REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

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FEC MAIL ROOM

2000 OCT 14 A 10:53

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Elaine Bloom for Congress

ADDRESS (number and street) ☐ Check if different than previously reported.
5255 Collins Ave.

CITY, STATE and ZIP CODE — STATE/DISTRICT
Miami Beach, FL 33140 — FL/22

2. FEC IDENTIFICATION NUMBER
C00345405

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 _____ in the State of _____
- ☐ 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 8/17/00 through 9/30/00		
6.	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11(a))	$245,954.15	$1,127,257.81
	(b) Total Contribution Refunds (from Line 20(d))	$600.00	$4,918.00
	(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	$245,354.15	$1,122,339.81
7.	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 17)	$569,108.55	$1,590,589.87
	(b) Total Offsets to Operating Expenditures (from Line 14)	$1,869.98	$2,348.34
	(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	$567,238.57	$1,588,240.53
8.	Cash on Hand at Close of Reporting Period (from Line 27)	$320,525.80	
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$0.00	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$265,100.00	

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

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Richard A. Berkowitz

Signature of Treasurer [signature] — Date 10/13/00

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)

FE3AN00P07

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)
Elaine Bloom for Congress

Report Covering the Period:
From: 8/17/00 To: 9/30/00

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)	$125,450.25		11(a)(i)
(ii) Unitemized	$74,436.50		11(a)(ii)
(iii) Total of contributions from Individuals	$199,886.75	$901,940.06	11(a)(iii)
(b) Political Party Committees	$55.00	$3,532.25	11(b)
(c) Other Political Committees (such as PACs)	$46,012.40	$218,341.71	11(c)
(d) The Candidate	$0.00	$3,443.79	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	$245,954.15	$1,127,257.81	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	$0.00	$0.00	12
13. LOANS:			
(a) Made or Guaranteed by the Candidate	$160,000.00	$160,000.00	13(a)
(b) All Other Loans	$0.00	$0.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b))	$160,000.00	$160,000.00	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	$1,869.98	$2,349.34	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	$5,279.66	$24,055.24	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	$413,103.79	$1,313,661.39	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES	$569,108.55	$1,590,569.87	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	$0.00	$0.00	18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	$0.00	$0.00	19(a)
(b) Of All Other Loans	$0.00	$0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	$0.00	$0.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	$600.00	$4,916.00	20(a)
(b) Political Party Committees	$0.00	$0.00	20(b)
(c) Other Political Committees (such as PACs)	$0.00	$0.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	$600.00	$4,916.00	20(d)
21. OTHER DISBURSEMENTS	$25.00	$25.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	$569,733.55	$1,595,592.87	22

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	$ 477,155.56	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	$ 413,103.79	24
25. SUBTOTAL (add Line 23 and Line 24)	$ 890,259.35	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	$ 569,733.55	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	$ 320,525.80	27

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 1 OF 44

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Susan Adler 4386 Green Valley Road Suisun City, CA 94585	Retired	9/18/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Conduit total: $53,599.50	9/18/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):		Aggregate Year-to-Date > $	
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lee Aerenson 2238 Fisher Island Drive Miami, FL 33109	Retired	9/8/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	$750.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Richard Alhadeff 150 West Flagler Street Miami, FL 33130	Stearns, Weaver et al. Attorney	9/8/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Andrew Allen 18730 NW Astoria Drive Portland, OR 97229	Retired	9/14/00	$1,000.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Conduit total: $53,599.50	9/14/00	MEMO $1,000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):		Aggregate Year-to-Date > $	
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Millicent Anisfield 10 Sawmill Road Saddle River, NJ 07458	Retired Retired	9/15/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):		Aggregate Year-to-Date > $	$250.00

SUBTOTAL of Receipts This Page (optional)	$2,250.00
TOTAL This Period (last page this line number only)	

FE6AN1.PDF

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

FOR LINE NUMBER 11(a)(i)

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phyllis Apple 17840 W. Dixie Highway Miami, FL 33160	The Apple Organization	9/15/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Public Relations	Aggregate Year-to-Date $	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allan Applestein 19926 NE 39th Place Penthouse Aventura, FL 33180	D.C.A. Grantor Trust	9/15/00	$800.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Investor	Aggregate Year-to-Date $	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harvey Arfa 955 Park Avenue New York, NY 10028	Gruner & Co.	8/24/00	$500.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date $	$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathy Arnow PO BOX 25844 Washington, DC 20007	Retired	9/26/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date $	$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi	9/28/00	MEMO $500.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: Conduit total: $53,599.50	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
Tod Arnovitz Museum Tower Suite 2700 Miami, FL 33130	Arnovitz & Associates	8/24/00	$250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date $	$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norman Atkin PO Box 181 West Stockbridge, MA 01266-0181	Self	8/29/00	$750.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: Doctor	Aggregate Year-to-Date $	$750.00

SUBTOTAL of Receipts This Page (optional) $3,800.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 3 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Alberto Babani 495 S. Shore Drive Miami Beach, FL 33141	Self Attorney	9/6/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $		$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Baker PO BOX 71992 Fairbanks, AK 99707	Retired	9/21/00	$250.00 *
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $		$250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Conduit total: $53,569.50	9/21/00	MEMO $250.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sheldon Becher 9801 Collins Avenue PH#4 Bal Harbour, FL 33154	Becher,Yeager, Nall, Sherburne, Bernard & Cammer CPA	9/26/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $		$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mark Berger 142 E. Princetown Road Bala Cynwyd, PA 19004	University of Pennsylvania Hospital Physician	9/19/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $		$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Irwin Berkley 4930 W. Oakton St., 4th Floor Skokie, IL 60077-2900	Century Development Group Developer	9/13/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date $		$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mandell Berman 29100 Northwestern Hwy. Ste 370 Southfield, MI 48034	Self Investor	9/1/00	$300.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		$300.00

SUBTOTAL of Receipts This Page (optional) $4,050.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 4 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Elayne Bamstein PO Box #73 New York, NY 10124-0 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $250.00	8/29/00	$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Roy Black 632 S. Greenway Drive Coral Gables, FL 33134 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Black, S, & K P.A. Occupation: Attorney Aggregate Year-to-Date: $500.00	9/8/00	$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Carol Blades 2 Grove Isle Dr. #210 Miami, FL 33133 Receipt For: [ ] Primary [X] General [ ] Other (specify):	JGR Assoc Occupation: Public Relations Aggregate Year-to-Date: $500.00	9/26/00	$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
David Block 300 Harbor Court Key Biscayne, FL 33149 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Out Island Property Inc. Occupation: Business Executive Aggregate Year-to-Date: $1,000.00	9/26/00	$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joan Blum 983 Park Avenue New York, NY 10028 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Community Volunteer Occupation: Aggregate Year-to-Date: $250.00	9/22/00	$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Elspeth Bobbs 830 East Alameda Santa Fe, NM 87501 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self Occupation: Property Manager Aggregate Year-to-Date: $500.00	9/20/00	$250.00 *
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date:	9/20/00	MEMO $250.00

SUBTOTAL of Receipts This Page (optional)	$2,250.00
TOTAL This Period (last page this line number only)	

FE6AN078PDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 5 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Bohnett 2049 Century Park East Suite 2151 Los Angeles, CA 90067	Baroda Ventures	8/13/00	$1,000.00
Receipt For: [x] Primary [ ] General [ ] Other (specify):	Occupation: Managing Member	check dated 8/31/00	
	Aggregate Year-to-Date $	$1,000.00	
B. Full Name, Mailing Address and ZIP Code Hilary Bok 1321 Broadway Road Lutherville Timonium, MD 21093	Name of Employer: John Hopkins University	9/17/00	$300.00
Receipt For: [ ] Primary [x] General [ ] Other (specify):	Occupation: Asso. Professor		
	Aggregate Year-to-Date $	$300.00	
C. Full Name, Mailing Address and ZIP Code Michael Bokor 960 NE 175th Street North Miami Beach, FL 33162	Name of Employer: Avante Group Inc	9/11/00	$500.00
Receipt For: [ ] Primary [x] General [ ] Other (specify):	Occupation: Accountant/Financo		
	Aggregate Year-to-Date $	$500.00	
D. Full Name, Mailing Address and ZIP Code Ann Brawner 2426 148th Court SE Bothell, WA 98012	Name of Employer: Retired	9/20/00	$250.00 *
Receipt For: [ ] Primary [x] General [ ] Other (specify):	Occupation:		
	Aggregate Year-to-Date $	$250.00	
E. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Name of Employer: Note: Above Contribution earmarked through this organi	9/20/00	MEMO $250.00
Receipt For: [ ] Primary [ ] General [x] Other (specify):	Occupation: Conduit total: $53,599.50		
	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code Alexander Brodt 7716 Fisher Island Drive Fisher Island, FL 33109	Name of Employer: Self	9/28/00	$1,000.00
Receipt For: [ ] Primary [x] General [ ] Other (specify):	Occupation: Investor		
	Aggregate Year-to-Date $	$1,500.00	
G. Full Name, Mailing Address and ZIP Code Alvin Brown 1811 SW 17 St. Boca Raton, FL 33486	Name of Employer: Self	9/22/00	$100.00
Receipt For: [ ] Primary [x] General [ ] Other (specify):	Occupation: CPA		
	Aggregate Year-to-Date $	$350.00	

SUBTOTAL of Receipts This Page (optional) $3,150.00

TOTAL This Period (last page this line number only)

FEC/Form3P/SCHA

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 6 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur Brown 10090 SW 145th ST Miami, FL 33141	Gerson, Preston & Co.	8/11/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation CPA		
	Aggregate Year-to-Date $	$500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barbara Bumim 6 Artichoke Terrace Newburyport, MA 01950	Applied Graphics, Inc.	8/20/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation CEO< President, Treasurer		
	Aggregate Year-to-Date $	$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW. Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi	9/20/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation Conduit total: $53,599.50		
	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
Donald Butterfield 353 Marlborough Street Boston, MA 02115	Retired Physician	9/29/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date $	$500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Minnie Carson 12440 Rivercrest Drive Little Rock, AR 72212	Homemaker	9/15/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date $	$250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW. Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi	9/15/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation Conduit total: $53,599.50		
	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
Darren Caruso 17835 NW 2s1t Street Pembroke Pines, FL 33029	Information	9/11/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Requested		
	Aggregate Year-to-Date $	$500.00	

SUBTOTAL of Receipts This Page (optional) $2,000.00

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

FE3AN07PDF

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

PAGE 7 OF 44

FOR LINE NUMBER 11(a)(i)

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robyn Cassel 540 Leucadendra Dr Coral Gables, FL 33156	Homemaker	8/24/00	$250.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-to-Date > $	$250.00	
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Evelyn Chambers 1700 Lincoln Street, Suite 3950 Denver, CO 80203	Retired Occupation: Retired	8/17/00	$500.00 *
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$500.00	
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,699.50	8/17/00	MEMO $500.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Merle Chambers 1700 Lincoln Street Suite 3950 Denver, CO 80203	Leith Ventures, LLC Occupation: President and CEO	8/17/00	$500.00 *
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$500.00	
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,699.50	8/17/00	MEMO $500.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Deborah Chames 5978 SW 37th Ave. Fort Lauderdale, FL 33312	Heller Chames and Garcia, PA Occupation: Attorney	9/26/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Deborah Chames 5978 SW 37th Ave. Fort Lauderdale, FL 33312	Heller Chames and Garcia, PA Occupation: Attorney	9/26/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	

