrillo
Santa Barbara, Ca 93101

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > $

Date (month, day, year): 10/31/00

Amount of Each Receipt this Period: $284.76 (interest income)

B. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General ☐ Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > $

Date (month, day, year)

Amount of Each Receipt this Period

C. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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) .....

TOTAL This Period (last page this line number only) 284.76

FE6AN144

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 19

FOR LINE NUMBER 27

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Verizon Box 300001 Inglewood, CA 90313	Phone Service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 11/14/00	$2372.32 $2700.39
B. Kinkos Box 530257 Atlanta, GA 30353	Copying and Printing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 11/14/00	$969.85 $1795.52
C. Erickson and Co. 38 Ivy St. SE Washington, DC 20003	Fundraising Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00	$3407.37
D. Chuck's Parking Service 13437 Ventura Blvd. Sherman Oaks, CA 91423	Valet Service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00	$2468.90
E. RSVP Catering 2930 Prosperity Ave. Fairfax, Va 22031	Catering Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00	$446.08
F. Southern Coast Janitorial 133 E. De La Guerra Santa Barbara, Ca 93101	Office Cleaning Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 11/20/00	$150.00 $150.00
G. Congressional Liquors 404 First St., SE Washington, DC 20003	Event Beverages Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00	$158.13
H. United Parcel Service Box 505820 The Lakes, NV 88905	Shipping Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 10/31/00 11/16/00	$50.42 $61.89 $136.26
I. Political Data, Inc. Box 1706 Burbank, Ca 91507	Voter Information Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 11/13/00	$853.49 $973.61

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

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 19
	FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Morris, Carrick, and Guma 271 Madison Ave. New York, NY 10016	Field Literature/Mailing Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 11/4/00	$32,530.00 $14,200.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Precision Printing 14544 Keswick St. Van Nuys, CA 91450	Printing Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 11/4/00	$2905.08 $16758.94
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
AT&T Box 78522 Pheonix, AZ 85062	Office Long Distance Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 11/2/00 11/14/00	$1.47 $28.76 $10.95
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
AT&T Box 78522 Pheonix, AZ	Office Long Distance Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/14/00	$227.06
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Peter D. Hart Research Associates, Inc. 1724 Connecticut AVE, NW Washington, DC 20009	Voter Research Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00 10/27/00	$11485.00 $11485.00
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
San Luis Obispo Chamber of Commerce 1039 Chorro St. San Luis Obispo, Ca 93401	Event Fees Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/19/00	$33.00
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
United States Postal Service Ellwood Center Goleta, CA 93117	Postage Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/23/00 10/23/00 10/24/00	$2200.00 $495.00 $360.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Gina Simi 2674 Augusta St. San Luis Obispo, CA 93401	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00 10/29/00 11/14/00	$130.00 $1000.00 $3000.00
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
AT&T Wireless. Box 78110 Phoenix, AZ 85062	Cellular Service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00 11/14/00 11/20/00	$238.00 $97.35 $432.53

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

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Friends of Lois Capps C00331389

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 Sacramento, CA 95887	Phone Service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00 11/2/00	$2133.21 $245.34
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Treder Joe's 29 S. Milpas Santa Barbara, CA 93031	Event Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00	$104.92
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Smart and Final 200 E Gutierrez Santa Barbara, CA 93101	Event Food/Supplies Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00 10/27/00 11/1/00	$78.71 $225.09 $209.48
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Staples Box 9027 Des Moines, IA 50368	Office Supplies Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00 11/2/00	$1021.19 $50.63
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chris Henson 122 Los Aguajes Santa Barbara, CA 93101	Reimbursement - Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00	$137.15
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Costco 6000 Hollister Goleta, Ca 93117	Event Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/24/00	$137.15 (memo)
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brent Baldwin Box 1211 Santa Barbara, Ca 93102	Reimbursement Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00	$33.80
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Storage Center 7246 Hollisrter Goleta, CA 93117	Storage Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/24/00 11/16/00	$50.00 $34.50
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Winning Connections 317 Pennsylvania Ave., SE Washington, Dc 20003	Voter Contact Calls Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/25/00 11/14/00	$10163.70 $28379.95

