REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

FEC MAIL ROOM

Mar 20 4 57 PM '98

1. NAME OF COMMITTEE (in full)
Pioneer PAC

ADDRESS (number and street) ☐ Check if different than previously reported
499 South Capitol St., SW, Suite 408

CITY, STATE and ZIP CODE
Washington, DC 20003

2. FEC IDENTIFICATION NUMBER
C00325357

3. ☐ 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:

☐ February 20	☐ June 20	☐ October 20
☒ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ 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 02/01/98 through 02/28/98		
6. (a) Cash on Hand January 1, 1998		$ 605,776.86
(b) Cash on Hand at Beginning of Reporting Period	$ 609,945.23	
(c) Total Receipts (from line 19)	$ 33,755.64	$ 79,380.64
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 643,700.87	$ 685,157.50
7. Total Disbursements (from Line 30)	$ 147,135.31	$ 188,591.94
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	$ 496,565.56	$ 496,565.56
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)	$ 0.00	

For further information:
Federal Election Commission
999 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
Barbara W. Bonfiglio

Signature of Treasurer
Barbara W. Bonfiglio

Date
3/20/98

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

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 Pioneer PAC

REPORT COVERING PERIOD FROM: 02/01/98 TO: 02/28/98

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A)	20,250.00	64,550.00
ii. Unitemized	240.00	1,565.00
iii. Total (add i and ii) >	20,490.00	66,115.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	12,293.00	12,293.00
d. Total Contributions (add aiii, b and c) >	32,783.00	78,408.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	972.64	972.64
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d,12,13,14,15,16,17,and 18) >	33,755.64	79,380.64
20. Total Federal Receipts (subtract line 18 from line 19) >	33,755.64	79,380.64
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	142,135.31	182,775.11
c. Total Operating Expenditures (Add ai, aii, and b) >	142,135.31	182,775.11
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	5,000.00	5,000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	0.00	816.83
b. Political Party Committees	0.00	0.00
c. Other Political Committees (Such As PACs)	0.00	0.00
d. Total Contribution Refunds (Add a,b, and c) >	0.00	816.83
29. Other Disbursements	0.00	0.00
30. Total Disbursements (Add 21c,22,23,24,25,26,27,28d, and 29) >	147,135.31	188,591.94
31. Total Federal Disbursements (Subtract line 21 aii from line 30) >	147,135.31	188,591.94
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d)	32,783.00	78,408.00
33. Total Contribution Refunds (from line 28d)	0.00	816.83
34. Net Contributions (Other than loans)(subtract line 33 from 32)	32,783.00	77,591.17
35. Total Federal Operating Expenditures (add 21 ai and 21 b) >	142,135.31	182,775.11
36. Offsets to Operating Expenditures (from line 15)	972.64	972.64
37. Net Operating Expenditures (subtract line 36 from 35) >	141,162.67	181,802.47

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 1

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)
Pioneer PAC

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
A. Donald Freytag, 7955 Riverside Dr., Dublin, OH 43016 — Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Freytag Management / Consultant — Aggregate Year-to-date > $ 5,000.00	02/11/98	5,000.00
B. Elizabeth Freytag, 7955 Riverside Dr., Dublin, OH 43017 — Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	King Thompson / Sales — Aggregate Year-to-date > $ 5,000.00	02/11/98	5,000.00
C. Roswell Ellis, 787 Liverpool Place, Westerville, OH 43081 — Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Century Surety Co. / Insurance Executive — Aggregate Year-to-date > $ 250.00	02/11/98	250.00
D. Ellen Bowden, 261 S. Parkview Ave., Columbus, OH 43209 — Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Homemaker — Aggregate Year-to-date > $ 5,000.00	02/19/98	5,000.00
E. Boyd Bowden, 261 S. Parkview Ave., Columbus, OH 43209 — Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	OrthoNeuro Consultants, Inc. / Physician — Aggregate Year-to-date > $ 5,000.00	02/19/98	5,000.00
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

SUB TOTAL of Receipts This Page (Optional) ..... > 20,250.00

TOTAL this Period (Last page this line number only) ..... > 20,250.00

SCHEDULE A — ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (in full)
Pioneer PAC

Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
A. American Hospital Asso. PAC 325 Seventh St., NW Washington, DC 20004 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 4,793.00	02/11/98	4,793.00
B. Independent Insurance Agents of America PAC 412 First St., SE, Ste. 300 Washington, DC 20003 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 2,500.00	02/11/98	2,500.00
C. AGSHF Civic Action Committee 1333 New Hampshire,NW,Ste.400 Washington, DC 20036 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 1,000.00	02/11/98	1,000.00
D. American Asso. of Crop Insurers 1 Massachusetts Ave., No. 800 Washington, DC 20001 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 1,000.00	02/11/98	1,000.00
E. The Blue Cross & Blue Shield Asso. PAC 1310 G Street, NW, 12th fl. Washington, DC 20005 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 1,000.00	02/11/98	1,000.00
F. PRINPAC 711 High St. Des Moines, IA 50392 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 1,000.00	02/11/98	1,000.00
G. The Hartford Advocates Fund Hartford Plaza Hartford, CT 06115 Receipt For: ☐ Primary ☐ General ☐ Other (Specify)	Aggregate Year-to-date > $ 1,000.00	02/19/98	1,000.00