SUBTOTAL of Receipts This Page (optional) $2,250.00

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

FE6AN(07)PDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 8 OF 44

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (in Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
William Cherry 2265 Briarwood Trail Decatur, GA 30033 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Aggregate Year-to-Date $250.00	9/27/00	$250.00 *
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation Conduit total: $53,599.50 Aggregate Year-to-Date $	9/27/00	MEMO $250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Marilyn Clements 104 Wallacks Point Stamford, CT 06902 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Occupation Artist Aggregate Year-to-Date $250.00	9/19/00	$250.00 *
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation Conduit total: $53,599.50 Aggregate Year-to-Date $	9/19/00	MEMO $250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Edith Cofrin 1074 Berkshire Road NE Atlanta, GA 30306 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Self Employed Occupation Investor Aggregate Year-to-Date $1,000.00	8/29/00	$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mary Ann Cofrin 29 Mill Lane Amherst, MA 01002 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation Requested Aggregate Year-to-Date $1,000.00	9/20/00	$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mary Cogan 77 Tisquantum Morris Island Chatham, MA 02633 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Retired Aggregate Year-to-Date $250.00	9/19/00	$250.00 *

SUBTOTAL of Receipts This Page (optional) $2,750.00

TOTAL This Period (last page this line number only)

FEC/MM78/POF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 9 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,589.50 Aggregate Year-to-Date: $	9/19/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Alan Cohen 4041 Collins Avenue Miami Beach, FL 33140	Self Occupation: Real Estate Investor Aggregate Year-to-Date: $ $250.00	9/6/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dan Cohen 1415 Northview Drive Miami Beach, FL 33140	Self Occupation: Physician Aggregate Year-to-Date: $ $1,000.00	9/19/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joel Cohen 2000 S. Bayshore Drive Villa 9 Coconut Grove, FL 33133	Self Occupation: Real Estate Investor Aggregate Year-to-Date: $ $250.00	9/6/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Cohen 1415 North View Drive Miami Beach, FL 33140	Self Occupation: Attorney Aggregate Year-to-Date: $ $1,250.00	9/19/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Marvin Cooper 6000 North Bay Rd Miami Beach, FL 33140	Occupation: Retired Aggregate Year-to-Date: $ $750.00	9/22/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Esther Coopersmith 2230 S St., N.W. Washington, DC 20008	Self Occupation: Real Estate Aggregate Year-to-Date: $ $250.00	9/1/00	$250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	$3,000.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 10 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Michele Criden 11035 Marin Street Miami, FL 33156	Information Occupation: Requested	9/29/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$500.00	
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Rosalie Danbury 82 North Ave. Westport, CT 06880	retired Occupation: retired	9/12/00	$500.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$500.00	
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
MoveOn.org P.O. Box 9063 Berkeley, CA 94709-	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $4,380.00	9/12/00	MEMO $500.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Thomas Danbury 82 North Ave. Westport, CT 06880	Retired Occupation: Retired	9/12/00	$500.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$500.00	
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
MoveOn.org P.O. Box 9063 Berkeley, CA 94709-	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $4,380.00	9/12/00	MEMO $500.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Virginia Davis 101 Lombard Street 115W San Francisco, CA 94111	Self Occupation: Book Producer	9/19/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$250.00	
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50	9/19/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$1,750.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 11 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lisa DeBartolo 6340 W. McLaurin Drive Tampa, FL 33647 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $500.00	9/20/00	$500.00 *
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/20/00	MEMO $500.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Aurora DeGasperi 906 Escobar Avenue Miami, FL 33134 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Occupation: Attorney Aggregate Year-to-Date: $1,000.00	9/19/00	$1,000.00 *
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/19/00	MEMO $1,000.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jeffrey Dennis 1370 Shaberk Lane Des Plaines, IL 60018-1656 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Self Occupation: Attorney Aggregate Year-to-Date: $550.00	9/1/00	$250.00
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Louise Dickinson 1 Park Avenue Dallas, PA 18612 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $250.00	9/13/00	$250.00
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Barry Dockswell 2204 Bay Drive Pompano Beach, FL 33062 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date: $829.00	9/26/00	$279.00

SUBTOTAL of Receipts This Page (optional) $2,279.00

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

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SCHEDULE A — ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robbie Dockswell 2204 Bay Drive Pompano Beach, FL 33062 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information * In-Kind: Event Expense Occupation: Requested Aggregate Year-to-Date: $721.00	9/6/00	$721.00 *
B. Full Name, Mailing Address and ZIP Code Norman Drucker 801 NE 167th St., Suite 308 N. Miami Beach, FL 33162 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Norman Drucker P.A. Occupation: Attorney Aggregate Year-to-Date: $450.00	9/11/00	$200.00
C. Full Name, Mailing Address and ZIP Code Donna Dupuy PO Box 1789 Stuart, FL 34995 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self-Employed Occupation: Writer Aggregate Year-to-Date: $500.00	9/26/00	$200.00
D. Full Name, Mailing Address and ZIP Code Debra Efroymson Information Requested Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Path Canada Occupation: Development Specialist Aggregate Year-to-Date: $1,000.00	8/4/00	$1,000.00
E. Full Name, Mailing Address and ZIP Code Edward Elson 180 Cocoanut Row Palm Beach, FL 33480 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Retired Occupation: Aggregate Year-to-Date: $2,000.00	8/11/00 check dated 8/31/00	$1,000.00
F. Full Name, Mailing Address and ZIP Code Edward Elson 180 Cocoanut Row Palm Beach, FL 33480 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Retired Occupation: Aggregate Year-to-Date: $2,000.00	9/11/00 check dated 8/31/00	$1,000.00
G. Full Name, Mailing Address and ZIP Code Lois Entin 15621 SW 12th Street Pembroke Pines, FL 33027 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Retired Occupation: Retired Aggregate Year-to-Date: $250.00	9/26/00	$250.00 *

SUBTOTAL of Receipts This Page (optional) $4,371.00

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

FEA/HD7/PDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code Joint Action Committee for Political Affairs P.O. Box 105 Highland Park, IL 60035 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Note: Above Contribution earmarked through this organi Occupation Conduit total: $325.00 Aggregate Year-to-Date > $	Date (month, day, year) 9/26/00	Amount of Each Receipt this Period MEMO $250.00
B. Full Name, Mailing Address and ZIP Code Morton Epstein 21205 Yacht Club Dr. #1402 Aventura, FL 33180 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > $ $300.00	Date (month, day, year) 8/29/00	Amount of Each Receipt this Period $200.00
C. Full Name, Mailing Address and ZIP Code Elizabeth Erb 129 Garrish Lane New Canaan, CT 06840-4117 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date > $ $250.00	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period $250.00
D. Full Name, Mailing Address and ZIP Code Ronald Esserman 3303 Devon Road Coconut Grove, FL 33133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Self Occupation Owner-Automobile Dealership Aggregate Year-to-Date > $ $2,000.00	Date (month, day, year) 9/11/00	Amount of Each Receipt this Period $1,000.00
E. Full Name, Mailing Address and ZIP Code Colleen Fain 700 Arvida Parkway Coral Gables, FL 33156 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Homemaker Occupation Aggregate Year-to-Date > $ $1,000.00	Date (month, day, year) 8/29/00	Amount of Each Receipt this Period $1,000.00
F. Full Name, Mailing Address and ZIP Code Mark Feldman 2350 Coral Way, Suite 302 Miami, FL 33145 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Self Occupation Attorney Aggregate Year-to-Date > $ $250.00	Date (month, day, year) 9/15/00	Amount of Each Receipt this Period $250.00
G. Full Name, Mailing Address and ZIP Code Marilyn Feldman 3 Grove Isle Drive #510 Miami, FL 33133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Information Occupation Requested Aggregate Year-to-Date > $ $250.00	Date (month, day, year) 9/22/00	Amount of Each Receipt this Period $250.00

SUBTOTAL of Receipts This Page (optional) $2,950.00

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

FE8AN07PDF

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

FOR LINE NUMBER 11(a)(i)

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code Richard Finkelstein Kenco Communities 1000 Clint Moore Rd., Suite 110 Boca Raton, FL 33487 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Kenco Communities, Inc. Occupation President Aggregate Year-to-Date $ $300.00	Date (month, day, year) 8/1/00	Amount of Each Receipt this Period $200.00
B. Full Name, Mailing Address and ZIP Code Lawrence Fishbein 10155 Collins Ave. #1008 Bal Harbour, FL 33154 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date $ $300.00	Date (month, day, year) 8/31/00	Amount of Each Receipt this Period $300.00
C. Full Name, Mailing Address and ZIP Code Gonzalee Ford 555 Banyan Tree Lane #205 Delray Beach, FL 33483 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Self Occupation Antique Dealer Aggregate Year-to-Date $ $525.00	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period $25.00
D. Full Name, Mailing Address and ZIP Code Michael Friedman 1401 Brickell Avenue, Suite 530 Miami Miami, FL 33131 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Friedman & Cohen Occupation Attorney Aggregate Year-to-Date $ $500.00	Date (month, day, year) 9/29/00	Amount of Each Receipt this Period $500.00
E. Full Name, Mailing Address and ZIP Code Stanley Friedman 11111 Biscayne Blvd. #957 Miami, FL 33181 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date $ $300.00	Date (month, day, year) 9/8/00	Amount of Each Receipt this Period $200.00
F. Full Name, Mailing Address and ZIP Code Belvin Friedson 9125 S.W. 56th Court Miami, FL 33156 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date $ $1,000.00	Date (month, day, year) 9/8/00	Amount of Each Receipt this Period $1,000.00
G. Full Name, Mailing Address and ZIP Code Lucille Friedson 9125 SW 56th Court Miami, FL 33156 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer retired Occupation retired Aggregate Year-to-Date $ $1,000.00	Date (month, day, year) 9/8/00	Amount of Each Receipt this Period $1,000.00
SUBTOTAL of Receipts This Page (optional)			$3,225.00
TOTAL This Period (last page this line number only)			

FEMA-07SPDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 15 OF 44
	FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00346405

