

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (see full) _____ C00010488 060297 P 224 JEANETTE BELLO WOMEN FOR 8913 WEST OLYMPIC BLVD BEVERLY HILLS CA 90211	RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM AUG 3 1 12 PM '97
2. FEC IDENTIFICATION NUMBER C 000 10488	
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	

4. TYPE OF REPORT

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

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

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

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/97</u> through <u>6/30/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 48,467.56
(b) Cash on Hand at Beginning of Reporting Period	\$ 48,467.56	
(c) Total Receipts (from Line 19)	\$ 48,853.50	\$ 48,853.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 97,321.06	\$ 97,321.06
7. Total Disbursements (from Line 30)	\$ 40,615.46	\$ 40,615.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 56,705.60	\$ 56,705.60
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	

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

Jeanette Bello

Signature of Treasurer

Jeanette Bello

Date

July 21, 1997

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

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FEC FORM 3X

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE WOMEN FOR:		REPORT COVERING PERIOD FROM 1/1/97 TO 6/30/97	
		COLUMN A Total/Period	COLUMN B Calendar
Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
I. Itemized (use Schedule A)		6,975.00	6,975.00
II. Unitemized		41,289.00	41,289.00
III. Total (add I and II) >		48,264.00	48,264.00
b. Political Party Committees		-0-	-0-
c. Other Political Committees (such as PACs)		-0-	-0-
d. Total Contributions (add a II, b and c) >		48,264.00	48,264.00
12. Transfers From Affiliated/Other Party Committees		-0-	-0-
13. All Loans Received		-0-	-0-
14. Loan Repayments Received		-0-	-0-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		-0-	-0-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		-0-	-0-
17. Other Federal Receipts (Dividends, Interest, etc.)		589.50	589.50
18. Transfers from Nonfederal Account for Joint Activity		-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		48,853.50	48,853.50
20. Total Federal Receipts (subtract line 18 from line 19) >		48,853.50	48,853.50
Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share		n/a	
II. Non-Federal Share		n/a	
b. Other Federal Operating Expenditures		31,955.46	31,955.46
c. Total Operating Expenditures (add a I, a II, and b) >		31,955.46	31,955.46
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		1,000.00	1,000.00
24. Independent Expenditures (use Schedule E)		-0-	-0-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		-0-	-0-
26. Loan Repayments Made		-0-	-0-
27. Loans Made		-0-	-0-
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		-0-	-0-
b. Political Party Committees		-0-	-0-
c. Other Political Committees (such as PACs)		-0-	-0-
d. Total Contribution Refunds (add a, b and c) >		-0-	-0-
29. Other Disbursements Contributions, including Non-Fed Card		7,660.00	7,660.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		40,615.46	40,615.46
31. Total Federal Disbursements (subtract line 21 a II from line 30) >		40,615.46	40,615.46
Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		48,264.00	48,264.00
33. Total Contribution Refunds (from line 28d)		-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32)		48,264.00	48,264.00
35. Total Federal Operating Expenditures (add 21 a I and 21 b) >		31,955.46	31,955.46
36. Offsets to Operating Expenditures (from line 15)		-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) >		31,955.46	31,955.46

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11a1

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)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Susan Adelman 329 23rd Street Santa Monica, CA 90402	RETIRE	3/31/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Occupation	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
Mary Aidlin 2650 Carman Crest Drive Los Angeles, CA 90068	RETIRE	5/1/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Elaine Attias 527 N. Elm Drive Beverly Hills, CA 90210	RETIRE	1/29/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Sandra Brown 1077B Weyburn Avenue Los Angeles, CA 90024	RETIRE	1/14/97 3/31/97	100.00 270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Occupation	Aggregate Year-to-Date > \$ 370.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Daly 256 Copa De Oro Road Los Angeles, CA 90077	RETIRE	1/21/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Mary Dean 1323 Berea Place Pacific Palisades, CA 90272	RETIRE	2/19/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Alice Elconin 4661 Vista de Oro Avenue Woodland Hills, CA 91364	RETIRE	6/9/97 7/10/97	50.00 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Occupation	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)