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

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Friends Of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United States Postal Service Ellwood Station Goleta, CA 93117	Postage Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/27/00 10/29/90 10/30/00	$2000.00 $1155.00 $1605.83
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pizza Lovers 217 Anacapa St. Santa Barbara, CA 93101	Volunteer Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/28/00 10/29/00 11/4/00	$30.00 $52.00 $88.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Office Travel, Supplies, Reimbursement - Vol. Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 10/29/00	Amount of Each Disbursement This Period $172.48
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Scolaris 1323 Johnson Ave San Luis Obispo, CA 93401	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$33.89 (memo)
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Smart and Final 277 S. Higuera San Luis Obispo, CA 93401	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$33.12 (memo)
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Longs Drugs 717 Marsh St. San Luis Obispo, CA 93401	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$15.89 (memo)
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Boston Bagels 1127 Broad San Luis Obispo, CA 93401	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$6.10 (memo)
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Big 5 281 Madonna San Luis Obispo, CA 93401	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$37.53 (memo)
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Spikes 570 Higuera San Luis Obispo CA 93401	Event Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$20.95 (memo)

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

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

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeremy Sharp Box 14606 San Luis Obispo, Ca 93406	Reembursemnet - Event expenses, vol. food,travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/29/00	$200.37
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
San Luis Obispo Downtown Association Box1402 San Luis Obispo, Ca 93406	Event Permit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$50.00 (memo)
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dominoes Pizza 77 S. Foothill Blvd San Luis Obispo, CA 93406	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/29/00	$97.37 (memo)
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Raquel Contreras 1213 East Walnut Lompoc, CA 93436	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/29/00 11/14/00	$750.00 $2250.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeremy Sharp Box 14606 San Luis Obispo, CA 93406	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/29/00 11/14/00	$1250.00 $3750.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Vons 34 W. Victoia Santa Barbara, CA 93101	Volunteer Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/30/00	$4.41
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ben Romo 1814 Anacapa St. Santa Barbara, CA 93101	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/29/00 11/14/00	$2500.00 $7500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jen Severance 206 Bath Santa Barbara, CA 93101	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00 11/14/00	$2000.00 $6000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Melissa Reed 1615 Sycamore Canyon Santa Barbara, CA 93103	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00 11/14/00	$1750.00 $5250.00

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

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 6 OF 19

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brent Baldwin Box 1211 Santa Barbara, CA 93102	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00 11/14/00	$900.00 $2700.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chris Renson 122 Los Aguajes Santa Barbara, CA 93101	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00 11/14/00	$1000.00 $3000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jeff Gordon 4440 Nueces Santa Barbara, Ca 93110	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00 11/14/00	$1000.00 $3000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stacie Paxton 1707 Columbia #306 Washington, DC 20009	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00	$1725.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Jen Severance 206 Bath St. Santa Barbara, CA 93101	Reimbursement - Travel event food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00	$113.24
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Firestone Grill 1001 Higuera San Luis Obispo, CA 93401	Event Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/00	61.24 (memo)
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ogilvy Hill Insurance Box 929 Santa Barbara, CA 93102	Insurance Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00	$665.08
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sparkletts Water Box 7126 Pasadena, CA 91109	Office Water Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00	$110.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
SLO Creamery 750 Pismo San Luis Obispo, CA 93401	Office Rent Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00	$125.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Telincs Corporation 2724 W. 8th Street Los Angeles, CA 90005	Voter Contact Phone Calls Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00 11/16/00	$2700.00 $14496.22
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Darren Thomas 7520 Carlisle Way Goleta, CA 93117	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/31/00 11/1/00 11/16/00	$90.00 $535.00 $140.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nels Henderson Ad and Design 5662 Calle Real Goleta, CA 93117	Graphic Design Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/1/00	$940.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United States Postal Service Ellwood Station Goleta, CA 93117	Postage Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/1/00 11/3/00	$12300.00 $400.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Subway 119 State Street Santa Barbara, CA 93101	Volunteer Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/2/00 11/4/00	$57.99 $57.99
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
City of 6Santa Barbara Box 1232 Santa Barbara, CA 93102	Trash Service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/2/00	$70.02
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service Box 505820 The Lakes, NV 88905	Shipping Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/02/00	$126.81
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MPC Computing 33 W. Micheltorena Santa Barbara, CA 93101	Computer Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/2/00	$345.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Coffee Cat 1201 Anacapa Santa Barbara, Ca 93101	Volunteer Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/3/00	$1212.93