A. Full Name, Mailing Address and ZIP Code Natalie Friendly PO BOX 7023 Rancho Santa Fe, CA 92067 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Retired Occupation: Aggregate Year-to-Date: $250.00	Date (month, day, year): 9/27/00	Amount of Each Receipt this Period: $250.00 *
B. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer: Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	Date (month, day, year): 9/27/00	Amount of Each Receipt this Period: MEMO $250.00
C. Full Name, Mailing Address and ZIP Code Michael Fruchter 908 NE 4th Street, Apt. 5 Fort Lauderdale, FL 33301 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer: Campus Marketing Specialist, Inc. Occupation: Marketing Aggregate Year-to-Date: $300.00	Date (month, day, year): 8/29/00	Amount of Each Receipt this Period: $100.00
D. Full Name, Mailing Address and ZIP Code Edy Gampel 19495 Biscayne Blvd. Ste 906 Aventura, FL 33180 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Homemaker Occupation: Aggregate Year-to-Date: $1,000.00	Date (month, day, year): 9/13/00	Amount of Each Receipt this Period: $1,000.00
E. Full Name, Mailing Address and ZIP Code Barbara Garrett 301 Casuarina Concourse Coral Gables, FL 33143 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Applica, Inc. Occupation: Executive Aggregate Year-to-Date: $500.00	Date (month, day, year): 9/8/00	Amount of Each Receipt this Period: $250.00
F. Full Name, Mailing Address and ZIP Code Donald Gerson 8526 NW 40th Court Boca Raton, FL 33496 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Gerson, Preston & Co. Occupation: CPA Aggregate Year-to-Date: $500.00	Date (month, day, year): 9/8/00	Amount of Each Receipt this Period: $500.00
G. Full Name, Mailing Address and ZIP Code Eleanor Gerson 2425 North Park Blvd. #2 Cleveland, OH 44106 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Retired Occupation: Aggregate Year-to-Date: $500.00	Date (month, day, year): 9/12/00	Amount of Each Receipt this Period: $500.00 *
SUBTOTAL of Receipts This Page (optional)			$2,600.00
TOTAL This Period (last page this line number only)			

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Note: Above Contribution earmarked through this organi Occupation Conduit total: $53,599.50 Aggregate Year-to-Date $	Date (month, day, year) 9/12/00	Amount of Each Receipt this Period MEMO $500.00
B. Full Name, Mailing Address and ZIP Code Evelyn Goldbloom 5660 Collins Ave. Miami Beach, FL 33140 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Homemaker Occupation Aggregate Year-to-Date $ $750.00	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period $750.00
C. Full Name, Mailing Address and ZIP Code George Goldbloom 5660 Collins Avenue, PH-B Miami Beach, FL 33140 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Mg Investments Occupation Self-Employed Developer Aggregate Year-to-Date $ $500.00	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period $250.00
D. Full Name, Mailing Address and ZIP Code Alan Goldfarb 1 Grove Isle, #1102 Miami, FL 33133 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Goldfarb, Gold, Gonzalez, & Wald, P.A. Occupation Attorney Aggregate Year-to-Date $ $1,000.00	Date (month, day, year) 8/29/00	Amount of Each Receipt this Period $500.00
E. Full Name, Mailing Address and ZIP Code Alan Goldfarb 1 Grove Isle, #1102 Miami, FL 33133 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Goldfarb, Gold, Gonzalez, & Wald, P.A. Occupation Attorney Aggregate Year-to-Date $ $1,000.00	Date (month, day, year) 8/29/00	Amount of Each Receipt this Period $500.00
F. Full Name, Mailing Address and ZIP Code Evelyn Goodman 8245 SW 117 Terr Miami, FL 33156 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date $ $250.00	Date (month, day, year) 9/20/00	Amount of Each Receipt this Period $250.00 *
G. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Note: Above Contribution earmarked through this organi Occupation Conduit total: $53,599.50 Aggregate Year-to-Date $	Date (month, day, year) 9/20/00	Amount of Each Receipt this Period MEMO $250.00
SUBTOTAL of Receipts This Page (optional)			$2,250.00
TOTAL This Period (last page this line number only)			

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Morton Gooze 3675 N. Country Club Drive #1109 Aventura, FL 33180	Retired Occupation: Scientist	8/25/00	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $400.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Hugh Grant 1311 Pearl Street Denver, CO 80203	Information Occupation: Requested	8/17/00	$1,000.00 *
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date: $1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,699.60	8/17/00	MEMO $1,000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Aggregate Year-to-Date: $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Richard Green 21150 Point Place, Apt. 1406 Aventura, FL 33180	Occupation: Retired	9/15/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $500.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Allen Greenwald 1320 South Dixie Highway, Suite 781 Coral Gables, FL 33146	Self Occupation: Real Estate Investor	9/6/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $250.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Harold Grinspoon 172 Crestview Circle Longmeadow, MA 01106	Retired	9/11/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Deborah Grossman 2665 S Bayshore Dr PH Miami, FL 33133	Homemaker	9/28/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date: $1,000.00		

SUBTOTAL of Receipts This Page (optional) $3,450.00

TOTAL This Period (last page this line number only)

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stuart Grossman 2665 South Bayshore Drive PH Miami, FL 33133	Grossman and Roth, PA	9/28/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date $	$1,000.00

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Gruder 19955 NE 36th Court Aventura, FL 33180	Retired	8/24/00	$250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date $	$250.00

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Haft 159 NE 97th Street Miami Shores, FL 33138	Haft Decorates	9/15/00	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Owner	Aggregate Year-to-Date $	$400.00

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Barry Haiman 9801 Collins Avenue Bal Harbour, FL 33154	Information	9/19/00	$300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Requested	Aggregate Year-to-Date $	$300.00

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Halberg 6220 Rolling Road Drive Miami, FL 33156	David J. Halberg P.A.	9/5/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney	Aggregate Year-to-Date $	$500.00

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Handler 19707 Turnberry Way #21D Aventura, FL 33180	Retired	8/24/00	$250.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date $	$450.00

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rina Hanzman 200 S Biscayne Blvd. Suite 2100 Miami, FL 33131	Information	8/31/00	$1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation: requested	Aggregate Year-to-Date $	$2,000.00

SUBTOTAL of Receipts This Page (optional)	$3,500.00
TOTAL This Period (last page this line number only)	

REMARKS/FOOTNOTES

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 19 OF 44
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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Riva Hanzman 200 S Biscayne Blvd. Suite 2100 Miami, FL 33131	Information requested	8/31/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$2,000.00	
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Daniel Heller 50 W. Dilido Drive Miami Beach, FL 33139	Self Attorney	9/19/00	$600.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,500.00	
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jonathan Heller 888 Brickell Ave Suite 202 Miami, FL 33131	Heller Chames and Garcia, PA Attorney	9/26/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jonathan Heller 888 Brickell Ave Suite 202 Miami, FL 33131	Heller Chames and Garcia, PA Attorney	9/26/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Jeffrey Herman 19501 NE 14th Ct North Miami Beach, FL 33179	Herman, Memme, & Stein P.A. Attorney	9/22/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Nancy Herman 19501 NE 14th Ct North Miami Beach, FL 33179	Homemaker	9/22/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Sally Heyman 1050 NE 191 Street North Miami Beach, 33179	* In-Kind: Yard Signs	9/15/00	$800.00 *
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,800.00	

SUBTOTAL of Receipts This Page (optional)	$5,300.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Sally Heyman 1060 NE 191 Street North Miami Beach, 33179 Receipt For: [x] Primary [ ] General [ ] Other (specify):	* In-Kind: Yard Signs Occupation Aggregate Year-to-Date > $ $1,800.00	8/31/00	$1,000.00 *
B. Full Name, Mailing Address and ZIP Code Theodore Hill 908 NE 4 Street, Apt. 5 Fort Lauderdale, FL 33301 Receipt For: [x] Primary [ ] General [ ] Other (specify):	Name of Employer Campus Marketing Specialist, Inc. Occupation Art Director Aggregate Year-to-Date > $ $300.00	Date (month, day, year) 8/29/00	Amount of Each Receipt this Period $100.00
C. Full Name, Mailing Address and ZIP Code Miriam Hinds 15920 W. Prestwick Place Miami Lakes, FL 33014 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer Information Occupation Requested Aggregate Year-to-Date > $ $400.00	Date (month, day, year) 9/13/00	Amount of Each Receipt this Period $400.00
D. Full Name, Mailing Address and ZIP Code Dorothy Hines PO BOX 274 Warren, VT 05674 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer N/A Occupation N/A Aggregate Year-to-Date > $ $250.00	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period $250.00 *
E. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [x] Other (specify):	Name of Employer Note: Above Contribution earmarked through this organi Occupation Conduit total: $53,599.50 Aggregate Year-to-Date > $	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period MEMO $250.00
F. Full Name, Mailing Address and ZIP Code Howard Hollander 1330 100th Street Bay Harbor Islands, FL 33154 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer Hollander & Bertelstone Occupation Attorney Aggregate Year-to-Date > $ $250.00	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period $250.00
G. Full Name, Mailing Address and ZIP Code Charles Intriago 1829 Espanola Drive Coconut Grove, FL 33133 Receipt For: [ ] Primary [x] General [ ] Other (specify):	Name of Employer Alert Global Media, Inc. Occupation Business Executive Aggregate Year-to-Date > $ $300.00	Date (month, day, year) 9/15/00	Amount of Each Receipt this Period $300.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Baruch Ivcher 9999 Collins Avenue #20D Miami Beach, FL 33154	Information Requested	9/26/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jeanne Jacobson 1521 South Lakeshore Drive Sarasota, FL 34231	Self Writer/Researcher	9/9/00	$200.00 *
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmerked through this organi Conduit (total: $53,599.50	9/9/00	MEMO $200.00
Receipt For: [ ] Primary [ ] General [X] Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ann Jaffe 5700 N Bay Road Miami, FL 33140	Self Homemaker	9/1/00	$750.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ann Jaffe 5700 N Bay Road Miami, FL 33140	Self Homemaker	9/1/00	$250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ann Jewett 586 Sandstone Place Athens, GA 30605	Retired	9/15/00	$250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jim Joseph 2070 N. Ocean Blvd. #3 Boca Raton, FL 33431	Self Developer	9/26/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$2,000.00	

SUBTOTAL of Receipts This Page (optional) $3,450.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jim Joseph 2070 N. Ocean Blvd. #3 Boca Raton, FL 33431	Self Developer	8/29/00	$1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Gerard Kaiser 2 Grove Isle Drive No.1809 Coconut Grove, FL 33133	University of Miami Physician	9/15/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$400.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Leonard Kaplan 3809 Anderson Road Coral Gables, MA 33134	Information Requested	9/9/00	$250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mitchell Kaplan 2025 Grace Avenue Los Angeles, CA 90068	The Kaplan-Stahler Gumer Agency	8/25/00	$1,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Evelyn Katz 10185 Collins Ave., Apt. 419 Bal Harbour, FL 33154	Homemaker	9/11/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,100.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Hyman Katz 1000 East Island Blvd., #403 Aventura, FL 33180	Retired	9/8/00	$200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$450.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Shulamit Katzman 3770 NE 208 Terrace Aventura, FL 33180	Equity One Executive/CEO	9/13/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$500.00	

SUBTOTAL of Receipts This Page (optional) $4,150.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345406

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mary Ann Keenan 1672 Pembrook Road Ambler, PA 19002 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Albert Einstein Medical Center Occupation: Orthopedic Surgeon Aggregate Year-to-Date: $250.00	9/19/00	$250.00 *
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 16th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.90 Aggregate Year-to-Date: $	9/19/00	MEMO $250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ida Kirsner 34 Star Island Miami Beach, FL 33139 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Aggregate Year-to-Date: $500.00	9/26/00	$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Tammy Klein 16722 SW 78th Courth Miami, FL 33157 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Pricewaterhouse Coopers Occupation Aggregate Year-to-Date: $500.00	9/8/00	$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Helen Kotler 9801 Collins Ave., Apt. 200 Bal Harbour, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Occupation: Real Estate Broker Aggregate Year-to-Date: $1,000.00	9/8/00	$100.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Helen Kotler 9801 Collins Ave., Apt. 200 Bal Harbour, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Occupation: Real Estate Broker Aggregate Year-to-Date: $1,000.00	9/19/00	$650.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jerome Kowalski 2054 E. 67th Street Brooklyn, NY 11234 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Kowlaski & Associates, Inc. Occupation: Recruitment Counsel Aggregate Year-to-Date: $2,000.00	9/13/00 check dated 9/1/00	$1,000.00

