

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

75  
1101  
1001  
1001  
Aug 20 5 20 11 '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**Republican Majority Fund**

ADDRESS (number and street)  Check if different than previously reported  
**1155 21st Street, NW, Suite 300**

CITY, STATE and ZIP CODE  
**Washington, DC 20036**

2. FEC IDENTIFICATION NUMBER  
**C00296640**

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	<u>07/14/98</u> through <u>07/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>			\$ 263,518.74
(b) Cash on Hand at Beginning of Reporting Period		\$ 290,009.01	
(c) Total Receipts (from Line 19)		\$ 5,659.79	\$ 241,488.20
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 295,668.80	\$ 505,006.94
7. Total Disbursements (from Line 30)		\$ 37,714.27	\$ 247,052.41
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 257,954.53	\$ 257,954.53
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 contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20483  
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, Assistant Treasurer**

Signature of Treasurer: *Barbara W. Bonfiglio*      Date: 8/20/98

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

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**FEC FORM 3X**  
(revised 9/93)

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

(revised 1/1/81)

NAME OF COMMITTEE <b>Republican Majority Fund</b>		REPORT COVERING PERIOD		
		FROM	TO	
		<b>07/14/98</b>	<b>07/31/98</b>	
		<b>COLUMN A</b>	<b>COLUMN B</b>	
		<b>Total This Period</b>	<b>Calendar Year</b>	
<b>I. Receipts</b>				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A) .....	1,500.00	45,250.00	11(a)(i)
ii.	Unitemized .....	10.00	22,267.65	11(a)(ii)
iii.	Total .....	1,510.00	67,517.65	11(a)(iii)
b.	Political Party Committees .....	0.00	0.00	11(b)
c.	Other Political Committees (such as PACs) .....	3,000.00	169,900.00	11(c)
d.	Total Contributions .....	4,510.00	236,517.65	11(d)
12.	Transfers From Affiliated/Other Party Committees .....	0.00	0.00	12
13.	All Loans Received .....	0.00	0.00	13
14.	Loan Repayments Received .....	0.00	0.00	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0.00	0.00	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees .....	0.00	0.00	16
17.	Other Federal Receipts (Dividends, Interest, etc.) .....	1,149.79	4,970.55	17
18.	Transfers from Nonfederal Account for Joint Activity .....	0.00	0.00	18
19.	Total Receipts .....	5,659.79	241,488.20	19
20.	Total Federal Receipts .....	5,659.79	241,488.20	20
<b>II. Disbursements</b>				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share .....	0.00	0.00	21(a)(i)
ii.	Non-Federal Share .....	0.00	0.00	21(a)(ii)
b.	Other Federal Operating Expenditures .....	3,214.27	114,404.41	21(b)
c.	Total Operating Expenditures .....	3,214.27	114,404.41	21(c)
22.	Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees .....	25,000.00	102,548.00	23
24.	Independent Expenditures (use Schedule E) .....	0.00	0.00	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	0.00	0.00	25
26.	Loan Repayments Made .....	0.00	0.00	26
27.	Loans Made .....	0.00	0.00	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees .....	0.00	0.00	28(a)
b.	Political Party Committees .....	0.00	0.00	28(b)
c.	Other Political Committees (such as PACs) .....	0.00	0.00	28(c)
d.	Total Contribution Refunds .....	0.00	0.00	28(d)
29.	Other Disbursements .....	9,500.00	30,000.00	29
30.	Total Disbursements .....	37,714.27	247,052.41	30
31.	Total Federal Disbursements .....	37,714.27	247,052.41	31
<b>III. Net Contributions/Operating Expenditures</b>				
32.	Total Contributions (other than loans)(from line 11d) .....	4,510.00	236,517.65	32
33.	Total Contribution Refunds (from line 28d) .....	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32) .....	4,510.00	236,517.65	34
35.	Total Federal Operating Expenditures .....	3,214.27	114,404.41	35
36.	Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36
37.	Net Operating Expenditures .....	3,214.27	114,404.41	37

**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

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 contributors from such committee.

