REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 2 9 17 AM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

Commerce Bancorp, Inc.-PAC,FED

ADDRESS (number and street) ☐ Check if different than previously reported

1701 Route 70 East

CITY, STATE and ZIP CODE

Cherry Hill, NJ 08034

2. FEC IDENTIFICATION NUMBER

C00303156

3. [X] 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

[X] 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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7/1/97 through 12/31/97		
6. (a) Cash on Hand January 1, 1997		$ 22,025.24
(b) Cash on Hand at Beginning of Reporting Period	$ 18,350.24	
(c) Total Receipts (from Line 19)	$ 35,266.16	$ 46,591.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 53,616.40	$ 68,616.40
7. Total Disbursements (from Line 30)	$ 44,902	$ 59,902.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 8,714.40	$ 8,714.40
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 5,000	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$1	

For further information contact:
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

C. Edward Jordan, Jr.

Signature of Treasurer

Date 1/30/98

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)

FE7AN047

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

(revised 1/1/91)

NAME OF COMMITTEE: Compac-Fed

REPORT COVERING PERIOD FROM 7/1/97 TO: 12/31/97

	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)	a. 6,200.00	13,700.00	11a(i)
ii. Unitemized	b. 1,980.00	5,805.00	11a(ii)
iii. Total (add i and ii) ➤	8,180.00	19,505.00	11a(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	8,180.00	19,505.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received	10,086.16	10,086.16	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	17.000	17,000	16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	35,266.16	46,591.16	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	35,266.16	46,591.16	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21a(i)
ii. Non-Federal Share			21a(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	16,000.00	31,000.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made	15,000.00	15,000.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	13,902.00	13,902.00	28a
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤	13,902.00	13,902.00	28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	44,902.00	59,902.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	44,902.00	59,902.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8,180.00	19,505.00	32
33. Total Contribution Refunds (from line 28d)	13,902.00	13,902.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	(5,722.00)	5,603.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER line # 11

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): Compac-Fed

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frank M. Monoghan 2 Autumn Ct. Medford, NJ 08055	Commerce National Insurance Occupation: Executive	8/4/97 9/15/97 10/17/97	500.00 500.00 500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 2,000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
F. Parker Renelt 1023 N. Front St. Red Bank, NJ 07701	Commerce Bank, NA 1701 Route 70 East Cherry Hill, NJ 08034 Occupation: Banker	8/14/97	200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 200.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
George E. Norcross III 1087 Springdale Rd. Cherry Hill, NJ 08003	Commerce National Insurance Occupation: Executive	9/15/97 10/17/97	500.00 500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Vernon W. Hill II 1701 Route 70 East Cherry Hill, NJ 08034	Commerce Bank, NA Occupation: Banker	10/15/97 10/17/97	500.00 500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 2,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James R. Napolitano 269 East Saddle River Rd. Saddle River, NJ 07458	Commerce North Occupation: Banker	10/20/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Joseph Buckelew 120 Adelaide Place Lakewood, NJ 08701	Commerce National Insurance Occupation: Executive	10/20/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 2,000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John J. Tarditi, Jr. 118 Ellis St. Haddonfield, NJ 08033	Commerce Bancorp Occupation: Insurance Executive	12/4/97	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,000.00		

SUBTOTAL of Receipts This Page (optional)	5,700.00
TOTAL This Period (last page this line number only)	

FE7AN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 8

FOR LINE NUMBER line # 11

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NAME OF COMMITTEE (In Full)

Compac-Fed

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Joseph W. Linker 5 Pegasus Way Sewell, NJ 08080 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Commerce Bank 1701 Route 70 East Cherry Hill, NJ 08034 Occupation: Insurance Executive Aggregate Year-to-Date > $ 500.00	12/4/97	500.00
B. 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
C. 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
D. 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
E. 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
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

SUBTOTAL of Receipts This Page (optional) 500.00

TOTAL This Period (last page this line number only) 6,200.00

FE7ANCAT

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER line #14

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NAME OF COMMITTEE (In Full)

Compac-Red

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Compac, NJ 1701 Route 70 East Cherry Hill, NJ 08003	N/A Occupation	12/8/97	10,086.16
Receipt For: ☐ Primary ☐ General ☑ Other (specify): Loan Payment	Aggregate Year-to-Date > $ 10,086.16		
B.	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C.	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D.	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E.	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F.	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G.	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) 10,086.16

TOTAL This Period (last page this line number only) 10,086.16

FETAN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER line # 16

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NAME OF COMMITTEE (In Full)