SUBTOTAL of Receipts This Page (optional) $3,000.00

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

FE8AN07PDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerome Kowalski 2064 E. 57th Street Brooklyn, NY 11234	Kowlaski & Associates, Inc.	9/13/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Recruitment Counsel	Check dated 9/10	
	Aggregate Year-to-Date > $	$2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Julian Kreeger 2301 North Bay Road Miami Beach, FL 33140	Self	9/28/00	$300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Attorney		
	Aggregate Year-to-Date > $	$300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robin Krivanek 2802 Gaines Street Tampa, FL 33618		9/25/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired		
	Aggregate Year-to-Date > $	$350.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi	9/25/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: Conduit total: $53,599.50		
	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
Sheri Kushner 3895 Carson Avenue Cooper City, FL 33026	Information	9/11/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Requested		
	Aggregate Year-to-Date > $	$500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Anna Lane 1924 Stony Point Road Charlottesville, VA 22911	Homemaker	9/13/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation		
	Aggregate Year-to-Date > $	$250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi	9/13/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: Conduit total: $53,599.50		
	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) $2,300.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Anne Lapporte 107 Ardith Drive Orinda, CA 94563 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Aggregate Year-to-Date $250.00	9/12/00	$250.00 *
B. Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation Conduit total: $63,599.50 Aggregate Year-to-Date	9/12/00	MEMO $250.00
C. Sidney Lassen 2770 S. Ocean Blvd. Unit 203 S. Palm Beach, FL 33480 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Information Occupation Requested Aggregate Year-to-Date $1,000.00	9/1/00	$1,000.00
D. Phyllis Le Boff 3038 Miro Drive North West Palm Beach, FL 33410 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Retired Aggregate Year-to-Date $250.00	9/28/00	$100.00
E. Norman Lear 1999 Avenue of the Stars, Suite 500 Los Angeles, CA 90067 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Producer Aggregate Year-to-Date $500.00	9/20/00	$500.00
F. Suzanne Legon 6910 Talavera St Coral Gables, FL 33146 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation Requested Aggregate Year-to-Date $250.00	9/29/00	$250.00
G. Ruth Leshaw 3 Grove Isle Dr. #909 Coconut Grove, FL 33133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Aggregate Year-to-Date $300.00	9/13/00	$200.00

SUBTOTAL of Receipts This Page (optional) $2,300.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Shirlee Levin 19955 NE 38th Court #1703 Aventura, FL 33180 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self / Community Activist / $518.00	8/29/00	$100.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Shirlee Levin 19955 NE 38th Court #1703 Aventura, FL 33180 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Self / Community Activist / $518.00	8/24/00	$100.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
I. Stanley Levine 3333 Garden Ave. Miami Beach, FL 33140 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self / Attorney / $500.00	9/29/00	$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Robert Levine 136 Rosales Ct. Miami, FL 33143 Receipt For: [ ] Primary [X] General [ ] Other (specify):	* In-Kind: In-Home Exemption / $1,000.00	9/27/00	$1,000.00 *
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ilana Levitt 12280 SW 69th Place Miami, FL 33156 Receipt For: [ ] Primary [X] General [ ] Other (specify):	DF Development / Real Estate Agent / $250.00	9/29/00	$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Lipoff 3 Grove Isle Dr. #1D09 Coconut Grove, FL 33133 Receipt For: [ ] Primary [X] General [ ] Other (specify):	N/A / N/A / $450.00	9/8/00	$200.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Felice Lipton 5255 Collins Avenue Miami, FL 33140 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Community Activist / $250.00	9/11/00	$250.00

SUBTOTAL of Receipts This Page (optional)	$2,400.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lillian Lovelace 790 Bosque Road Santa Barbara, CA 93108 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $250.00	9/20/00	$250.00 *
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/20/00	MEMO $250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Daniel Lyons 13585 Rivoli Dr West Palm Beach, FL 33410 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Aggregate Year-to-Date: $1,000.00	9/22/00	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Alex Madonik 1533 Keoncrest Drive Berkeley, CA 94702 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Perkin-Elmer Corp. Occupation: Chemist/Scientist Aggregate Year-to-Date: $250.00	9/20/00	$250.00 *
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/20/00	MEMO $250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Martin Margulies 445 Grand Bay Drive, #PH-1 Key Biscayne, FL 33149 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self-Employed Occupation: Real Estate Developer Aggregate Year-to-Date: $1,000.00	9/11/00	$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Gayle Mayo 4305 Wyandotte Drive Indianapolis, IN 46220 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Indiana Municipal Power Agency Occupation: Engineer Aggregate Year-to-Date: $250.00	9/30/00	$250.00 *

SUBTOTAL of Receipts This Page (optional)	$2,250.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50	9/30/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Nancy McDonald 1317 Richards Alley Wilmington, DE 19806	Andersen Consulting Occupation: Consultant	9/19/00	$1,000.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50	9/19/00	MEMO $1,000.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Margaret McKean 1 Pintail Lane Hendersonville, NC 28792	Retired Occupation	9/26/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$250.00	
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50	9/26/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Bruce Menin 25 Broad Street New York, NY 10004	Crescent Heights Occupation: Real Estate	9/6/00 Check dated 8/29/00	$1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	$1,000.00	
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Julie Menin 25 Broad Street New York, NY 10004	Information Occupation: Requested	9/6/00 Check dated 8/29/00	$1,000.00
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	$1,000.00	

SUBTOTAL of Receipts This Page (optional) $3,250.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Harold Menowitz 10205 Collins Avenue #1508 Bal Harbour, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Real Estate Aggregate Year-to-Date $ $300.00	9/28/00	$300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Mills 11562 Lalling Ln. Fairfax Station, VA 22039 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Retired Aggregate Year-to-Date $ $1,000.00	9/11/00 Check dated 8/31/00	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jan Montgomery 942 Via Fruteria Santa Barbara, CA 93110 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Retired Retired Aggregate Year-to-Date $ $500.00	8/31/00	$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Sara Moriber 1434 W 24 St Miami Beach, FL 33140 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Community Activist Aggregate Year-to-Date $ $350.00	9/19/00	$100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard Blaise Cimoch Blaise Productions, Inc. 342 City View Drive Fort Lauderdale, FL 33311 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	* In-Kind: Event Expense Aggregate Year-to-Date $ $500.00	8/29/00	$500.00 *
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Jenny Bateman Mudge 7254 Olivetas Avenue La Jolla, CA 92037 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Homemaker Aggregate Year-to-Date $ $250.00	9/20/00	$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Holly Myers 575 Cresta Vista Lane Portola Valley, CA 94028 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Business Executive Aggregate Year-to-Date $ $250.00	9/26/00	$250.00 *

SUBTOTAL of Receipts This Page (optional)	$2,650.00
TOTAL This Period (last page this line number only)	

FE6AN0/MPDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/26/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):			
B. Mary Neff 2013 Prairie Ave. Chicago, IL 60610	Name of Employer: Occupation: Retired Aggregate Year-to-Date: $ $280.00	9/12/00	$200.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
D. Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/12/00	MEMO $200.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):			
C. Barry Nelson 200 Golden Beach Drive Golden Beach, FL 33160	Name of Employer: Self Occupation: Attorney Aggregate Year-to-Date: $ $500.00	9/15/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
E. Holmes Newman 2238 SW 27th Way Coconut Grove, FL 33133	Name of Employer: Self Occupation: Interior Designer Aggregate Year-to-Date: $ $500.00	9/8/00	$300.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
F. Holmes Newman 2238 SW 27th Way Coconut Grove, FL 33133	Name of Employer: Self Occupation: Interior Designer Aggregate Year-to-Date: $ $500.00	9/20/00	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
G. Avis Ogilvy 436 Russell Avenue Gaithersburg, MD 20877	Name of Employer: Retired Occupation: Aggregate Year-to-Date: $ $1,000.00	9/13/00	$1,000.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional) $1,950.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Conduit total: $53,599.50 Aggregate Year-to-Date $	9/13/00	MEMO $1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ellen Olson 4711 Weston Palce Jamestown, NC 27282 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Aggregate Year-to-Date $ $250.00	9/29/00	$250.00 *
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Conduit total: $53,599.50 Aggregate Year-to-Date $	9/29/00	MEMO $250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Sadie Opper 2 Grove Isle Dr. #403 Coconut Grove, FL 33133 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Retired Aggregate Year-to-Date $ $250.00	8/31/00	$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lawrence Ottinger 3106 Cummings Lane Chevy Chase, MD 20815 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	People for the American Way Lawyer Aggregate Year-to-Date $ $500.00	9/28/00	$500.00 *
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Conduit total: $53,599.50 Aggregate Year-to-Date $	9/28/00	MEMO $500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Patricia Pepper 1 Grove Isle Drive, Apt. 1501 Miami, FL 33133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Community Activist Aggregate Year-to-Date $ $300.00	9/22/00	$200.00

SUBTOTAL of Receipts This Page (optional) $1,200.00

TOTAL This Period (last page this line number only)

FE6AN07SPDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

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FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise Parent 1170 5th Avenue New York, NY 10029	American Express	9/19/00	$250.00 *
Receipt For: ☐ Primary ☒ General * ☐ Other (specify):	Occupation: Lawyer	Aggregate Year-to-Date > $	$250.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi	9/19/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: Conduit total: $53,599.50	Aggregate Year-to-Date > $	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alex Paul 2525 Pinetree Drive Miami Beach, FL 33140	Information	9/15/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Requested	Aggregate Year-to-Date > $	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harriet Paul 2525 Pinetree Drive Miami Beach, FL 33140	Information	9/15/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Requested	Aggregate Year-to-Date > $	$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ellen Poss 450 Warren Street Brookline, MA 02445	Information	9/26/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: requested	Aggregate Year-to-Date > $	$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Preston 19472 36th Court Golden Beach, FL 33160	Gerson, Preston & Co.	9/8/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: CPA	Aggregate Year-to-Date > $	$500.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Salma Rappaport 16161 NE 31st Ct. #809 Aventura, FL 33160	Retired	9/11/00	$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation:	Aggregate Year-to-Date > $	$450.00