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
QRS Newmedia 601 Mainstream Drive Nashville, TN 37228	Phone Recording Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/3/00	$425.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cycles for Rent 2875 Telegraph Rd. Ventura, CA 93003	Parking Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/4/00	$225.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Expres Business Machines 1437 F Victoria Ave. Ventura, CA 93003	Toner Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/3/00	$129.31
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brent Baldwin Box 1211 Santa Barbara, CA 93102	Reimbursement - Office Supplies Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/4/00	$85.89
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Staples 410 State St. Santa Barbara, CA 93101	Office Supplies Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/4/00	$85.89 (memo)
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Victor the Florist 135 E Anapamu Santa Barbara, CA 93101	Flowers Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/4/00	$45.26
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Campaign Office.Com 560 Park Square Court St. Paul, MN 55101	Web Page Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/4/00	$50.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Santa Barbara Beach Properties 120 El Paso Santa Barbara, CA 93101	Office rent Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/4/00	$3500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PJ Meitl 6504 Seville #4 Goleta, CA 93117	Payroll Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/6/00 11/14/00	$750.00 $2250.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Friends of Lois Capps C00331389

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Telefund 1129 State St. Santa Barbara, CA 93101	Voter Contact Calls Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/6/00	$5000.00
B. Gina Simi 139 Marlow Drive Oakland, CA 94605	Reimbursement Event Supplies, volunteer food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$350.21
C. The Greenery Bouquet 670 Higera Ste. D San Luis Obispo, CA 93401	Event Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$56.30 (memo)
D. Bagel Basement 673 Higuera St San Luis Obispo, CA 93401	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$12.30 (memo)
E. Long's Drugs 717 Marsh St. San Luis Obispo, CA 93401	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$24.82 (memo)
F. Staples 3030 Broad San Luis Obispo, CA 93401	Event Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$17.82 (memo)
G. Scolaris #510 1321 Johnson San Luis Obispo, CA 93401	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$103.29 (memo)
H. Smart & Final 277 Higuera San Luis Obispo, Ca 93401	Event Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$135.68 (memo)
I. Waterfront Grill 113 Harbor Way Santa Barbara, CA 93109	Venue Rental Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$1655.83

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Jeremy Sharp Box 14606 San Luis Obispo, CA 94306	Reimbursement Supplies, food, travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$458.02
B. Full Name, Mailing Address and ZIP Code Staples 3030 Broad St. San Luis Obispo, CA 93401	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$35.55 (memo)
C. Full Name, Mailing Address and ZIP Code The Music Factory 1264 Monterey St San Luis Obispo, CA 93401	Purpose of Disbursement Sound System Rental Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$64.35 (memo)
D. Full Name, Mailing Address and ZIP Code Round Table Pizza 1055 Olive St. San Luis Obispo, CA 93401	Purpose of Disbursement Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$64.71 (memo)
E. Full Name, Mailing Address and ZIP Code Fattes Pizza 2161 Broad St. San Luis Obispo, CA 93401	Purpose of Disbursement Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/13/00	$21.51 (memo)
F. Full Name, Mailing Address and ZIP Code Creative Sterio and Video 16 W. Canon Perdido Santa Barbara, CA 93101	Purpose of Disbursement TV Rental Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$250.00
G. Full Name, Mailing Address and ZIP Code Randolph Harrison 431 Sixth St., NE Washington, DC 20002	Purpose of Disbursement Reimbursement Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$588.90
H. Full Name, Mailing Address and ZIP Code Jeremy Rabinovitz 11717 Greenlene Drive Potomac, MD 20814	Purpose of Disbursement Reimbursement -Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$833.00
I. Full Name, Mailing Address and ZIP Code Melissa Swanson 2500 Wisconsin Ave., NW Washington, DC 20007	Purpose of Disbursement Reimbursement - Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$384.95

