

Jay B. Myerson
ATTORNEY AT LAW
11860 Sunrise Valley Drive #100
Reston, Virginia 20191

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 26 9 53 AM '99
(703) 715-2230 FAX]

(703) 715-9600

July 23, 1999

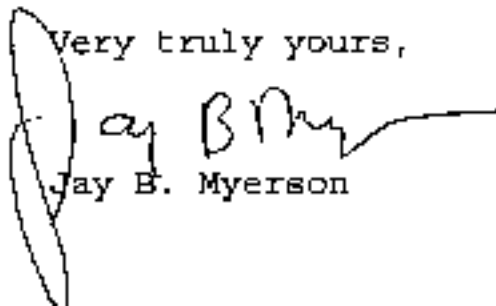
FEC
999 E Street, N.W.
Washington, D.C. 20463

Dear Sir:

Enclosed herewith for filing is the FEC Report for the period of January 1, 1999-June 30, 1999 regarding Committee for a Progressive Congress.

Please call me if you have any questions.

Very truly yours,


Jay B. Myerson

JBM:bjm
enc.

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 26 9 53 AM '99

1. NAME OF COMMITTEE (in full) Committee for a Progressive Congress		2. FEC IDENTIFICATION NUMBER CD0196824
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
e/o Gilbert & Wolfand, 2201 Wisconsin Ave., NW CITY, STATE and ZIP CODE Washington, DC 20007		

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	COLUMN B
5. Covering Period <u>1/1/99</u> through <u>6/30/99</u>		This Period	Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 <u>99</u>			\$ 12,801.02
(b) Cash on Hand at Beginning of Reporting Period		\$ 12,801.02	
(c) Total Receipts (from line 19)		\$ 3,793.46	\$ 3,793.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 16,594.48	\$ 16,594.48
7. Total Disbursements (from Line 30)		\$ 1,207.30	\$ 1,207.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 15,387.18	\$ 15,387.18
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
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

Jay B. Myerson

Signature of Treasurer

Jay B. Myerson

Date

7/22/99

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

FEC FORM 3X

(revised 5/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE <i>Committee for a Progressive Congress</i>	REPORT COVERING PERIOD	
	FROM: 1/1/99	TO: 6/30/99
	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
I. Itemized (use Schedule A)	750.00	750.00
II. Unitemized		
III. Total (add i and ii) ▶	750.00	750.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)	3,000.00	3,000.00
d. Total Contributions (add a ii, b and c) ▶	3,750.00	3,750.00
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		
17. Other Federal Receipts (Dividends, Interest, etc.)	43.46	43.46
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶	3,793.46	3,793.46
20. Total Federal Receipts (subtract line 16 from line 19) ▶	3,793.46	3,793.46
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	1,207.30	1,207.30
c. Total Operating Expenditures (Add a I, a II, and b) ▶	1,207.30	1,207.30
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. Individuals/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) ▶	1,207.30	1,207.30
31. Total Federal Disbursements (subtract line 21 a 3 from line 30) ▶	1,207.30	1,207.30
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	3,750.00	3,750.00
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans) (subtract line 33 from 32)	3,750.00	3,750.00
35. Total Federal Operating Expenditures (add 21 a I and 21 b) ▶	1,207.30	1,207.30
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ▶	1,207.30	1,207.30

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		11a1

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) **Committee for a Progressive Congress** FEC ID No. C00196824

A. Full Name, Mailing Address and ZIP Code Jay Myerson 11660 Sunrise Valley Drive #100 Reston, VA 20191	Name of Employer Law office of Jay Myerson	Date (month, day, year) 1/1/99 6/30/99	Amount of Each Receipt this Period 450.00
	Occupation Attorney		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 450.00		In-Kind
B. Full Name, Mailing Address and ZIP Code Bruce P. Cameron 1725 17th Street, NW, No. 109 Washington, DC 20009	Name of Employer Self-Employed	Date (month, day, year) 6/17/99	Amount of Each Receipt this Period 300.00
	Occupation Lobbyist		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$ 300.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$		

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	750.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In full) FEC ID No. C00196824
 Committee for a Progressive Congress

A. Full Name, Mailing Address and ZIP Code American Hospital Assn. PAC 325 Seventh Street, NW Washington, DC 20004	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	2/4/99	
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$ 3,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date	\$	

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

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)

Committee for a Progressive Congress

FEC ID No. C00196824

A. Full Name, Mailing Address and ZIP Code Merrill Lynch 1850 K Street, NW Washington, DC 20006	Name of Employer Interest Income	Date (month, day, year) 1/1/99 - 6/30/99	Amount of Each Receipt this Period 43.46
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$	43.46	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date \$		

SUBTOTAL of Receipts This Page (optional)	43.46
TOTAL This Period (last page this line number only)	43.46

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	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)		FEC ID No. C00196824	
Committee for a Progressive Congress			
A. Full Name, Mailing Address and ZIP Code Jay B. Myerson, Esquire 11860 Sunrise Valley Drive #100 Reston, VA 20191	Purpose of Disbursement <u>Office/Admin. Support</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/1/99 - 6/30/99	Amount of Each Disbursement This Period 450.00 In-Kind
B. Full Name, Mailing Address and ZIP Code D.C. Treasurer Office of Tax & Revenue P.O. Box 601 Washington, DC 20004	Purpose of Disbursement <u>State Income Taxes</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/16/99	Amount of Each Disbursement This Period 100.00
C. Full Name, Mailing Address and ZIP Code Jay B. Myerson, Esquire 11860 Sunrise Valley Drive #100 Reston, VA 20191	Purpose of Disbursement <u>courier</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/17/99	Amount of Each Disbursement This Period 7.30
D. Full Name, Mailing Address and ZIP Code Gilbert & Wolfand, P.C. 2201 Wisconsin Ave., NW, #320 Washington, DC 20007	Purpose of Disbursement <u>Accounting Services</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/18/99	Amount of Each Disbursement This Period 304.00
E. Full Name, Mailing Address and ZIP Code D.C. Treasurer Office of Tax & Revenue P.O. Box 14360 Washington, DC 20044	Purpose of Disbursement <u>Arena Tax</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/24/99	Amount of Each Disbursement This Period 25.00
F. Full Name, Mailing Address and ZIP Code Gilbert & Wolfand 2201 Wisconsin Ave., NW Washington, DC 20007	Purpose of Disbursement <u>Accounting Services</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/17/99	Amount of Each Disbursement This Period 221.00
G. Full Name, Mailing Address and ZIP Code Gilbert & Wolfand 2201 Wisconsin Ave., NW Washington, DC 20007	Purpose of Disbursement <u>Accounting Services</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/26/99	Amount of Each Disbursement This Period 25.00
H. Full Name, Mailing Address and ZIP Code Gilbert & Wolfand 2201 Wisconsin Ave., NW Washington, DC 20007	Purpose of Disbursement <u>Accounting Services</u> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/11/99	Amount of Each Disbursement This Period 75.00
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)			1,207.30
TOTAL This Period (last page this line number only)			1,207.30

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 7/26/99
<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	
<p>RNT</p>		<p>7/26/99</p>
<p>PREPARER</p>		<p>DATE PREPARED</p>