SUBTOTAL of Receipts This Page (optional) $3,950.00

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

FE6AN07PDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 33 OF 44

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00346405

A. Full Name, Mailing Address and ZIP Code Elizabeth Ray 288 Bayview Drive Polson, MT 59860-9623 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer The Pennsylvania State University Occupation Professor Aggregate Year-to-Date > $	Date (month, day, year) 9/19/00 $250.00	Amount of Each Receipt this Period $250.00
B. Full Name, Mailing Address and ZIP Code Doris Read 414 Crestwood Court Endwell, NY 13760 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Information Occupation Requested Aggregate Year-to-Date > $	Date (month, day, year) 9/15/00 $1,000.00	Amount of Each Receipt this Period $1,000.00
C. Full Name, Mailing Address and ZIP Code Burt Rees 4668 Coralwood Circle Carlsbad, CA 92008 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Retired Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/20/00 $250.00	Amount of Each Receipt this Period $250.00 *
D. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Note: Above Contribution earmarked through this organi Occupation Conduit total: $53,599.50 Aggregate Year-to-Date > $	Date (month, day, year) 9/20/00	Amount of Each Receipt this Period MEMO $250.00
E. Full Name, Mailing Address and ZIP Code Nathan Reiber 37 Star Island Miami, FL 33139 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Self-Employed Occupation Developer Aggregate Year-to-Date > $	Date (month, day, year) 8/29/00 $500.00	Amount of Each Receipt this Period $500.00
F. Full Name, Mailing Address and ZIP Code Margaret Reuss 34 Cove Road Belvedere Tiburon, CA 94920 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > $	Date (month, day, year) 9/15/00 $250.00	Amount of Each Receipt this Period $250.00
G. Full Name, Mailing Address and ZIP Code Craig Robins Sunset Island II 2511 Lake Ave. Miami Beach, FL 33140 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer The Dacra Companies Occupation Owner Aggregate Year-to-Date > $	Date (month, day, year) 9/22/00 $1,000.00	Amount of Each Receipt this Period $1,000.00
SUBTOTAL of Receipts This Page (optional)			$3,250.00
TOTAL This Period (last page this line number only)			

FE6AN070PDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

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FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Ivelyn Robins Sunset Island II 2511 Lake Avenue Miami Beach, FL 33140 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Information / Requested / $1,000.00	9/22/00	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Scott Robins 1800 W. 24 Street Sunset Island III, FL 33140 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self / Construction Exec / $1,000.00	9/28/00	$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
James Robinson 20815 Pinar Tr. Boca Raton, FL 33433 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Gerson, Preston & Co. / CPA / $500.00	9/11/00	$500.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Alan Rosen 1800 NE 114th Street, #1711 North Miami, FL 33181 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Gerson, Preston & Co. / CPA / $500.00	9/11/00	$500.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joel Rosenthal Courthouse Express Couriers, Inc. 19 West Flagler Street Miami, FL 33130 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Courthouse Express Couriers / * In-Kind: Courier Services / Owner / $571.00	8/30/00	$19.25 *
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Joel Rosenthal Courthouse Express Couriers, Inc. 19 West Flagler Street Miami, FL 33130 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Courthouse Express Couriers / * In-Kind: Courier Services / Owner / $571.00	9/21/00	$81.00 *
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lynne Roth 2510 Lincoln Avenue Coconut Grove, FL 33133 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self / Buisness Consultant / $1,000.00	9/5/00	$1,000.00

SUBTOTAL of Receipts This Page (optional)	$4,100.25
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 35 OF 44

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00346405

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
A. Florence Rothman 311 South Wacker Drive Suite 4190 Chicago, IL 60606 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Nantor Inc. Occupation: Director Aggregate Year-to-Date: $250.00	9/29/00	$250.00 *
B. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [X] Other (specify):	Name of Employer: Note: Above Contribution earmarked through this organ Occupation: Conduit total: $53,699.50 Aggregate Year-to-Date: $	9/29/00	Amount of Each Receipt this Period: MEMO $250.00
C. Full Name, Mailing Address and ZIP Code Martin Rubin 98 Dutchmill Lane Buffalo, NY 14211 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Buffalo c/c Inc Occupation: President Aggregate Year-to-Date: $750.00	8/29/00	$300.00
D. Full Name, Mailing Address and ZIP Code David Russin 700 Lakeview Drive Miami Beach, FL 33140 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Retired Occupation: Aggregate Year-to-Date: $1,000.00	9/28/00	$1,000.00
E. Full Name, Mailing Address and ZIP Code Gloria Schusterman 7534 S. Gary Pl. Tulsa, OK 74136 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: Information Occupation: Requested Aggregate Year-to-Date: $1,000.00	9/4/00	$1,000.00
F. Full Name, Mailing Address and ZIP Code Marilyn Segal 819 S. Southlake Drive Hollywood, FL 33020 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: NOVA Southeastern University Occupation: Psychologist Aggregate Year-to-Date: $475.00	9/22/00	$125.00
G. Full Name, Mailing Address and ZIP Code Ronald Selden 13635 Deering Bay Drive, Apt. 223 Coral Gables, FL 33158 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Name of Employer: Retired Occupation: Aggregate Year-to-Date: $1,000.00	9/4/00	$1,000.00
		SUBTOTAL of Receipts This Page (optional)	$3,675.00
		TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
P. Shampaniar 8115 SW 17th Terrace Miami, FL 33155 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Retired Occupation: Retired Aggregate Year-to-Date: $250.00	8/22/00	$250.00 *
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [X] Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	8/22/00	MEMO $250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Sheloma Shawmut-Lessner 13030 SW 83rd Court Miami, FL 33156 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self Occupation: Writer/Producer Aggregate Year-to-Date: $900.00	9/13/00	$900.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lora Sherman 604 W. Connecticut Street Bellingham, WA 98225-2415 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Sea Mar Community Health Center Occupation: Physician Aggregate Year-to-Date: $250.00	9/20/00	$250.00 *
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [X] Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/20/00	MEMO $250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Carolyn Shine 4339 Westover Place NW Washington, DC 20016 Receipt For: [ ] Primary [X] General [ ] Other (specify):	retired Occupation: Aggregate Year-to-Date: $250.00	9/19/00	$150.00 *
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [X] Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/19/00	MEMO $150.00

SUBTOTAL of Receipts This Page (optional)	$1,550.00
TOTAL This Period (last page this line number only)	

FE6AN6079P.DF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Clyde Shorey 3033 West Iana Keys NW Washington, DC 20007 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation Aggregate Year-to-Date $500.00	9/19/00	$500.00 *
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation Conduit total: $53,599.50 Aggregate Year-to-Date $	9/19/00	MEMO $500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Cecily Silberman 6915 Red Road Suite 202 Coral Gables, FL 33143 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Ameritrust Real Estate Company Occupation Real Estate Broker Aggregate Year-to-Date $250.00	8/31/00	$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bren Simon 10110 Ditch Rd. Carmel, IN 46032 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	MBS Associates Occupation President Aggregate Year-to-Date $2,000.00	9/20/00	$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Bren Simon 10110 Ditch Rd. Carmel, IN 46032 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	MBS Associates Occupation President Aggregate Year-to-Date $2,000.00	9/20/00	$1,000.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Marcia Simon 3809 Anderson Road Coral Gables, FL 33134 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation Requested Aggregate Year-to-Date $250.00	9/6/00	$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mel Simon 10110 Ditch Rd. Carmel, IN 46032 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Information Occupation Requested Aggregate Year-to-Date $2,000.00	9/20/00	$1,000.00

SUBTOTAL of Receipts This Page (optional) $4,000.00

TOTAL This Period (last page this line number only)

FE6AN07PDF

SCHEDULE A — ITEMIZED RECEIPTS

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mel Simon 10110 Ditch Rd. Carmel, IN 46032 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $2,000.00	9/20/00	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lisa Sloat 1 Grove Isle Dr., #1603 Miami, FL 33133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Self Occupation: Real Estate/ PR Aggregate Year-to-Date: $450.00	9/15/00	$200.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Harry Smith 1 Grove Isle Drive, #309 Coconut Grove, FL 33133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Ruden, McClosky, et al * In-Kind: Event Expense Occupation: Attorney Aggregate Year-to-Date: $1,000.00	9/21/00	$1,000.00 *
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Joan Smith 1 Grove Isle Drive, #309 Coconut Grove, FL 33133 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Retired Occupation: Retired Aggregate Year-to-Date: $750.00	9/22/00	$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Wendell Spears 7925 S. Park Place Orlando, FL 32819 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $1,000.00	9/19/00	$1,000.00 *
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/19/00	MEMO $1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Myron Sponder 4550 N Park Avenue #708 Chevy Chase, MD 20815 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $1,000.00	9/22/00	$1,000.00

SUBTOTAL of Receipts This Page (optional) $4,450.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Steven Spander P.O. Box 1690 Boca Raton, FL 33429 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Big Pro Link.Com CEO Aggregate Year-to-Date $ $2,100.00	9/26/00	$100.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Maria Srebnick 545 NW 26th Street Miami, FL 33127 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Information Requested Aggregate Year-to-Date $ $250.00	8/31/00	$250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Margaret Staton 1639 Fernald Point Lane Santa Barbara, CA 93108 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Retired Aggregate Year-to-Date $ $1,500.00	9/28/00	$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Margaret Staton 1639 Fernald Point Lane Santa Barbara, CA 93108 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Retired Aggregate Year-to-Date $ $1,500.00	9/12/00	$500.00 *
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
MoveOn.org P.O. Box 9063 Berkeley, CA 94706- Receipt For: [ ] Primary [ ] General [X] Other (specify):	Note: Above Contribution earmarked through this organi Conduit total: $4,380.00 Aggregate Year-to-Date $	9/12/00	MEMO $500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Lotte Stein 200 Golden Isles Drive Hallandale, FL 33009 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Information Requested Aggregate Year-to-Date $ $250.00	9/29/00	$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Mary Ann Stein 5643 Bent Branch Court Bethesda, MD 20816 Receipt For: [X] Primary [ ] General [ ] Other (specify):	The Mor Aggregate Year-to-Date $ $1,000.00	9/4/00	$1,000.00

SUBTOTAL of Receipts This Page (optional) $3,100.00

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

FE8AM07PDF

SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
David Stern 4713 Yuma Street N.W. Washington, DC 20016 Receipt For: [X] Primary [ ] General [ ] Other (specify):	NAPIL Executive Director $ $1,000.00	8/24/00	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Harry Struck 6 Edgerly Place No. 505 Boston, MA 02116 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self Financial Consultant $ $500.00	9/29/00	$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Betty Sutnick 19355 Turnberry Way, Apt. 12-J Aventura, FL 33180 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Retired Retired $ $300.00	9/8/00	$200.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Richard Tolt 7403 Ventor Avenue Margate, NJ 08234 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Self Investor $ $1,000.00	9/13/00	$1,000.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Diane Troderman 172 Crestview Circle Longmeadow, MA 01106 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Retired Occupation $ $500.00	9/22/00	$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Judith Wagner 4660 S. Dahlia Littleton, CO 80121 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Wagner Investments Management Investment Advisor $ $250.00	9/19/00	$250.00 *
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Note: Above Contribution earmarked through this organi Conduit total: $53,699.50 $	9/19/00	MEMO $250.00

SUBTOTAL of Receipts This Page (optional)	$3,450.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

