

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION HALL ROOM

APR 19 1 26 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. C00198606 030498 N 251
NORMAN M LEVINE
DEVRY INC POLITICAL ACTION COM
MITTEE
ONE TOWER LANE, SUITE 1000
OAKBROOK TERRACE IL 60181

2. FEC IDENTIFICATION NUMBER
C00198606

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

12-Day Pre-Election Report for the _____ (Type of Election)
 election on _____ in the State of _____

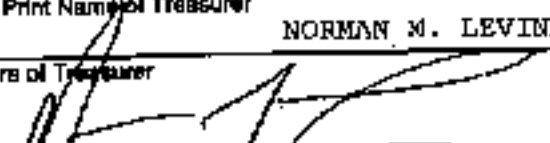
30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period 01/01/98 through 03/31/98		
6. (a) Cash on Hand January 1, 1998		\$ 4,023.16
(b) Cash on Hand at Beginning of Reporting Period	\$ 4,023.16	
(c) Total Receipts (from Line 19)	\$ 822.99	\$ 822.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 4,846.15	\$ 4,846.15
7. Total Disbursements (from Line 30)	\$ 1,200.00	\$ 1,200.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 3,646.15	\$ 3,646.15
9. Debts and Obligations Owed TO 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 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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: NORMAN M. LEVINE

Signature of Treasurer: 

Date: 4/15/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

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FEC FORM 3X
(revised 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/8/91)

NAME OF COMMITTEE

DeVry Inc. Political Action Committee

REPORT COVERING PERIOD

FROM 01/01/98 TO: 03/31/98

COLUMN A

Total This Period

COLUMN B

Calendar Year

I. Receipts

- 11. Contributions (other than loans) From:
 - a. Individual/Persons Other than Political Committees
 - i. Itemized (use Schedule A).....
 - ii. Unitemized.....
 - iii. Total..... (add i and ii) ▶
 - b. Political Party Committees.....
 - c. Other Political Committees (such as PACs).....
 - d. Total Contributions..... (add a iii, b and c) ▶
- 12. Transfers From Affiliated/Other Party Committees.....
- 13. All Loans Received.....
- 14. Loan Repayment Received.....
- 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....
- 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....
- 17. Other Federal Receipts (Dividends, Interest, etc.).....
- 18. Transfers from Nonfederal Account for Joint Activity.....
- 19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶
- 20. Total Federal Receipts..... (subtract line 18 from line 19) ▶

	\$552.99	\$552.99	
	270.00	270.00	
	\$822.99	\$822.99	
	0.00	0.00	
	0.00	0.00	
	\$822.99	\$822.99	
	0.00	0.00	
	0.00	0.00	
	0.00	0.00	
	0.00	0.00	
	0.00	0.00	
	\$822.99	\$822.99	
	\$822.99	\$822.99	

II. Disbursements

- 21. Operating Expenditures:
 - a. Shared Federal/Non-Federal Activity (from Schedule H4)
 - i. Federal Share.....
 - ii. Non-Federal Share.....
 - b. Other Federal Operating Expenditures.....
 - c. Total Operating Expenditures..... (add a, i, a ii, and b) ▶
- 22. Transfers to Affiliated/Other Party Committees.....
- 23. Contributions to Federal Candidates/Committees and Other Political Committees.....
- 24. Independent Expenditures (use Schedule E).....
- 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....
- 26. Loan Repayments Made.....
- 27. Loans Made.....
- 28. Refunds of Contributions To:
 - a. Individual/Persons Other Than Political Committees.....
 - b. Political Party Committees.....
 - c. Other Political Committees (such as PACs).....
 - d. Total Contribution Refunds..... (add a, b and c) ▶
- 29. Other Disbursements.....
- 30. Total Disbursements..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ▶
- 31. Total Federal Disbursements..... (subtract line 21 a iii from line 30) ▶

	\$0.00	\$0.00	
	0.00	0.00	
	0.00	0.00	
	\$0.00	\$0.00	
	0.00	0.00	
	\$1,200.00	\$1,200.00	
	0.00	0.00	
	0.00	0.00	
	0.00	0.00	
	0.00	0.00	
	0.00	0.00	
	0.00	0.00	
	\$0.00	\$0.00	
	0.00	0.00	
	\$1,200.00	\$1,200.00	
	\$1,200.00	\$1,200.00	