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NAME OF COMMITTEE (in Full)
Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Clare Dowling 2314 19th St., NW Washington, DC 20009	Reimbursement - Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$511.45
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alishya Mayfield 1005 E St., NE Washington, DC 20002	Reimbursement - Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$417.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Erin Shaunessey 123 4th St., NE Washington, DC 20002	Reimbursement - Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$424.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Raquel Contreras 1213 E. Walnut Lompoc, CA 93436	Reimbursement - supplies food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/14/00	$163.53
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Max 312 Betteravia Santa Maria, CA 93454	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/14/00	$7.00 (memo)
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Smart and Final Store # 336 Santa Maria, CA 93454	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/14/00	$29.10 (memo)
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Vons 1309 N. H Street Lompoc, CA 93436	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/14/00	$75.04 (memo)
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Albertsons Santa Maria, Ca 93454	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/14/00	$52.39 (memo)
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brandy Fox 3741 Benton St., NW Washington, DC 20007	Reimbursement - Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/13/00	$795.01

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tari Clay 2048 Mountain Ave. Santa Barbara, Ca 93101	Makeup Services Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/14/00	$125.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cox Communications Box 6058 Cypress, CA 90630	Cable. Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/14/00	$38.27
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA America Business Card Box 15469 Wilmington, DE 19866	Credit Card Payemnt Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/14/00	$195.61
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express PO Box 727 Memphis, TN 38194	Shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/14/00	$14.41 (memo)
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Senate Gift Shop US Senate Washington, DC 20510	Congressional Plates Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/14/00	$156.00 (memo)
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Aggregate Year-toDate expenditures to remaining vendors do not exceed $200.	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		(memo)
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MBNA America Business Cards Box 15469 Wilmington, DE 19866	Credit Card Payment Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/16/00	$1007.74
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Max 119 E. Gutierrez Santa Barbara, CA 93101	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/16/00	$70.02 (memo)
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Smart and Final 200 E. Gutierrez Santa Barbara, CA 93101	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/16/00	$461.16 (memo)

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NAME OF COMMITTEE (in Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Aggregate Year-to-Date expenditures to remaining vendors less than $200.			(memo)
B. Full Name, Mailing Address and ZIP Code MBNA America Business Card Box 15469 Wilmington, DE 19886	Purpose of Disbursement Credit Card Payment Disbursement for: Primary [X] General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $894.93
C. Full Name, Mailing Address and ZIP Code Office Max 219 E Gutierrez Santa Barbara, CA 93101	Purpose of Disbursement Office Supplies Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $540.70 (memo)
D. Full Name, Mailing Address and ZIP Code Staples 410 State St. Santa Barbara, CA 93101	Purpose of Disbursement Office Supplies Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $61.13 (memo)
E. Full Name, Mailing Address and ZIP Code Longs Drugs 1121 State St. Santa Barbara, CA 93101	Purpose of Disbursement Office Supplies Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $43.51 (memo)
F. Full Name, Mailing Address and ZIP Code Aggregat year-to-date expenditures less than 200.	Purpose of Disbursement to remaining vendors Disbursement for: Primary General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period (memo)
G. Full Name, Mailing Address and ZIP Code Leon Panetta Box 42 Carmel Valley, 93924	Purpose of Disbursement Reimbursement - Travel Disbursement for: Primary [X] General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $222.68
H. Full Name, Mailing Address and ZIP Code Stacie Paxton 1707 Columbia Pd Washington, DC 20009	Purpose of Disbursement Reimbursement - Travel Disbursement for: Primary [X] General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $161.22
I. Full Name, Mailing Address and ZIP Code Brent Baldwin Box 1211 Santa Barbara, CA 93102	Purpose of Disbursement Reimbursement - Travel event supplies Disbursement for: Primary [X] General Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $69.30