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FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
George Wallerstein 2604 NE 70th Street Seattle, WA 98115 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Information Occupation: Requested Aggregate Year-to-Date: $500.00	8/29/00	$500.00 *
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
PeacePac 110 Maryland Ave., NE Washington, DC 20002 Receipt For: [ ] Primary [ ] General [X] Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $825.00 Aggregate Year-to-Date: $	8/29/00	MEMO $500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Eleanor Weinstock 525 S. Flagler Dr. #12-C West Palm Beach, FL 33401 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Occupation: Retired Aggregate Year-to-Date: $300.00	9/28/00	$100.00 *
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [X] Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/26/00	MEMO $100.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Dana Weisbard 8913 Sourwood Court Indianapolis, IN 46260 Receipt For: [ ] Primary [X] General [ ] Other (specify):	USA Group Occupation: Writer Aggregate Year-to-Date: $250.00	9/13/00	$100.00 *
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: [ ] Primary [ ] General [X] Other (specify):	Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date: $	9/13/00	MEMO $100.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Michel Weisz 901 Ponce de Leon Blvd. Suite 801 Coral Gables, FL 33134 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Segredo & Weisz Occupation: Attorney Aggregate Year-to-Date: $250.00	9/26/00	$250.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

PAGE 42 OF 44

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Florence Werner 3000 Island Blvd. No. TS-3001 Aventura, FL 33160	Retired	9/26/00	$500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Retired	Aggregate Year-to-Date > $	$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Werner 3000 Island Blvd., #3001 Aventura, FL 33160	Retired	9/26/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	$1,500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shirley West 7961 SW 53rd Place Miami, FL 33143	Retired	9/20/00	$50.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation	Aggregate Year-to-Date > $	$250.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hedy Whitebook 2000 Island Blvd. No.806 Miami, FL 33160	Atlantic Holsery	9/13/00	$250.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Sales	Aggregate Year-to-Date > $	$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Janet Williamson 1611 Krista Ct. Saint Louis, MO 63131	Deaconess Hospital	9/25/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Occupational Therapist	Aggregate Year-to-Date > $	$250.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Note: Above Contribution earmarked through this organi	9/25/00	MEMO $250.00
Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Occupation: Conduit total: $53,599.50	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
Susan Wilson 4574 Province Line Road Princeton, NJ 08540	Self	9/22/00	$250.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Sexuality Educator	Aggregate Year-to-Date > $	$250.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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

FOR LINE NUMBER 11(a)(i)

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Note: Above Contribution earmarked through this organi Conduit total: $53,599.50 Aggregate Year-to-Date $	9/22/00	MEMO $250.00
B. Full Name, Mailing Address and ZIP Code Ray Ellen Yarkin 10340 W. Broadview Drive Miami Beach, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Self Employed Occupation: Lawyer Aggregate Year-to-Date $ $1,000.00	9/8/00	$1,000.00
C. Full Name, Mailing Address and ZIP Code Jerome Yavitz 1052 Kane Concourse Bay Harbor Islands, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: Information Occupation: Requested Aggregate Year-to-Date $ $300.00	9/15/00	$300.00
D. Full Name, Mailing Address and ZIP Code Sophia Yen 222 Parnassus Avenue #F San Francisco, CA 94117 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: UC San Francisco Medical School Occupation: Fellow Physician in Adolesce Aggregate Year-to-Date $ $250.00	9/19/00	$250.00 *
E. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer: Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date $	9/19/00	MEMO $250.00
F. Full Name, Mailing Address and ZIP Code Myrth York 48 Lloyd Avenue Providence, RI 02906 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer: York Resources, Inc. Occupation: Executive Aggregate Year-to-Date $ $250.00	9/5/00	$250.00 *
G. Full Name, Mailing Address and ZIP Code Emily's List 805 15th Street, NW, Suite 400 Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer: Note: Above Contribution earmarked through this organi Occupation: Conduit total: $53,599.50 Aggregate Year-to-Date $	9/5/00	MEMO $250.00

SUBTOTAL of Receipts This Page (optional)	$1,800.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Individuals/Persons

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sanford Ziff 1121 Crandon Blvd., Apt. F-605 Key Biscayne, FL 33149-2741	Ziff Plaza Associates	9/29/00	$1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation: Buisness Executive		
	Aggregate Year-to-Date > $	$1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$1,000.00
TOTAL This Period (last page this line number only)	$125,950.25

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Party Committees

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 11(b)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00346405

A. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Name of Employer * In-Kind: Media Services	Date (month, day, year) 6/28/00	Amount of Each Receipt this Period $55.00 *
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $	$3,532.25	
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$55.00
TOTAL This Period (last page this line number only)	$55.00

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

PAGE 1 OF 4

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code AFL-CIO Committee on Political Education 815 16th Street NW Washington, DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/29/00 $10,000.00	Amount of Each Receipt this Period $5,000.00
B. Full Name, Mailing Address and ZIP Code American Federation of Government Employees 80 F Street, N.W. Washington, DC 20001- Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/26/00 $1,000.00	Amount of Each Receipt this Period $1,000.00
C. Full Name, Mailing Address and ZIP Code Committee to Elect Gary L. Ackerman, Inc. P.O. Box 95 Fresh Meadows, NY 11136- Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/4/00 $1,000.00	Amount of Each Receipt this Period $1,000.00
D. Full Name, Mailing Address and ZIP Code Effective Government Committee 607 14th Street NW, Suite 800 Washington, DC 20005 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/8/00 Check dated 8/29/00 $5,000.00	Amount of Each Receipt this Period $3,000.00 *
E. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Note: Above Contribution earmarked through this organi Occupation Conduit total: $7,000.00 Aggregate Year-to-Date > $	Date (month, day, year) 9/8/00	Amount of Each Receipt this Period MEMO $3,000.00
F. Full Name, Mailing Address and ZIP Code Handgun Control 1225 Eye Street, NW Suite 1100 Washington, DC 20005- Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/6/00 Check dated 9/1/00 $5,000.00	Amount of Each Receipt this Period $2,000.00
G. Full Name, Mailing Address and ZIP Code HCA Good Government Fund One Park Plaza PO BOX 550 Nashville, TN 37202- Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/11/00 $500.00	Amount of Each Receipt this Period $500.00
SUBTOTAL of Receipts This Page (optional)			$12,500.00
TOTAL This Period (last page this line number only)			

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
IATSE Political Fund Int'l Alliance of Theatrical Stage Employees 1515 Broadway, Room 601 New York, NY 10036-		9/11/00	$2,500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$2,500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
International Brotherhood of Painters and Allied Trades—Political Action Together 1750 New York Ave. NW Washington, DC 20006-		9/1/00	$2,500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$2,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
International Union of Bricklayers & Allied Craftsman Political Action Committee 815 15th Street, NW Washington, DC 20005-		9/28/00	$1,000.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$2,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Joint Action Committee for Political Affairs P.O. Box 105 Highland Park, IL 60035		9/26/00	$500.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
L.A. PAC Congressman Henry A. Waxman 8665 Wilshire Blvd. #220 Beverly Hills, CA 90211-		9/24/00	$4,000.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$4,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MOPAC 32255 Northwestern Highway, Suite 290 Farmington Hills, MI 48334-		9/1/00	$1,500.00
Receipt For: [X] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $	$1,500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
MoveOn.Org P.O. Box 9063 Berkeley, CA 94709-	* In-Kind: Programming Fees	9/30/00	$130.90 *
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $	$2,205.21	

SUBTOTAL of Receipts This Page (optional)	$12,130.90
TOTAL This Period (last page this line number only)	

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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

PAGE 3 OF 4

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code MoveOn.Org P.O. Box 9063 Berkeley, CA 94709- Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ $2,205.21	Date (month, day, year) 9/30/00	Amount of Each Receipt this Period $2,000.00
B. Full Name, Mailing Address and ZIP Code National Air Traffic Controllers Association 1150 17th Street, NW Suite 701 Washington, DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ $4,000.00	Date (month, day, year) 9/8/00 check dated 9/1/00	Amount of Each Receipt this Period $4,000.00 *
C. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003 Receipt For: ☐ Primary ☐ General ☒ Other (specify):	Name of Employer Note: Above Contribution earmarked through this organi Occupation Conduit total: $7,000.00 Aggregate Year-to-Date > $	Date (month, day, year) 9/8/00	Amount of Each Receipt this Period MEMO $4,000.00
D. Full Name, Mailing Address and ZIP Code National Committee for an Effective Congress 122 C Street, NW, Suite 650 Washington, DC 20001 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ $5,000.00	Date (month, day, year) 9/20/00	Amount of Each Receipt this Period $2,500.00
E. Full Name, Mailing Address and ZIP Code NEA Fund for Children & Public Education 1201 16th Street, NW Suite 421 Washington, DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ $10,000.00	Date (month, day, year) 9/19/00	Amount of Each Receipt this Period $5,000.00
F. Full Name, Mailing Address and ZIP Code Office and Professional Employees International Union 1660 L Street, NW Suite 801 Washington, DC 20036 Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $ $2,500.00	Date (month, day, year) 9/8/00 check dated 9/1/00	Amount of Each Receipt this Period $2,500.00
G. Full Name, Mailing Address and ZIP Code Participation 2000 236 Massachusetts Ave., NE Suite 206 Washington, DC 20002- Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Name of Employer * In-Kind: Travel Expense Occupation Aggregate Year-to-Date > $ $381.50	Date (month, day, year) 8/30/00	Amount of Each Receipt this Period $131.50 *
SUBTOTAL of Receipts This Page (optional)			$16,131.50
TOTAL This Period (last page this line number only)			

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SCHEDULE A **ITEMIZED RECEIPTS**

Contributions from Other Political Committees

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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code Participation 2000 236 Massachusetts Ave., NE Suite 208 Washington, DC 20002-	Name of Employer * In-Kind: Volunteer Expense	Date (month, day, year) 9/15/00	Amount of Each Receipt this Period $750.00 *
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $	 $681.50	
B. Full Name, Mailing Address and ZIP Code Re-Elect Congressman Joe Moakley Committee 141 Tremont Street Boston, MA 02111-1209	Name of Employer Occupation	Date (month, day, year) 9/20/00	Amount of Each Receipt this Period $1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$2,000.00	
C. Full Name, Mailing Address and ZIP Code Service Employees International Union (SEIU) Political Campaign Committee 1313 L Street NW Washington, DC 20005	Name of Employer Occupation	Date (month, day, year) 9/26/00	Amount of Each Receipt this Period $2,500.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$7,500.00	
D. Full Name, Mailing Address and ZIP Code United Association Political Education Committee United Association of Plumbers & Pipefitters 901 Massachusetts Ave., NW Washington, DC 20001	Name of Employer Occupation	Date (month, day, year) 9/28/00	Amount of Each Receipt this Period $1,000.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$3,500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$6,250.00
TOTAL This Period (last page this line number only)	$46,012.40

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SCHEDULE A **ITEMIZED RECEIPTS**

Loans Made or Guaranteed by the Candidate

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

PAGE 1 OF 1

FOR LINE NUMBER 13(a)

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code
Rep. Elaine Bloom
5255 Collins Avenue
Miami Beach, FL 33140

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

Name of Employer | Occupation | Aggregate Year-to-Date > $ $183,443.79

Date (month, day, year): 9/15/00

Amount of Each Receipt this Period: $160,000.00

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)	$160,000.00
TOTAL This Period (last page this line number only)	$160,000.00

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SCHEDULE A **ITEMIZED RECEIPTS**