11,870.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Fisher 13841 Valley Vista Blvd. Sherman Oaks, CA 91423	RETIREED	1/20/97	225.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 225.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elli Golub 359 Veteran Avenue Los Angeles, CA 90024	RETIREED	2/15/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Myrna Greenberg 1120 Fifth Avenue New York, NY 10128	Self ATTORNEY	1/27/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Judy & Sam Hellinger 1670 San Remo Drive Pacific Palisades, CA 90272	RETIREED	4/14/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Herbert Horvitz 565 Chalette Drive Beverly Hills, CA 90210	RETIREED	1/27/97 3/27/97 3/31/97	100.00 45.00 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 395.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail O'Neill 413 Sycamore Road Santa Monica, CA 90402	Self ATTORNEY	1/14/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Joan Palevsky 1546 Easley Avenue Los Angeles, CA 90024	RETIREED	1/22/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional) 2,120.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mimi Roth 3809 Rhodes Avenue Studio City, CA 91604	Self Occupation: WRITER	1/28/97	330.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 330.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
June & Samuel Sale 1455 Oriole Drive Los Angeles, CA 90069	Retired	1/11/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Alice Schechter 13200 Haney Place Los Angeles, CA 90049	Retired	2/10/97 7/8/97	50.00 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Selma Seligman 218 So. Thurston Avenue Los Angeles, CA 90049	Retired	1/10/97 3/24/97	250.00 90.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 340.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Betty Sheinbaum 345 North Rockingham Avenue Los Angeles, CA 90049	Artist	1/27/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	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
Florence Tenkin 16909 Strawberry Drive Encino, CA 91436	Retired	1/20/97	335.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 335.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rita Williams 435 Layton Way Los Angeles, CA 90049	Retired	1/15/97 4/7/97	50.00 180.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Aggregate Year-to-Date > \$ 230.00		

SUBTOTAL of Receipts This Page (optional) 1,985.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joanne Woodward 1120 5th Avenue New York, NY 10128 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Self Occupation: Actress	2/13/97	500.00
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
Peg Yorkin 2176 Century Hill Los Angeles, CA 90067 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Education	Self Occupation: Producer	5/1/97	500.00
Aggregate Year-to-Date > \$ 500.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) 1,000.00

TOTAL This Period (last page this line number only) 6,975.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doreen McGinnis 3317 Helms Ave Culver City, CA 90232	Salary & EIC	1/2/97	404.48
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	1/2/97	50.00
	<input type="checkbox"/> Other (specify)	1/15/97	405.48
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	1/15/97	50.00
	<input type="checkbox"/> Other (specify)	1/29/97	405.48
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	1/29/97	50.00
	<input type="checkbox"/> Other (specify)		
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	2/13/97	405.48
	<input type="checkbox"/> Other (specify)	2/13/97	50.00
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	2/27/97	405.48
	<input type="checkbox"/> Other (specify)		
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	2/27/97	50.00
	<input type="checkbox"/> Other (specify)	3/10/97	50.00
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	3/13/97	405.48
	<input type="checkbox"/> Other (specify)		
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	3/27/97	405.48
	<input type="checkbox"/> Other (specify)	3/27/97	50.00
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	4/10/97	405.48
	<input type="checkbox"/> Other (specify)		
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	4/10/97	50.00
	<input type="checkbox"/> Other (specify)	4/24/97	50.00
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	4/28/97	405.48
	<input type="checkbox"/> Other (specify)		
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/8/97	50.00
	<input type="checkbox"/> Other (specify)	5/8/97	400.58
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/22/97	405.48
	<input type="checkbox"/> Other (specify)		
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/22/97	50.00
	<input type="checkbox"/> Other (specify)	6/5/97	405.48
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	6/5/97	50.00
	<input type="checkbox"/> Other (specify)		
Ditto	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	6/19/97	405.48
	<input type="checkbox"/> Other (specify)	6/19/97	50.00
Ditto	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	6/19/97	50.00
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 5965.34