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

FeFriends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Scolaris #510 San Luis Obispo, CA 93401	Event Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/16/00	$14.90 (memo)
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
City of Santa Barbara Box 1990 Santa Barbara, CA 93102	Parking Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/16/00	$6.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
City of Santa Barbara Drawer 2547 Santa Barbara, CA 93120	Parking Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/16/00 11/16/00	$20.00 $20.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Jen Severance 206 Bath St Santa Barbara, CA 93101	Reimbursement - Vol food travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/16/00	$72.80
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Blenders in the Grass 1046 Coast Villiage Montecito, CA 93108	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/16/00	$20.80 (memo)
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Pacific Bell Wireless Box 10401 Van Nuys, CA 91410	Cellular Service Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/16/00 11/20/00	$68.00 $386.72
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Santa Barbara Maritime Museum 113 Harbor Way Santa Barbara, CA 93109	Venue Rental Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/20/00	$1500.00
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Ben Romo 1814 Anacapa St. Santa Barbara, CA 93101	Reimbursement - Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/20/00	$87.42
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331369

A. Full Name, Mailing Address and ZIP Code Melissa Reed 1615 Sycamore Cyn. Santa Barbara, CA 93103	Purpose of Disbursement ~~Shipping~~ vol food Reimbursement - travel office/event supplies Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $479.09
B. Full Name, Mailing Address and ZIP Code Fresh Choice 740 State Street Santa Barbara, CA 93101	Purpose of Disbursement Vol Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $18.09 (memo)
C. Full Name, Mailing Address and ZIP Code KMart 6865 Hollister Goleta, CA 93117	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $67.87 (memo)
D. Full Name, Mailing Address and ZIP Code Ashley's Dollar Store 218 Milpas Santa Barbara, CA 93103	Purpose of Disbursement Event Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $21.50 (memo)
E. Full Name, Mailing Address and ZIP Code Greyhound Lines, Inc. Box 650662 Dallas, TX 75265	Purpose of Disbursement Shipping Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $17.88 (memo)
F. Full Name, Mailing Address and ZIP Code Trader Joes 29 S. Milpas Santa Barbara, CA 93103	Purpose of Disbursement Event Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $96.30 (memo)
G. Full Name, Mailing Address and ZIP Code Scolaris 222 N. Milpas Santa Barbara, CA 93103	Purpose of Disbursement Event food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $58.44 (memo)
H. Full Name, Mailing Address and ZIP Code Milpas Liquor 314 N. Milpas Santa Barbara, CA 93103	Purpose of Disbursement Event Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $16.01 (memo)
I. Full Name, Mailing Address and ZIP Code Jeff Gordon 4440 Nueces Dr. Santa Barbara, CA 93110	Purpose of Disbursement Reimbursement - Travel Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 11/16/00	Amount of Each Disbursement This Period $270.40

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Jeff Gordon 4440 Nueces Dr. Santa Barbara, CA 93110	Reimbursement Field/Event/Office Supplies Volunteer & Event Food Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/20/00	$1088.45
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Home Improvement Center 415 E Gutierrez Santa Barbara, CA 93101	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$106.04 (memo)
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Radio Shack 3218 State Santa Barbara, CA 93105	Megaphones and Batteries Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$169.93 (memo)
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Staples 410 State Santa Barbara, CA 93101	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$151.62 (memo)
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Albertsons 7127 Hollister Goleta, CA 93117	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$116.11 (memo)
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
UCSB Bookstore University Center Santa Barbara, CA 93106	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$60.80 (memo)
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Isla Vista Market 939 Embarcadero Del Mar Isla Vista, CA 93117	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$33.94 (memo)
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Woodstock's Pizza 928 Embarcadero Del Norte Isla Vista, CA 93117	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$311.06 (memo)
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
Espresso Roma 6521 Pardall Isla Vista, Ca 93117	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$13.95 (memo)

