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NAME OF COMMITTEE (in Full)

Laborers' Political League

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"A Lot Of People Supporting Tom Daschle" SEN. TOM DASCHLE (D-SD) 424 C St., N.E., First Floor Wash., DC 20002	Senatorial Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ 1998	06/23/97	\$5,000.00
B. Full Name, Mailing Address and ZIP Code Democratic National Committee (D) 430 South Capitol Street, S.E. Washington DC 20003	Purpose of Disbursement Congressional Campaign Cites. Cont. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Independent Cites.	06/23/97	\$15,000.00
C. Full Name, Mailing Address and ZIP Code "Carol Moseley-Braun For U.S. Senate" SEN. CAROL M. MOSELEY-BRAUN (D-IL) 54 W. Hubbard St Chicago IL 60610	Purpose of Disbursement Senatorial Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ 1998	06/23/97	\$2,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Barbara Boxer SEN. BARBARA BOXER (D-CA) 5200 West Century Blvd., #154 Los Angeles CA 90045	Purpose of Disbursement Senatorial Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ 1998	06/30/97	\$5,000.00
E. Full Name, Mailing Address and ZIP Code Congressman Joe Moakley Committee CONG. JOE MOAKLEY (D-MA) P.O. Box 1073 Boston MA 02205	Purpose of Disbursement Congressional Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ 1998	06/30/97	\$2,000.00
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)

552,000.00