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 4
FOR LINE NUMBER
21b

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NAME OF COMMITTEE (In Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Doreen McGinnis 3317 Helms Ave Culver City CA 90232	Salary & Severance Pay	6/19/97	200.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/97	360.06
Lucie Bava 2946 Motor Ave Los Angeles CA 90064	Reimb, Off. Expense	1/22/97	20.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/23/97 6/04/97	235.08 27.00
Ditto	Salary	1/29/97	717.28
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/27/97 3/27/97	717.28 717.28
Ditto	Salary	4/28/97	717.28
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/27/97 6/19/97	717.28 717.28
Ditto	Reimb, Fare to Sacramento	6/19/97	183.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Jacobs Audio Visual Systems, Inc. 594 Beckford Ave Terzana, CA 91356	Rental of VCR for meeting	3/17/97	515.48
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Jeanette Bello 1950 S. Beverly Glen #303 Los Angeles, CA 90025	Reimb off. supplies	1/10/97	6.12
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/10/97	62.97
Ditto	Reimb, Postage	1/23/97	13.98
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Ditto	Year-end report prep-fee	4/10/97	700.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

6627.37

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 4
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Marvin Kaufmann 1167 S. Roxbury Dr., #108 Los Angeles, CA 90035	Reimb. purchase of gifts for speakers at meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/97	275.40
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mary Dean 1323 Barea Place Pacific Palisades, CA 90272	Supplies Reimb, Postage and Office Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/5/97 3/18/97 4/14/97	1040.00 640.00 175.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ditto	Ditto Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/97 5/7/97 5/12/97	111.29 96.00 219.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ditto	Reimb Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/19/97	16.03
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Office Depot 2231 S. Earrington Ave Los Angeles CA 90064	Purchase of new Copier Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/6/97	1105.37
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pacific Bell 611 Wilshire Blvd., #902 Los Angeles, CA 90017	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/7/97 1/29/97 3/3/97	115.66 78.77 84.72
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ditto	Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/9/97 4/24/97 6/02/97	91.10 96.35 84.02
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Phones USA 2180 Westwood Blvd. Los Angeles, CA 90025	Rental of phone equipment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/5/97 4/9/97 6/10/97	140.62 140.62 140.62
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Riviera Country Club 1250 Capri Dr. Pacific Palisades, CA 90272	Rental & Luncheon for Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/5/97 4/14/97	1,000.00 3,958.50

SUBTOTAL of Disbursements This Page (optional) 9609.57

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Philip Bartmasser 8913 W Olympic Blvd Beverly Hills, CA 90211	Rent	1/10/97	750.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	2/12/97	750.00
	<input type="checkbox"/> Other (specify)	3/10/97	750.00
Ditto	Rent	4/7/97	750.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/5/97	750.00
	<input type="checkbox"/> Other (specify)	6/10/97	750.00
PIP 9401 Venice Blvd. Culver City CA 90232	Printing	3/10/97	49.49
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	4/21/97	869.35
	<input type="checkbox"/> Other (specify)	4/21/97	(363.00)Refund
Ditto	Printing	6/2/97	85.59
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
US Postmaster 470 N. Canon Dr. Beverly Hills CA 90210	Postage	4/28/97	160.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/14/97	60.00
	<input type="checkbox"/> Other (specify)	6/02/97	83.00
Wells Fargo Bank 9601 Wilshire Blvd Beverly Hills CA90210	Payroll Withholding	2/6/97	244.18
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	2/27/97	218.62
	<input type="checkbox"/> Other (specify)	3/27/97	218.62
Ditto	Ditto	4/30/97	218.62
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/27/97	217.76
	<input type="checkbox"/> Other (specify)		
Ditto	Chkbook Printing & BankChg	4/10/97	79.73
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	6/19/97	3.00
	<input type="checkbox"/> Other (specify)		
Wissink Insurance 11268 Washington Blvd., #301 Culver City CA 90230	Insurance	2/12/97	1454.31
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	8099.19
TOTAL This Period (last page this line number only)	30,301.47