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Giovanni's Pizza 6583 Pardall Isla Vista, CA 93117	Volunteer Food Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$91.12 (memo)
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Art Essentials 28 E Victoria Santa Barbara, CA 93101	Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$10.11 (memo)
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Pulse University Center Santa Barbara, CA 93106	Copies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/20/00	$3.77 (memo)
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Santa Barbara Bank and Trust 20 E. Carrillo Santa Barbara, CA 93101	Bank Fees Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/23/00 10/31/00 11/7/00	$30.00 $30.00 $10.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Santa Barbara Bank And Trust 20 E. Carrillo Santa Barbara, CA 93101	Bank Fees Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	11/7/00 11/7/00	$15.00 $786.73
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Morris, Carrick, & Guma 271 Madison Avenue New York, NY 10016	Advertising Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/23/00 10/31/00	$100,000.00 $100,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
Friends of Lois Cappe C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sierra Club Political Committee 408 C Street, NE Washington, DC 20002	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/00 11/7/00	$94.82 Inkind Received $2003.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		Inkind received
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Cable Television Political Action Committee 1724 Massachusetts Ave., NW Washington, DC 20036	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/31/00	$663.25 Inkind received
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Unitemized Dispursements	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		$858.48
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

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

TOTAL This Period (last page this line number only) $473796.68

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Lois Capps C00331389

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Congressional Campaign Committee 430 S. Capitol St., SE Washington, DC 20003	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$2500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gerrie Shipske for Congress (CA-38) 3910 East 4th St. Long Beach, CA 90814	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baesler for Congress (KY-6) Box 1807 Lexington, KY 40588	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Brad Carson for Congress (OK-2) Box 1982 Claremont, OK 74018	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Casey for Congress (PA-10) Bank Towers Building, 6th Floor Spruce Street & Wyoming Ave. Scranton PA 18503	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Connelly for Congress (NJ - 7) Box 280 Fanwood, NJ 07023	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Steve Israel for Congress (NY-2) 1966 Deer Park Ave. Deer Park, NY 11729	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dr. Paul Perry for Congress (IN-8) 4900 Shamrock Drive # 100 Evansville, IN 47715	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Elain Bloom for Congress (FL - 22) 1922 Tyler St. Hollywood, FL 33020	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00

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

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)

Friends of Lois Capps C00331389

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. O'Shaughnessy for Congress (OH-H12) Box 1653 Columbus, OH 43216	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
B. Friends of Mike Stedem (FL-H12) 1240A E. Main St. Barton, FL 33830	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
C. Marsha Folsom for Congress (AL-H4) Box 280 Cullman, AL 35056	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
D. Eleanor Jordan for Congress (KY-H3) Box 21151 Louisville, KY 40221	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
E. Susan Bass Levin for Congress (NJ-H1) Box 3311 Cherry Hill, NJ 08034	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$500.00
F. Assembly Democratic Leadership 2000 1020 12th Street, Sacramento, CA 95814	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$1000.00
G. Senate Majority Fund 1128 1/2 H St. Sacramento, CA 95814	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$1000.00
H. Ariana Katovich Alliance for IV Parks 1033 El Embarcadero Goleta, CA 93117	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10/27/00	$200.00
I. Minge Recount Fund Box 71 Granite Falls, MN 56241	Contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/16/00	$500.00

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$11700.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
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PREPARER

12/8/08
DATE PREPARED

(6/2000)