Compac-Fed

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. LoBiondo for Congress 5914 Main St. Siute 103 Mays Landing, NJ 08330 Receipt For: [ ] Primary [ ] General [X] Other (specify): Return of Contribution	Name of Employer Occupation Aggregate Year-to-Date $ 5,000.00	8/4/97 8/4/97	1,000.00 4,000.00
B. Committee to Re-elect Congressman 1351 Kuser Rd. Chris Smith Hamilton, NJ 08619 Receipt For: [ ] Primary [ ] General [X] Other (specify): Return of Contribution	Name of Employer Occupation Aggregate Year-to-Date $ 4,000.00	8/7/97	4,000.00
C. Friends of Jim Saxton PO Box 795 Mt. Holly, NJ 08060 Receipt For: [ ] Primary [ ] General [X] Other (specify): Reutrn of Contribution	Name of Employer Occupation Aggregate Year-to-Date $ 8,000.00	8/4/97 8/12/97	4,000.00 4,000.00
D. 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
E. 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
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

SUBTOTAL of Receipts This Page (optional)	17,000.00
TOTAL This Period (last page this line number only)	17,000.00

FE7AN047

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER Line # 23

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NAME OF COMMITTEE (In Full)

Compac-Fed

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Toricelli for Senate C/O Adam Crane 1300 Connecticut Ave. Washington, DC 20036	NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify)	8/15/97 12/4/97	1,000.00 4,000.00
B. Frank for Congress 29 Emmons Dr. Bldg. F. Suite 4 Princeton, NJ 08540	NJ Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/29/97	1,000.00
C. LoBiondo for Congress 5914 Main St., Suite 103 Mayslanding, NJ 08330	NJ- 2nd District Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/27/97	4,000.00
D. Friends of Jim Saxton PO Box 795 Mt. Holly, NJ 08060	NJ-3rd District Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/27/97	4,000.00
E. Committee to Re-elect Congressman Chris Smith 1351 Kuser Rd. Hamilton, NJ 08619	NJ-4th District Disbursement for: [ ] Primary [X] General [ ] Other (specify)	10/27/97	2,000.00
F.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	16,000.00
TOTAL This Period (last page this line number only)	16,000.00

FE7ANG47

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER line # 27

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NAME OF COMMITTEE (in Full)

Compac-Fed

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Compac, NJ 1701 Route 70 East Cherry Hill, NJ 08034	loan Disbursement for: ☐ Primary ☐ General ☒ Other (specify) loan	10/29/97 11/7/97	10,000.00 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement 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 Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	15,000.00
TOTAL This Period (last page this line number only)	15,000.00

FE7/N047

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER line # 28

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NAME OF COMMITTEE (in Full)

Compac-Fed

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Joseph Buckelew 120 Adelaide Place Lakewood, NJ 08701	Return of Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify)	10/2/97	1,260.00
B. David Wel[illegible]cik 7 Shadowlake Lane Shamong, NJ 08088	Return of Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify)	10/2/97	1,050.00
C. C. Edward Jordan, Jr. 16 Tanager Way Medford, NJ 08055	Return of Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify)	10/2/97	1,680.00
D. Dennis DiFlorio 19 Stockton Drive Voorhees, NJ 08043	Return of Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify)	10/2/97	2,100.00
E. Robert Falese 1017 Riverton Rd. Moorestown, NJ 08057	Return of Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify)	10/2/97	1,932.00
F. Peter M. Musumeci, Jr. 29 Timberline Dr. Voorhees, NJ 08043	Return of Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify)	10/2/97	2,100.00
G. Vernon W. Hill, II 1701 Route 70 East Cherry Hill, NJ 08034	Return of Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify)	10/2/97	3,780.00
H.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 13,902.00

TOTAL This Period (last page this line number only) 13,902.00

FE5AN058

SCHEDULE C
(Revised 3/80)

LOANS

Page 8 of 8 for
LINE NUMBER _____
(Use separate schedules for each numbered line)

Name of Committee (In Full)
Compac - Fed

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Compac, NJ 1701 Route 70 East Cherry Hill, NJ 08034 Election: ☐ Primary ☐ General ☐ Other (specify):	10,000 5,000	10,086.16 0	0 5,000

Terms: Date Incurred 10/29/97 11/7/97 Date Due _____ Interest Rate Prime 2%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: ☐ Primary ☐ General ☐ Other (specify):			

Terms: Date Incurred _____ Date Due _____ Interest Rate _____%(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $	

SUBTOTALS This Period This Page (optional)	5,000.00
TOTALS This Period (last page in this line only)	5,000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FE7A/0047

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 2-2-98
☐	First Class Mail	POSTMARKED
☐	Registerd/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	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	
MWD		2-2-98
PREPARER		DATE PREPARED

(7/97)