Offsets to Operating Expenditures

(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)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code Bell South PO Box 33009 Charlotte, NC 28243	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 9/13/00 $426.43	Amount of Each Receipt this Period $0.34
Receipt For: ☐ Primary ☒ General ☐ Other (specify):			
B. Full Name, Mailing Address and ZIP Code The Tyson Organization 1000 Macon Street, Suite 300 Fort Worth, TX 76102	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year) 8/24/00 $1,869.64	Amount of Each Receipt this Period $1,869.64
Receipt For: ☒ Primary ☐ General ☐ Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):			

SUBTOTAL of Receipts This Page (optional)	$1,869.98
TOTAL This Period (last page this line number only)	$1,869.98

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SCHEDULE A **ITEMIZED RECEIPTS**

Other Receipts

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

PAGE 1 OF 1

FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code AmTrust Bank 447 Arthur Godrey Road Miami Beach, FL 33140	Name of Employer * Occupation	Date (month, day, year) 9/24/00	Amount of Each Receipt this Period $5,001.66
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$5,001.66	
B. Full Name, Mailing Address and ZIP Code City National Bank 300 71st Street Miami Beach, FL 33141	Name of Employer * Occupation	Date (month, day, year) 9/30/00	Amount of Each Receipt this Period $129.72
Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-to-Date > $	$18,877.21	
C. Full Name, Mailing Address and ZIP Code City National Bank 300 71st Street Miami Beach, FL 33141	Name of Employer * Occupation	Date (month, day, year) 8/31/00	Amount of Each Receipt this Period $148.08
Receipt For: ☒ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $	$18,877.21	
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	$5,279.66
TOTAL This Period (last page this line number only)	$5,279.66

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 / 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Aaron Rents, Inc. 7101 Coral Way Miami, FL 33155	Furniture rental Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/1/00	$56.89
B. Aaron Rents, Inc. 7101 Coral Way Miami, FL 33155	Furniture rental Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/18/00	$125.74
C. Aaron Rents, Inc. 7101 Coral Way Miami, FL 33155	Furniture Rental Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/22/00	$56.89
D. AT&T Cable Services 18601 NW 2nd Ave. Miami, FL 33169	Cable Service Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/22/00	$99.33
E. AT&T Cable Services 18601 NW 2nd Ave. Miami, FL 33169	Cable Service Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/18/00	$99.33
F. AT&T Wireless Services P.O. Box 129 Newark, NJ 07101	Telephone expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	8/27/00	$789.69
G. AT&T P.O. Box 16730 Mesa, AZ 85211	Telephone Expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/1/00	$1,653.90
H. Bell South PO Box 33009 Charlotte, NC 28243	Telephone Expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/1/00	$537.98
I. Bell South PO Box 33009 Charlotte, NC 28243	Telephone Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/22/00	$1,018.73
SUBTOTAL of Disbursements This Page (optional)			$4,438.38
TOTAL This Period (last page this line number only)			

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Broward County AFL-CIO 4520 SW 12th Street Fort Lauderdale, FL 33317	Dinner Tickets Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/18/00	$425.00
B. Full Name, Mailing Address and ZIP Code City National Bank 300 71st Street Miami Beach, FL 33141	Purpose of Disbursement Service Charge Disbursement for: [x] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 8/28/00	Amount of Each Disbursement This Period $20.00
C. Full Name, Mailing Address and ZIP Code City National Bank 300 71st Street Miami Beach, FL 33141	Purpose of Disbursement Service Charge Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/12/00	Amount of Each Disbursement This Period $20.00
D. Full Name, Mailing Address and ZIP Code City of Hollywood Utility Building Service 2600 Hollywood Blvd Room 103 Hollywood, FL 33020	Purpose of Disbursement Utilities Disbursement for: [x] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 9/1/00	Amount of Each Disbursement This Period $168.17
E. Full Name, Mailing Address and ZIP Code City of Hollywood Utility Building Service 2600 Hollywood Blvd Room 103 Hollywood, FL 33020	Purpose of Disbursement Utilities Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/22/00	Amount of Each Disbursement This Period $63.49
F. Full Name, Mailing Address and ZIP Code CopyMax 3900 Oakwood Blvd. Hollywood, FL	Purpose of Disbursement Copies Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/23/00	Amount of Each Disbursement This Period $686.66
G. Full Name, Mailing Address and ZIP Code Crounse, Malchow and Schlackman 1400 I Street NW, Suite 650 Washington, DC 20005	Purpose of Disbursement Mail expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/27/00	Amount of Each Disbursement This Period $5,767.00
H. Full Name, Mailing Address and ZIP Code Crounse, Malchow and Schlackman 1400 I Street NW, Suite 650 Washington, DC 20005	Purpose of Disbursement Mail expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/18/00	Amount of Each Disbursement This Period $28,492.62
I. Full Name, Mailing Address and ZIP Code Crounse, Malchow and Schlackman 1400 I Street NW, Suite 650 Washington, DC 20005	Purpose of Disbursement Mail expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/18/00	Amount of Each Disbursement This Period $35,428.60

SUBTOTAL of Disbursements This Page (optional)	$71,071.96
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345406

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Democratic Congressional Campaign Committee 430 South Capitol Street Washington, DC 20003	Media Services Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/28/00	$55.00 * * in-kind received
B. Democrats.com 500 East 77th Street Apt. 1423 New York, NY 10021	Credit card fee Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/24/00	$22.50
C. Democrats.com 500 East 77th Street Apt. 1423 New York, NY 10021	Credit card fee Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/29/00	$8.25
D. Democrats.com 500 East 77th Street Apt. 1423 New York, NY 10021	Credit card fee Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/10/00	$127.50
E. Democrats.com 500 East 77th Street Apt. 1423 New York, NY 10021	Credit Card Fee Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9/3/00	$1.67
F. Democrats.com 500 East 77th Street Apt. 1423 New York, NY 10021	Credit Card Fee Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/19/00	$158.32
G. Democrats.com 500 East 77th Street Apt. 1423 New York, NY 10021	Credit Card Fee Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/28/00	$15.00
H. Democrats.com 500 East 77th Street Apt. 1423 New York, NY 10021	Credit card fee Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/17/00	$78.75
I. Diplomat Resort Country Club & Spa 501 Diplomat Parkway Hallandale Beach, FL 33019	Event expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/22/00	$250.00
SUBTOTAL of Disbursements This Page (optional)			$717.19
TOTAL This Period (last page this line number only)			

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Effective Strategies 426 North Saint Asaph Street Alexandria, VA 22314	Consulting Fees Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/5/00	$1,000.00
B. EMILY's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Credit Card fee Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/17/00	$10.89
C. EMILY's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Credit Card Fee Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/24/00	$33.03
D. EMILY's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Mailing expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/25/00	$8,612.00
E. EMILY's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Credit Card Fee Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/27/00	$2.39
F. EMILY's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Credit Card Fee Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/3/00	$1.69
G. EMILY's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Credit Card Fee Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/10/00	$41.71
H. EMILY's List 805 15th Street, NW, Suite 400 Washington, DC 20005	Credit Card Fee Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/30/00	$25.65
I. FL Dept of Revenue 235 Carlton Building Tallahassee, FL 32399	Taxes Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/16/00	$356.00
SUBTOTAL of Disbursements This Page (optional)			$8,083.36
TOTAL This Period (last page this line number only)			

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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

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Florida Power & Light Company P.O. Box 025576 Miami, FL 33102	Utilities Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/18/00	$216.89
B. Full Name, Mailing Address and ZIP Code Florida Power & Light Company P.O. Box 025576 Miami, FL 33102	Purpose of Disbursement Utilities Disbursement for: [x] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 8/25/00	Amount of Each Disbursement This Period $175.00
C. Full Name, Mailing Address and ZIP Code Florida Power & Light Company P.O. Box 025576 Miami, FL 33102	Purpose of Disbursement Utilities Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/22/00	Amount of Each Disbursement This Period $202.98
D. Full Name, Mailing Address and ZIP Code Fortunet Systems, Inc. 3050 Biscayne Blvd., Suite 1006 Miami, FL 33137	Purpose of Disbursement computer parts Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/22/00	Amount of Each Disbursement This Period $62.54
E. Full Name, Mailing Address and ZIP Code Fortunet Systems, Inc. 3050 Biscayne Blvd., Suite 1006 Miami, FL 33137	Purpose of Disbursement Computer service Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/7/00	Amount of Each Disbursement This Period $345.00
F. Full Name, Mailing Address and ZIP Code Good Catch Custom 121 West 27th Street #1003-B New York, NY 10001	Purpose of Disbursement campaign materials Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/22/00	Amount of Each Disbursement This Period $1,564.00
G. Full Name, Mailing Address and ZIP Code Governor Ann Richards 98 San Jacinto, Suite 1440 Austin, TX 78701	Purpose of Disbursement Travel expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/27/00	Amount of Each Disbursement This Period $570.00
H. Full Name, Mailing Address and ZIP Code Hamilton Beattie & Staff 309 1/2 Center Street Fernandina Beach, FL 32034	Purpose of Disbursement Polling expense Disbursement for: [x] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 9/27/00	Amount of Each Disbursement This Period $5,750.00
I. Full Name, Mailing Address and ZIP Code Internal Revenue Service Atlanta, 39901	Purpose of Disbursement Payroll Taxes Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/16/00	Amount of Each Disbursement This Period $2,338.76
SUBTOTAL of Disbursements This Page (optional)			$11,225.17
TOTAL This Period (last page this line number only)			

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 6 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Lightcap Studio 2800 N. Military Trail Suite 104 West Palm Beach, FL 33409	Photography Service Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/18/00	$550.00
B. MBNA America P.O. Box 15137 Wilmington, DE 19886	Credit card payment Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/25/00	$1,025.72
C. MBNA America P.O. Box 15137 Wilmington, DE 19886	Credit card payment Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/22/00	$3,027.41
D. MoveOn.Org P.O. Box 9063 Berkeley, CA 94709-	Programming Fees Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/30/00	$130.90 * * in-kind received
E. MoveOn.Org P.O. Box 9063 Berkeley, CA 94709-	Credit Card Fees Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/30/00	$88.77
F. MoveOn.Org P.O. Box 9063 Berkeley, CA 94709-	Credit Card Fees Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9/5/00	$8.23
G. Mr. Harry B. Smith 1 Grove Isle Drive, #309 Coconut Grove, FL 33133	Event Expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/21/00	$1,000.00 * * in-kind received
H. Mr. Jeffrey Garcia 401 SW 125 Ave Miami, FL 33184	Payroll Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/16/00	$1,736.75
I. Mr. Jeffrey Garcia 401 SW 125 Ave Miami, FL 33184	Payroll Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9/1/00	$1,736.75
		SUBTOTAL of Disbursements This Page (optional)	$9,300.53
		TOTAL This Period (last page this line number only)	

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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

