



State Street Bank and Trust Company
Political Action Committee
116 Skyline Drive, Westwood, MA 02090

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 14 12 20 PM '99

Maureen S. Bateman, Chair ★ George A. Russell, Jr., Treasurer ★ F. Gregory Ahern, Secretary

January 11, 1999

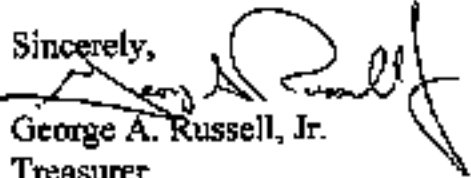
Federal Election Commission
999 E. Street
Washington, DC 20463

Re. Year End Report
State Street Bank and Trust Company
Voluntary Political Action Committee

Dear Commission:

In connection with the above fund, I am enclosing Form 3X, Report of Receipts and Disbursements, together with the detailed summary page and Schedule A and B, for the period November 24, 1998 through December 31, 1998.

Sincerely,


George A. Russell, Jr.
Treasurer

Enclosures

cc: The Commonwealth of Massachusetts
Office of The Secretary of State
1719 McCormack Building
One Ashburton Place
Boston, Ma. 02108

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 14 12 20 PM '99

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
*State Street Bank and Trust Company
Voluntary Political Action Committee*

ADDRESS (number and street) Check if different than previously reported
90 116 Skyline Drive

CITY, STATE and ZIP CODE
Westwood, MA 02090

2. FEC IDENTIFICATION NUMBER
C007275

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 |
|---------|---|-------------------------|-----------------------------------|
| 5. | Covering Period <i>11-24-98</i> through <i>12-31-98</i> | | |
| 6. | (a) Cash on Hand January 1, 19 <i>98</i> | | \$ 13,102. ⁹⁰ |
| | (b) Cash on Hand at Beginning of Reporting Period | \$ 440. ⁹⁰ | |
| | (c) Total Receipts (from Line 19) | \$ - 0 - | \$ 26,288. ⁴³ |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 440. ⁹⁰ | \$ 39,380. ⁹⁰ |
| 7. | Total Disbursements (from Line 30) | \$ - 0 - | \$ 38,950. ⁹² |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 440. ⁹⁰ | \$ 440. ⁹⁰ |
| 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
999 E Street, NW
Washington, DC 20463
Tel 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
GEORGE A. Russell, Jr.

Signature of Treasurer
[Handwritten Signature]

Date
1/4/99

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 1/1/91)

| NAME OF COMMITTEE | REPORT COVERING PERIOD | |
|---|-------------------------------|---------------------------|
| <u>3170 Le Street Bank and Trust Company, Vol. Pol. Act. Com.</u> | FROM <u>11-24-98</u> | TO: <u>12-31-98</u> |
| 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) | - 0 - | \$ 22,288 |
| ii. Unitemized | | |
| iii. Total (add i and ii) > | - 0 - | 22,288 |
| b. Political Party Committees | | |
| c. Other Political Committees (such as PACs) | | |
| d. Total Contributions (add a ii, b and c) > | - 0 - | 22,288 |
| 12. Transfers From Affiliated/Other Party Committees | | |
| 13. All Loans Received | | |
| 14. Loan Repayments Received | | |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | | |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | - 0 - | 4,000 |
| 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) > | - 0 - | 26,288 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | - 0 - | 26,288 |
| 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 | - 0 - | 37,850 |
| 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 | - | 1,100 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | - 0 - | 38,950 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | - 0 - | 38,950 |
| Net Contributions/Operating Expenditures | | |
| 32. Total Contributions (other than loans)(from line 11d) | - 0 - | 22,288 |
| 33. Total Contribution Refunds (from line 28d) | - | - |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | - 0 - | 22,288 |
| 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) > | - | - |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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)
 State Street Bank & Trust Company Vol. Pol. Action Committee

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

| | | | | |
|---|--|--|--|-----|
| SUBTOTAL of Receipts This Page (optional) | | | | |
| TOTAL This Period (last page this line number only) | | | | -0- |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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)
State Street Bank & Trust Company Vol. Pol. Action Comm. Hqs

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |
| | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional) | |
| TOTAL This Period (last page this line number only) | - 0 - |

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 checked="" type="checkbox"/> First Class Mail | POSTMARKED 1-17-99 |
| <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>SEM</i> | 1-14-99 |
| PREPARER | DATE PREPARED |