

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>citizens for Eleanor Holmes Norton</b>		2. FEC IDENTIFICATION NUMBER <b>COB244335</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <b>2201 Wisconsin Avenue, NW, Suite 320</b>		
CITY, STATE and ZIP CODE <b>Washington, DC 20007</b>	STATE/DISTRICT	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report <input type="checkbox"/> July 15 Quarterly Report <input checked="" type="checkbox"/> October 15 Quarterly Report <input type="checkbox"/> January 31 Year End Report <input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Twelfth day report preceding (Type of Election) election on _____ in the State of _____ <input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____ <input type="checkbox"/> Termination Report
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This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

### SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
8/27/98 through 9/30/98		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	14,805.00	68,643.00
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	14,805.00	68,643.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	9,850.54	68,038.28
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	9,850.54	68,038.28
8. Cash on Hand at Close of Reporting Period (from Line 27)	128,454.07	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	-0-	

For further information contact:  
Federal Election Commission  
989 E. Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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  
**Gail Harmon**

Signature of Treasurer  
*Gail Harmon*

Date  
**10/9/98**

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

**DETAILED SUMMARY PAGE**  
**of Receipts and Disbursements**  
 (Page 2, FEC FORM 3)

Name of Committee (in full) Citizens for Eleanor Holmes Norton	Report Covering the Period: From: 8/27/98 To: 9/30/98	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	1,000.00	
(ii) Unitemized	805.00	
(iii) Total of contributions from individuals	1,805.00	45,043.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)	13,000.00	43,600.00
(d) The Candidate		
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	14,805.00	88,643.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>		
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate		
(b) All Other Loans		
(c) TOTAL LOANS (add 13(a) and (b))		
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>		
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>		
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	14,805.00	88,643.00
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b>	9,850.54	68,038.28
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
(b) Of All Other Loans		
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		
<b>21. OTHER DISBURSEMENTS</b>	3,650.00	5,350.00
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	13,500.54	73,388.28
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	127,149.61
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	14,805.00
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>	\$	141,954.61
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>	\$	13,500.54
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>	\$	128,454.07

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page  
 PAGE 1 OF 1  
 FOR LINE NUMBER 1193

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

NAME OF COMMITTEE (in Full)

Citizens for Eleanor Holmes Norton

E3C ID No. C00244335

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Terence C. Golden 4869 Glenbrook Road, NW Washington, DC 20016	Best Marriott Corp.	8/27/98	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Occupation President and CEO	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
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General	Occupation	Aggregate Year-To-Date \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General	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	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	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	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	Occupation	Aggregate Year-To-Date \$	

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page	PAGE	OF
	1	2
		FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)  
 Citizens for Eleanor Holmes Norton

FEC ID No. C00244335

A. Full Name, Mailing Address and ZIP Code UPSPAC 55 Glenlake Parkway, N.E. Atlanta, GA 30328	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	9/4/98	3,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 3,000.00	
B. Full Name, Mailing Address and ZIP Code American Hospital Assn. PAC 325 Seventh Street, NW Washington, DC 20004	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	9/9/98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 500.00	
C. Full Name, Mailing Address and ZIP Code Transportation Political Education League 14600 Detroit Avenue Cleveland, OH, 44107	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	9/14/98	2,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code AFSCME - PAC 1625 L Street, NW Washington, DC 20036	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	9/17/98	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 3,000.00	
E. Full Name, Mailing Address and ZIP Code Realtors Political Action Committee 430 N. Michigan Avenue Chicago, IL 60611	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	9/17/98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Realtors Political Action Committee 430 N. Michigan Avenue Chicago, IL 60611	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	9/17/98	500.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code APGE Political Action Cmte. 80 F Street, NW Washington, DC 20001	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	9/17/98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 500.00	

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule for each category of Detailed Summary Page **2** OF **2**  
**FOR LINE NUMBER 11c**

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**NAME OF COMMITTEE (In Full)**  
 Citizens for Eleanor Holmes Norton **FEC ID No.** C00244335

<b>A. Full Name, Mailing Address and ZIP Code</b> SEIU COPE US Division 1313 L Street NW Washington, DC 20005  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-To-Date</b> \$ 5,000.00	<b>Date (month, day, year)</b> 9/17/98	<b>Amount of Each Receipt this Period</b> 2,500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> SEIU COPE US Division 1313 L Street, NW Washington, DC 20005  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-To-Date</b> \$ 5,000.00	<b>Date (month, day, year)</b> 9/17/98	<b>Amount of Each Receipt this Period</b> 2,500.00
<b>C. Full Name, Mailing Address and ZIP Code</b>   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-To-Date</b> \$	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>D. Full Name, Mailing Address and ZIP Code</b>   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-To-Date</b> \$	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>E. Full Name, Mailing Address and ZIP Code</b>   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-To-Date</b> \$	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>F. Full Name, Mailing Address and ZIP Code</b>   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-To-Date</b> \$	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>
<b>G. Full Name, Mailing Address and ZIP Code</b>   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  <b>Aggregate Year-To-Date</b> \$	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt this Period</b>

<b>SUBTOTAL of Receipts This Page (optional)</b>	5,000.00
<b>TOTAL This Period (last page this line number only)</b>	13,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule PAGE OF  
for each category of the 1 2  
Detailed Summary Page FOR LINE NUMBER  
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NAME OF COMMITTEE (in Full) FEC ID No. C00244335  
Citizens for Eleanor Holmes Norton