NAME OF COMMITTEE (in Full)  
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code Motion Picture Association of America 1600 Eye Street, NW Washington, DC 20006	Name of Employer  Occupation Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 07/14/98	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Viacom Int'l Inc. PAC (VIAPAC) 1501 M Street, NW, Ste. 1100 Washington, DC 20005	Name of Employer  Occupation Aggregate Year-to-Date > \$ 1,500.00	Date (month, day, year) 07/14/98	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer  Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

**SUBTOTAL** of Receipts This Page (optional) ..... 3,000.00

**TOTAL** This Period (last page this line number only) ..... 3,000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in Full)  
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Red Cavaney 1169 Crest Lane McLean, VA 22102	American Petroleum Institute	07/14/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Association Executive	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kimberly Fritts 3401 N. Emerson St. Arlington, VA 22207	Podesta Associates	07/14/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Managing Partner	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 > \$	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			<b>1,500.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....			<b>1,500.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (In Full)**  
Republican Majority Fund

<p><b>A. Full Name, Mailing Address and ZIP Code</b> First Union CAP Department One First Union Center Charlotte, NC 28288</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$ 4,970.55</p>	<p>Date (month, day, year) 07/31/88</p>	<p>Amount of Each Receipt This Period 1,149.79</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b> .....</p>	<p>1,149.79</p>
<p><b>TOTAL This Period (last page this line number only)</b> .....</p>	<p>1,149.79</p>

**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)**  
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citibank Advantage P.O. Box 1747 Hagerstown, MD 21748-1747	credit card exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/98	901.98
B. Full Name, Mailing Address and ZIP Code New England Press 1200 Wake Forest Dr. Alexandria, VA 22307	printing exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/30/98	1,809.89
C. Full Name, Mailing Address and ZIP Code The Monocle 107 D St, NE Washington, DC 20002	fundr. exp. - reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/30/98	409.60
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) .....

**3,121.47**

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

**3,121.47**

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Neumann for U.S. Senate 4328 Fox Hills Drive Janesville, WI 53546	Mark W. Neumann, U.S. SENATE WI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/14/98	3,000.00
B. Full Name, Mailing Address and ZIP Code Lauch Faircloth for Senate '98 P.O. Box 26585 Raleigh, NC 27611	Lauch Faircloth, U.S. SENATE NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/14/98	3,000.00
C. Full Name, Mailing Address and ZIP Code Matt Fong U.S. Senate Committee 888 S. Figueroa St. #860 Los Angeles, CA 90017	Matthew K. Fong, U.S. SENATE CA Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Primary Debt Retirement	07/14/98	3,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Senator D'Amato 100 Willis Ave. Mineola, NY 11501	Alfonse M. D'Amato, U.S. SENATE NY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/22/98	5,000.00
E. Full Name, Mailing Address and ZIP Code Missourians for Kit Bond 34 North Brentwood Blvd., Suite 14 St. Louis, MO 63105	Christopher S. Bond, U.S. SENATE MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/22/98	5,000.00
F. Full Name, Mailing Address and ZIP Code Brownback for Senate Committee P.O. Box 20008 Topeka, KS 66601	Sam Brownback, U.S. SENATE KS Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/22/98	5,000.00
G. Full Name, Mailing Address and ZIP Code Gil Aust for Congress Committee 250 Governor's Dr., East Ste. D Huntsville, AL 35801	Gilbert Monroe Aust, U.S. HOUSE 5th AL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/22/98	1,000.00
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) .....

25,000.00

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

25,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)  
Republican Majority Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stu Ernest for County Commissioner 9625 N. Bryant Oklahoma City, OK 73131	Stu Ernest, COUNTY COMMISSIONER OK Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/22/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Sturgell for State Senate 9915 Old Solomons Island Rd. Owings, MD 20736	Bobby Sturgell, STATE SENATE MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/22/98	1,000.00
C. Full Name, Mailing Address and ZIP Code Oklahomans for Denise Bode P.O. Box 60941 Oklahoma City, OK 73146	Denise Bode, CORPORATION Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/30/98	2,500.00
D. Full Name, Mailing Address and ZIP Code Milner for Governor 3535 Piedmont Rd., NE, Ste. 410 Atlanta, GA 30305	Guy Milner, GOVERNOR GA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/30/98	5,000.00
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) .....

9,500.00

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

9,500.00



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>8-21-98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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
<input type="checkbox"/> Electronic Filing	
<i>JMW</i> PREPARER	<i>8-21-98</i> DATE PREPARED