III. Net Contributions/Operating Expenditures

- 32. Total Contributions (other than loans)(from line 11d).....
- 33. Total Contribution Refunds (from line 28d).....
- 34. Net Contributions (other than loans) (subtract line 33 from 32).....
- 35. Total Federal Operating Expenditures..... (add 21 a i and 21 b) ▶
- 36. Offsets to Operating Expenditures (from line 15).....
- 37. Net Operating Expenditures..... (subtract line 36 from 35) ▶

	\$822.99	\$822.99	
	\$0.00	\$0.00	
	\$822.99	\$822.99	
	\$0.00	\$0.00	
	\$0.00	\$0.00	
	\$0.00	\$0.00	

SCHEDULE A

ITEMIZED RECEIPTS

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

Any information copied from such Reports and Statements may not be sold or used to 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)
DeVry Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code Dennis Keller 324 7th Avenue Hinsdale, IL 60521	Name of Employer DeVry, Inc.	Date (month, day, year) Monthly Payroll Deductions	Amount of Each Receipt this Period \$249.99 (\$83.33 per month)
	Occupation Chairman of the Board	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$249.99			

B. Full Name, Mailing Address and ZIP Code Sharon Thomas-Parrott 1444 J.S. Federal Chicago, IL 60605	Name of Employer DeVry, Inc.	Date (month, day, year) Monthly Payroll Deductions	Amount of Each Receipt this Period \$75.00 (\$25 per month)
	Occupation Vice President	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$75.00			

C. Full Name, Mailing Address and ZIP Code Francis Cannon 519 Ranch Trail, Villa 133 Irving, TX 75083	Name of Employer DeVry, Inc.	Date (month, day, year) Bi-Weekly Payroll Deductions	Amount of Each Receipt this Period \$60.00 (\$10.00 bi-weekly)
	Occupation Dallas School President	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$60.00			

D. Full Name, Mailing Address and ZIP Code Elizabeth A. Harano-Forkins 1349 W. Winnemac Chicago, IL 60640	Name of Employer DeVry, Inc.	Date (month, day, year) Bi-Weekly Payroll Deductions	Amount of Each Receipt this Period \$48.00 (\$8.00 bi-weekly)
	Occupation Dir. of State Relations	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$48.00			

E. Full Name, Mailing Address and ZIP Code Ron Bueh 5601 Ballmill Road Dunwoody, GA 30338	Name of Employer DeVry, Inc.	Date (month, day, year) Bi-Weekly Payroll Deductions	Amount of Each Receipt this Period \$120.00 (\$20.00 bi-weekly)
	Occupation Atlanta School President	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$120.00			

F. Full Name, Mailing Address and ZIP Code (Empty)	Name of Employer (Empty)	Date (month, day, year) (Empty)	Amount of Each Receipt this Period \$0.00
	Occupation (Empty)	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$0.00			

G. Full Name, Mailing Address and ZIP Code (Empty)	Name of Employer (Empty)	Date (month, day, year) (Empty)	Amount of Each Receipt this Period \$0.00
	Occupation (Empty)	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	
Aggregate Year-to-Date > \$0.00			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only) **\$552.99**

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used to 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)
DeVry Inc. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
Friends of Newt Gingrich 1085 Holcomb Bridge Road Roswell, GA 30076	U.S. House, District State of Georgia Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General '98 Membership renewal contribution Other (specify)	01/05/98	\$200.00
B. Full Name, Mailing Address and ZIP Code Carol Moseley Braun for US Senate Kuczyński Federal Building 230 So. Dearborn Street Chicago, IL 60604	U.S. Senate State of Illinois Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Victory '98 Reception <input type="checkbox"/> Other (specify)	01/07/98	\$600.00
C. Full Name, Mailing Address and ZIP Code Committee To Elect Marge Roukema P. O. Box 625 Ridgewood, New Jersey 07451	U.S. House, 5th District State of New Jersey Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/18/98	\$250.00
D. Full Name, Mailing Address and ZIP Code Buck McKean For Congress 23929 West Valencia Blvd, Suite 410 Santa Clarita, CA 91355	U.S. House, 25th District State of California Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/18/98	\$250.00
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)	
TOTAL This Period (last page this line number only)	\$1,200.00

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 <i>4/15/98</i>
<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>RBW</i> PREPARER	<i>4/19/98</i> DATE PREPARED