SUB TOTAL of Receipts This Page (Optional) ..... > 12,293.00

TOTAL this Period (Last page this line number only) ..... > 12,293.00

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 15

SCHEDULE A **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In full)
Pioneer PAC

A. Full Name, Mailing Address and Zip Code	Name of Employer / Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Nationwide Insurance Enterprise P.O. Box 147081 Gainesville, FL 32614-7081		02/11/98	972.64
Receipt For: [ ] Primary [ ] General [X] Other (Specify) reimburse loss	Aggregate Year-to-date > $ 972.64		
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 > $		

SUB TOTAL of Receipts This Page (Optional) >	972.64
TOTAL this Period (Last page this line number only) >	972.64

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 5
	FOR LINE NUMBER 21B

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Pioneer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Marfair Joint Venture 499 South Capitol St., SW, Suite 505 Washington, DC 20003	rent exp. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/03/98	2,025.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Marfair Joint Venture 499 South Capitol St., SW, Suite 505 Washington, DC 20003	parking exp. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/03/98	250.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Chris Singerling 7002 Quander Road Alexandria, VA 22307	reimburse fundr. exp. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/03/98	501.69
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Pebble Beach Company P.O. Box 1522 Pebble Beach, CA 93953	fundr. exp. -dinner Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/03/98	525.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
First Union National Bank P.O. Box 44236 Jacksonville, FL 32231	payroll tax Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/04/98	2,653.80
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Virginia Dept. of Taxation P.O. Box 27264 Richmond, VA 23261	payroll tax Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/04/98	366.79
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
The McMillan Group 11 Canal Center Plaza, Ste. 302 Alexandria, VA 22314	consulting fees Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/06/98	7,000.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Executive Office Club 1025 Connecticut Ave., Ste. 1012 Washington, DC 20036	answering service Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/06/98	102.00
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Cort Furniture Rental 801 Hampton Park Blvd. Capitol Heights, MD 20743	office exp - furniture Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/06/98	214.62

SUB TOTAL of Disbursements this page (Optional) ..... >	13,638.90
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 5
	FOR LINE NUMBER 21B

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Pioneer PAC

A. Full Name, Mailing Address and Zip Code Nationwide Mutual Insurance Co. 11170 Lee Highway Fairfax, VA 22030	Purpose of Disbursement insurance Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 250.00
B. Full Name, Mailing Address and Zip Code Bell Atlantic Mobile P.O. Box 64268 Baltimore, MD 21264	Purpose of Disbursement cell phone charges Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 159.82
C. Full Name, Mailing Address and Zip Code AT&T P.O. Box 371302 Pittsburgh, PA 15250	Purpose of Disbursement phone charges Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 881.69
D. Full Name, Mailing Address and Zip Code Bell Atlantic P.O. Box 646 Baltimore, MD 21265	Purpose of Disbursement phone charges Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 337.82
E. Full Name, Mailing Address and Zip Code Bell Atlantic Mobile P.O. Box 64268 Baltimore, MD 21264	Purpose of Disbursement cell phone charges Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 702.61
F. Full Name, Mailing Address and Zip Code Bell Atlantic Mobile P.O. Box 64268 Baltimore, MD 21264	Purpose of Disbursement cell phone charges Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 159.54
G. Full Name, Mailing Address and Zip Code Camilla Powell 883 North Ohio Street Arlington, VA 22205	Purpose of Disbursement consulting fee and exps. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 901.00
H. Full Name, Mailing Address and Zip Code Marfair Joint Venture 499 South Capitol St., SW, Suite 505 Washington, DC 20003	Purpose of Disbursement lease agreement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/06/98	Amount of Each Disb. this Period 17,602.43
I. Full Name, Mailing Address and Zip Code MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	Purpose of Disbursement fundr. exp. - airfare Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day, Year) 02/12/98	Amount of Each Disb. this Period 2,666.00

SUB TOTAL of Disbursements this page (Optional) ..... >	23,660.91
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 3 OF 5
	FOR LINE NUMBER 21B