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Barbara Boxer ID# 279315 P.O. Box 641751 Los Angeles, CA 90064	Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/3/97	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$ 1,000.00

TOTAL This Period (last page this line number only)

1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Bridge the Gap 1637 Butler Avenue, #203 Los Angeles, CA 90025	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/14/97	1,000.00
B. Full Name, Mailing Address and ZIP Code Ocean Park Community Center 211 Hill Street Santa Monica, CA 90405	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/5/97	200.00
C. Full Name, Mailing Address and ZIP Code Daybreak 211 Hill Street Santa Monica, CA 90405	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/5/97	100.00
D. Full Name, Mailing Address and ZIP Code Women For: Orange County 21 Whitman Court Irvine, CA 92612	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/24/97	50.00
E. Full Name, Mailing Address and ZIP Code Friends Outside 464 E. Walnut Street Pasadena, CA 91101	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/27/97 4/22/97	500.00 500.00
F. Full Name, Mailing Address and ZIP Code People for the American Way P.O. Box 96200 Washington D.C. 20077-4630	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/10/97	40.00
G. Full Name, Mailing Address and ZIP Code Death Penalty Focus 128 N. Anita Avenue Los Angeles, CA 90049	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/97	100.00
H. Full Name, Mailing Address and ZIP Code Concern Foundation for Cancer Research 9350 Civic Center Drive, #113 Beverly Hills, CA 90210	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/29/97	25.00
I. Full Name, Mailing Address and ZIP Code Friends Committee on Legislation 926 J Street, #707 Sacramento, CA 95814	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/97	60.00

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Center for Defense Information 1500 Massachusetts Avenue Washington, D.C. 20005.	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/3/97	35.00
B. Full Name, Mailing Address and ZIP Code Coalition for Family Equity 8913 Olympic Blvd. Beverly Hills, CA 90210	Contribution to Community Organization Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/16/97	50.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Angelinos for Better Classrooms ID# 96100 221 N. Figueroa Avenue, 11th Fl. Los Angeles, CA 90012	Contribution to City Proposition 88	2/27/97	500.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/27/97	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

WOMEN FOR:

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Althea Baker ID# 962757 1059 Glen Arbor Avenue Los Angeles, CA 90041	Contribution toward Election	2/25/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	5/14/97	250.00
Ken Sackman for School Board ID# 962538 10271 Cresta Drive Los Angeles, CA 90064	Contribution toward Election	2/25/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	5/5/97	250.00
Kelly Candace for College Trustee ID# 962177 8665 Wilshire Blvd., #220 Los Angeles, CA 90211	Contribution toward Election	2/25/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	5/5/97	250.00
Hayden for Mayor ID# 960711 8170 Beverly Blvd., #205 Los Angeles, CA 90048	Contribution toward Election	2/25/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Georgia Mercer for City Council ID# 960041 P.O. Box 571094 Tarzana, CA 91357	Contribution toward Election	2/25/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff	3/10/97	250.00
		4/21/97	500.00
Friends of Elizabeth Garfield ID# 930203 153 S. Van Ness Avenue Los Angeles, CA 90041	Contribution toward Election	2/25/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Committee to ReElect Rita Walter ID#961861 c/o Ida Yarbrough 6709 La Tijera, Los Angeles, CA 90045	Contribution toward Election	3/3/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Community Coalition to Elect Dennis Korthauer, ID# 970284 405 W. 6th Street San Pedro, CA 90731	Contribution toward Election	3/10/97	500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Re-Elect Councilman Mike Hernandez ID# 96085115 P.O. Box 31168 Los Angeles, CA 90031-1168	Contribution toward Election	3/3/97	250.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

4,000.00

TOTAL This Period (last page this line number only)

7,660.00

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	DATE OF RECEIPT
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 7/30/97
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT
<input type="checkbox"/> Received from the Senate Office of Public Records	DATE OF RECEIPT
<input type="checkbox"/> Other (Specify):	POSTMARKED _____ and/or DATE OF RECEIPT
PREPARED	DATE PREPARED