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Mr. Jeffrey Garcia 401 SW 125 Ave Miami, FL 33184	Reimbursable Expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/16/00	$310.00
B. Mr. Joel Rosenthal Courthouse Express Couriers, Inc. 19 West Flagler Street Miami, FL 33130	Courier Services Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/30/00	$19.25 * * in-kind received
C. Mr. Joel Rosenthal Courthouse Express Couriers, Inc. 19 West Flagler Street Miami, FL 33130	Courier Services Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/21/00	$81.00 * * In-kind received
D. Mr. Jon Hutchins Media Strategies and Research 445 Union Blvd. Lakewood, CO 80228	Media Buy Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/22/00	$194,000.00
E. Mr. Jon Hutchins Media Strategies and Research 445 Union Blvd. Lakewood, CO 80228	Media Buy Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/29/00	$165,000.00
F. Mr. Jon Hutchins Media Strategies and Research 445 Union Blvd. Lakewood, CO 80228	Media Buy Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/18/00	$32,000.00
G. Mr. Jon Hutchins Media Strategies and Research 445 Union Blvd. Lakewood, CO 80228	Media Buy Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/12/00	$30,000.00
H. Mr. Richard Blaise Cimoch Blaise Productions, Inc. 342 City View Drive Fort Lauderdale, FL 33311	Event Expense Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/28/00	$500.00 * * in-kind received
I. Mr. Robert Levine 136 Rosales Ct. Miami, FL 33143	In-Home Exemption Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/27/00	$1,000.00 * * In-kind received.
		SUBTOTAL of Disbursements This Page (optional)	$422,910.25
		TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 8 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Mr. Tom Erickson Erickson & Company 38 Ivy Street, SE Washington, DC 20003	Consulting fees Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/18/00	$2,029.29
B. Mr. Tom Erickson Erickson & Company 38 Ivy Street, SE Washington, DC 20003	Consulting fee Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/22/00	$2,060.05
C. Ms. Amy Andryszak 5680 Pine Tree Drive Miami Beach, FL 33140	Payroll' Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/16/00	$592.50
D. Ms. Amy Andryszak 5680 Pine Tree Drive Miami Beach, FL 33140	Payroll Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9/1/00	$592.50
E. Ms. Amy Andryszak 5680 Pine Tree Drive Miami Beach, FL 33140	Reimbursable Expense Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9/1/00	$275.00
F. Ms. Amy Andryszak 5680 Pine Tree Drive Miami Beach, FL 33140	Reimbursable expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/16/00	$347.00
G. Ms. Angeles Bellon 9760 SW 74th Street Miami, FL 33173	Data Services Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/16/00	$462.00
H. Ms. Angeles Bellon 9760 SW 74th Street Miami, FL 33173	Data Services Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/5/00	$528.00
I. Ms. Angeles Bellon 9760 SW 74th Street Miami, FL 33173	Data Services Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/25/00	$544.00

SUBTOTAL of Disbursements This Page (optional)	$7,430.34
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 9 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Ms. Jane Hickle 98 San Jacinto, Suite 1440 Austin, TX 78701	Travel expense Disbursement for: Primary [X] General [ ] Other (specify)	9/27/00	$869.00
B. Ms. Robbie Dockswell 2204 Bay Drive Pompano Beach, FL 33062	Event Expense Disbursement for: Primary [X] General [ ] Other (specify)	9/6/00	$721.00 * * in-kind received
C. Ms. Roz Carbanaro 309 SE 7th Avenue Deerfield Beach, FL 33441	Catering Service Disbursement for: Primary [X] General [ ] Other (specify)	8/23/00	$475.00
D. Murphy Putnam Media 901 North Washington Street, Suite 500 Alexandria, VA 22314	Media Serivces Disbursement for: Primary [X] General [ ] Other (specify)	9/27/00	$10,000.00
E. Murphy Putnam Media 901 North Washington Street, Suite 500 Alexandria, VA 22314	Media Services Disbursement for: Primary [X] General [ ] Other (specify)	9/1/00	$2,500.00
F. Nation's Bank 1501 Pennsylvania Ave. NW Washington, DC 20005	Bank Fee Disbursement for: Primary [X] General [ ] Other (specify)	9/5/00	$5.00
G. Nation's Bank 1501 Pennsylvania Ave. NW Washington, DC 20005	Bank Fee Disbursement for: Primary [ ] General [X] Other (specify)	9/29/00	$67.00
H. Participation 2000 236 Massachusetts Ave., NE Suite 206 Washington, DC 20002-	Volunteer Expense Disbursement for: Primary [ ] General [X] Other (specify)	9/15/00	$750.00 * * in-kind received
I. Participation 2000 236 Massachusetts Ave., NE Suite 206 Washington, DC 20002-	Travel Expense Disbursement for: Primary [X] General [ ] Other (specify)	8/30/00	$131.50 * * in-kind received
SUBTOTAL of Disbursements This Page (optional)			$16,538.50
TOTAL This Period (last page this line number only)			

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 10 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Precision Copier Service, Inc. 5823 NW 74th Ave. Miami, FL 33166	Copier Service Disbursement for: Primary [x] General [ ] Other (specify)	9/22/00	$436.65
B. Premiere Technologies, Inc. One Industrial Way West, Bldg. D Eatontown, NJ 07724	Blast fax services Disbursement for: Primary [x] General [ ] Other (specify)	9/16/00	$483.47
C. Radisson Hotel & Resort 181 Ocean Ave. Palm Beach Shores, FL	Event expense Disbursement for: Primary [x] General [ ] Other (specify)	9/21/00	$312.48
D. Rep. Sally Heyman 1060 NE 181 Street North Miami Beach, 33179	Yard Signs Disbursement for: Primary [x] General [ ] Other (specify)	9/31/00	$1,000.00 * * in-kind received
E. Rep. Sally Heyman 1060 NE 181 Street North Miami Beach, 33179	Yard Signs Disbursement for: Primary [ ] General [x] Other (specify)	9/15/00	$800.00 * * in-kind received
F. Seitlin P.O. Box 025220 Miami, FL 33102-5220	Insurance Disbursement for: Primary [x] General [ ] Other (specify)	9/22/00	$1,038.26
G. Union Printing 2321 Pembroke Road Hollywood, FL 33020	Printing expense Disbursement for: Primary [x] General [ ] Other (specify)	8/25/00	$2,976.53
H. Union Printing 2321 Pembroke Road Hollywood, FL 33020	Printing Expense Disbursement for: Primary [x] General [ ] Other (specify)	9/1/00	$3,030.32
I. Union Printing 2321 Pembroke Road Hollywood, FL 33020	Printing expense Disbursement for: Primary [x] General [ ] Other (specify)	9/22/00	$2,440.12
SUBTOTAL of Disbursements This Page (optional)			$12,517.83
TOTAL This Period (last page this line number only)			

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 11 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. United Parcel Service P.O. Box 505820 The Lakes, NV 88905-5820	Shipping services Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/22/00	$15.19
B. United Parcel Service P.O. Box 505820 The Lakes, NV 88905-5820	Shipping Services Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/16/00	$37.51
C. United Parcel Service P.O. Box 505820 The Lakes, NV 88905-5820	Shipping Services Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/16/00	$9.82
D. United Parcel Service P.O. Box 505820 The Lakes, NV 88905-5820	Shipping service Disbursement for: [x] Primary [ ] General [ ] Other (specify)	9/1/00	$30.63
E. United Parcel Service P.O. Box 505820 The Lakes, NV 88905-5820	Shipping services Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/25/00	$141.81
F. United Parcel Service P.O. Box 505820 The Lakes, NV 88905-5820	Shipping services Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/25/00	$77.20
G. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage expense Disbursement for: [x] Primary [ ] General [ ] Other (specify)	8/30/00	$330.00
H. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/25/00	$330.00
I. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage Expense Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/14/00	$330.00
SUBTOTAL of Disbursements This Page (optional)			$1,302.16
TOTAL This Period (last page this line number only)			

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 12 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage Expense Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/13/00	$495.00
B. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage Expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/5/00	$495.00
C. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/1/00	$400.00
D. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/28/00	$99.00
E. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage Expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/24/00	$363.00
F. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage Expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/21/00	$128.76
G. United States Postal Service Hollywood Branch Hollywood, FL 33020	Postage expense Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/1/00	$495.00
H. Video Monitoring Services 2125 Biscayne Blvd., Suite 540 Miami, FL 33137	News Monitoring Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/5/00	$102.08
I. Video Monitoring Services 2125 Biscayne Blvd., Suite 540 Miami, FL 33137	News Monitoring Disbursement for: [X] Primary [ ] General [ ] Other (specify)	8/25/00	$303.20
SUBTOTAL of Disbursements This Page (optional)			$2,881.03
TOTAL This Period (last page this line number only)			

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 13 OF 13

FOR LINE NUMBER 17

Operating Expenditures

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code Wilson Atkinson 1946 Tyler Street Hollywood, FL 33021	Purpose of Disbursement Rent Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 9/6/00	Amount of Each Disbursement This Period $1,050.00
B. 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
C. 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
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)	$1,050.00
TOTAL This Period (last page this line number only)	$568,476.70

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 20(a)

Refunds of Contributions to Individuals

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Ms. Margaret Staton 1639 Femald Point Lane Santa Barbara, CA 93106	Refund Disbursement for: [ ] Primary [x] General [ ] Other (specify)	9/30/00	$500.00
B. 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
C. 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
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)	$500.00
TOTAL This Period (last page this line number only)	$500.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21

Other Disbursements

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

NAME OF COMMITTEE (In Full)

Elaine Bloom for Congress C00345405

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Nation's Bank 1501 Pennsylvania Ave. NW Washington, DC 20005	Return Item Chargeback Disbursement for: [X] Primary [ ] General [ ] Other (specify)	9/5/00	$25.00
B. 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
C. 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
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)	$25.00
TOTAL This Period (last page this line number only)	$25.00

FE5AN078PDF

SCHEDULE C
(Revised 3/90)

LOANS

Page 1 of 2 for LINE NUMBER 10
(Use separate schedules for each numbered line)

Loans owed by the Committee

Name of Committee (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Rep. Elaine Bloom 5255 Collins Avenue Miami Beach, FL 33140	$160,000.00	$0.00	$160,000.00

Election: ☐ Primary ☒ General ☐ Other (specify):

Terms: Date Incurred 9/15/00 Date Due 1/1/01 Interest Rate 0 %(apr) ☐Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Rep. Elaine Bloom 5255 Collins Avenue Miami Beach, FL 33140	$5,100.00	$0.00	$5,100.00

Election: ☒ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred 6/30/99 Date Due 1/1/01 Interest Rate 0 %(apr) ☐Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FEC/FP/FP/DF

SCHEDULE C
(Revised 3/90)

LOANS

Page 2 of 2 for LINE NUMBER 10
(Use separate schedules for each numbered line)

Loans owed by the Committee

Name of Committee (In Full)

Elaine Bloom for Congress C00345405

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Rep. Elaine Bloom 5255 Collins Avenue Miami Beach, FL 33140	$96,000.00	$0.00	$96,000.00

Election: ☒ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred 6/30/99 Date Due 1/1/01 Interest Rate 0 %(apr) ☐Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Rep. Elaine Bloom 5255 Collins Avenue Miami Beach, FL 33140	$4,000.00	$0.00	$4,000.00

Election: ☒ Primary ☐ General ☐ Other (specify):

Terms: Date Incurred 5/4/99 Date Due 1/1/01 Interest Rate 0 %(apr) ☐Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

SUBTOTALS This Period This Page (optional)	
TOTALS This Period (last page in this line only)	$285,100.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FEC FORM 3

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

☑	Hand Delivered	Date of Receipt 10/14/00 POSTMARKED
☐	First Class Mail	
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	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
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SB
PREPARER

10/14/00
DATE PREPARED

(6/2000)