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Pioneer PAC

Full Name, Mailing Address and Zip Code	Purpose of Disbursement / Disbursement For	Date (Month day, Year)	Amount of Each Disb. this Period
A. MacNair Travel Management, 1703 Duke Street, Alexandria, VA 22314	fundr. exp. - airfare; Disbursement For: Primary / General / Other (Specify)	02/12/98	901.00
B. Center of New Hampshire - Holiday Inn, 700 Elm Street, Manchester, NY 03101	fundraising exp. - lodging; Disbursement For: Primary / General / Other (Specify)	02/13/98	1,218.24
C. Wilma Goldstein, 4203 S. 35th Street, Arlington, VA 22206	salary; Disbursement For: Primary / General / Other (Specify)	02/13/98	3,354.81
D. Edward Puccerella, 700 North Pelham St., Alexandria, VA 22314	salary; Disbursement For: Primary / General / Other (Specify)	02/13/98	1,558.23
E. Chris Singerling, 7002 Quander Road, Alexandria, VA 22307	salary; Disbursement For: Primary / General / Other (Specify)	02/13/98	2,115.98
F. First Union National Bank, P.O. Box 44236, Jacksonville, FL 32231	payroll taxes; Disbursement For: Primary / General / Other (Specify)	02/13/98	3,350.05
G. Virginia Dept. of Taxation, P.O. Box 27264, Richmond, VA 23261	payroll taxes; Disbursement For: Primary / General / Other (Specify)	02/13/98	475.64
H. First Impressions, 5 Eagle Square, Concord, NH 03301	fundr. exp. - beverages; Disbursement For: Primary / General / Other (Specify)	02/17/98	235.00
I. Worthington Industries, 1205 Dearborn Drive, Worthington, OH 43085	fundraising exp. - airfare; Disbursement For: Primary / General / Other (Specify)	02/19/98	505.00

SUB TOTAL of Disbursements this page (Optional) ---->	13,713.95
TOTAL this Period (Last page this line number only) ---->	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 4 OF 5
	FOR LINE NUMBER 21B

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
Pioneer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Intelligent Solutions 2700 Prosperity Ave. Fairfax, VA 22031	computer system payment Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	5,759.88
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
U.S. Postmaster 1100 Wythe St. Alexandria, VA 22314	postage exp. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	320.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Direct Mail Systems, Inc. 12450 Automobile Blvd. Clearwater, FL 33762	direct mail exps. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	30,831.70
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Datamark, Inc. 1410 Donelson Pike, Suite A-2 Nashville, TN 37217	direct mail exps. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	35,758.22
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Crown Equipment Corp. 40 South Washing St. New Bremen, OH 45869	foodr. exp. - airfare Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	2,588.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
MacNair Travel Management 1703 Duke Street Alexandria, VA 22314	foodr. exp. - airfare Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	1,268.00
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Island View Hotel 265 Beach Boulevard Biloxi, MS 39530	foodr. exp. - lodging Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	206.80
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Lucent Technologies P.O. Box 371358 Pittsburgh, PA 15286	phone lease agreement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	660.64
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Baker and Hostetler, LLP P.O. Box 37515 Washington, DC 20013	legal fees Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	2,181.25

SUB TOTAL of Disbursements this page (Optional) ..... >	79,574.49
TOTAL this Period (Last page this line number only) ..... >	

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 5 OF 5
	FOR LINE NUMBER 21B

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Pioneer PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
AT&T P.O. Box 371302 Pittsburgh, PA 15250	telephone exp. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	898.86
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Lucent Technologies P.O. Box 371358 Pittsburgh, PA 15286	long distance service Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	201.18
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Tod Bowen 5466 Cedarbush Rd. Columbus, OH 43229	consulting fees Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	1,000.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
The McMillan Group 11 Canal Center Plaza, Ste. 302 Alexandria, VA 22314	retainer payment Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	5,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Lisa Friel 1303 East Abingdon Dr. #3 Alexandria, VA 22314	consulting fees Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/26/98	2,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Edward Puccerella 700 North Pelham St. Alexandria, VA 22314	reimburse exps Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/27/98	523.49
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
Chris Singerling 7002 Quander Road Alexandria, VA 22307	reimburse exps. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/27/98	255.21
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
First Union Commercial Card P.O. Box 44236 Jacksonville, FL 32231	credit card exps. Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	02/27/98	1,290.08
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day,Year)	Amount of Each Disb. this Period
	Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)		

SUB TOTAL of Disbursements this page (Optional) ..... >	11,168.82
TOTAL this Period (Last page this line number only) ..... >	141,757.07

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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)

Pioneer PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hyatt Grand Champion 44600 Indian Wells Lane Indian Wells, CA 92210	Lodging Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/01/98 *memo-payment made by credit card	*349.17
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hertz Rent-a-Car 200 Fred Kane Dr., Ste. 104 Monterey, CA 93940	transportation Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/01/98 *memo-payment made by credit card	*264.90
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Monterey Marriott Hotel 350 Calle Principal Monterey, CA 93940	Lodging Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	02/05/98 *memo-payment made by credit card	*117.81
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

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

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

FE4AN1.01

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF I
	FOR LINE NUMBER 23

SCHEDULE B — ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Pioneer PAC

A. Full Name, Mailing Address and Zip Code Bordonaro for Congress P.O. Box 3917 Paso Robles, CA 93447	Purpose of Disbursement Tom Bordonaro, U.S. HOUSE 22nd CA Disbursement For: ☐ Primary ☐ General ☒ Other (Specify) 1998 Special Election	Date (Month day,Year) 02/13/98	Amount of Each Disb. this Period 5,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify)	Date (Month day,Year)	Amount of Each Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional) ---------->	5,000.00
TOTAL this Period (Last page this line number only) ---------->	5,000.00

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 recived.

☑	Hand Delivered	Date of Receipt 3-20-98
☐	First Class Mail	POSTMARKED
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☐	No Postmark	
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☐	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	

JCH	3-23-98
PREPARER	DATE PREPARED

(7/97)