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Longworth Station 1422 Washington, DC 20515	Postage Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/27/98	320.00
B. Full Name, Mailing Address and ZIP Code Politiki 332 Pennsylvania Ave., SE Washington, DC 20003	Purpose of Disbursement Catering Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/3/98	83.33
C. Full Name, Mailing Address and ZIP Code Apple Courier Inc. 3401 K Street, NW Washington, DC 20007	Purpose of Disbursement Courier Services Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/9/98	9.41
D. Full Name, Mailing Address and ZIP Code Repete Courier Service 1412 5th Street, NW Washington, DC 20001	Purpose of Disbursement Courier Services Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/9/98	21.00
E. Full Name, Mailing Address and ZIP Code U.S. Printing & Copying, Inc. 1725 M Street, NW Washington, DC 20036	Purpose of Disbursement Printing Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	200.93
F. Full Name, Mailing Address and ZIP Code Karen Mulhauser Mulhauser and Associates 1730 Rhode Island Avenue, NW Washington, DC 20036	Purpose of Disbursement Fundraising Consultant Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	4,000.00
G. Full Name, Mailing Address and ZIP Code Karen Mulhauser Mulhauser and Associates 1730 Rhode Island Avenue, NW Washington, DC 20036	Purpose of Disbursement Postage, Rent, Courier Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/14/98	1,553.48
H. Full Name, Mailing Address and ZIP Code Gilbert & Wolfand, P.C. 2201 Wisconsin Ave., NW Washington, DC 20007	Purpose of Disbursement Accounting Services Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/15/98	1,456.25
I. Full Name, Mailing Address and ZIP Code Apple Courier Inc. 3401 K Street, NW Washington, DC 20007	Purpose of Disbursement Courier Services Disbursement for <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/16/98	9.41

**SUBTOTAL of Disbursements This Page (optional)** 7,653.91

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule for each category of Detailed Summary Page	PAGE 2	OF 2
	FOR LINE NUMBER 17	

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NAME OF COMMITTEE (in Full)

Citizens for Eleanor Holmes Norton

FEC ID No. C00244335

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month day, year)	Amount of Each Disbursement This Period
Kevin Downes 2936 Nash Place, SE #1 Washington, DC 20019	Political Consultant Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/17/98	750.00
B. Full Name, Mailing Address and ZIP Code Gist Catering 10010 Wooden Bridge Lane Clinton, MD 20735	Catering Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/98	335.00
C. Full Name, Mailing Address and ZIP Code D.C. Democratic State Cmte. 499 S. Capitol Street, SE Washington, DC 20003	Event Tickets Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	50.00
D. Full Name, Mailing Address and ZIP Code David Andrukitis, Inc. 50 E Street, SE Washington, DC 20003	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	1,061.73
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) . . . . . 2,196.73

TOTAL This Period (last page this line number only) . . . . . 9,850.54

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		
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NAME OF COMMITTEE (in full) **Citizens for Eleanor Holmes Norton** FEC ID No. C00244335

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Judy Smith for Congress P.O. Box 1011 Camden, AR 71711	Cand Contr - AR-4-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
B. Full Name, Mailing Address and ZIP Code Hahns for Congress P.O. Box 812 Torrance, CA 90508	Cand Contr - CA-36-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
C. Full Name, Mailing Address and ZIP Code Christine Kehoe for Cong. '98 1018 University Ave. San Diego, CA 92103	Cand Contr - CA-49-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	250.00
D. Full Name, Mailing Address and ZIP Code Julia Carson for Congress 1 N. Capitol Street, #211 Indianapolis, IN 46204	Cand Contr - IN-10-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
E. Full Name, Mailing Address and ZIP Code Roxanne Qualls for Congress 19 Garfield Place, #206 Cincinnati, OH 45202	Cand Contr - OH-1-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
F. Full Name, Mailing Address and ZIP Code Spottswood for Congress 3700 45th Street Kenosha, WI 53144	Cand Contr - WI-1-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
G. Full Name, Mailing Address and ZIP Code Tammy Baldwin for Congress P.O. Box 696 Madison, WI 53701	Cand Contr - WI-2-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	200.00
H. Full Name, Mailing Address and ZIP Code Abercrombie for Congress 1142 Auahi Street, #2420 Honolulu, HI 96814	Cand Contr - HI-1-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	200.00
I. Full Name, Mailing Address and ZIP Code Riecken for Congress P.O. Box 3897 Evansville, IN 47737	Cand Contr - IN-6-D Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	250.00

SUBTOTAL of Disbursements This Page (optional)	3,400.00
TOTAL This Period (last page this line number only)	



SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in full)  
**Citizens for Eleanor Holmes Norton**

FEC ID No. **C00244335**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<b>Watt for Congress</b> P.O. Box 36831 Charlotte, NC 28236	<b>Cand Contr - NC-12-P</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	500.00
<b>Ralph Nease for Congress</b> 5207 Massachusetts Ave. Bethesda, MD 20816	<b>Cand Contr - MD-8-D</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	250.00
<b>Friends of Lois Capps</b> 25 West Anapamu Santa Barbara, CA 93101	<b>Void Check</b> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	(500.00)
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
L. 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)	250.00
TOTAL This Period (last page this line number only)	3,650.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10-14-98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
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<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
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<i>Sen</i> PREPARER	<i>10-14-98</i> DATE PREPARED