

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1 / 9
01/18/2000 15 : 69

1. NAME OF COMMITTEE (in full) American Insurance Association Federal Political Action Committee		2. FEC IDENTIFICATION NUMBER C00103143
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1130 Connecticut Avenue, NW Suite 1000	3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)	
CITY, STATE, and ZIP CODE Washington DC 20036		

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- Twelfth day report preceding _____
(election type) _____
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>12/01/1999</u> through <u>12/31/1999</u>		
6. (a) Cash on Hand, January 1, <u>1999</u>		5413.75
(b) Cash on Hand at Beginning of Reporting Period	11965.62	
(c) Total Receipts (from line 19)	8798.19	93796.89
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20763.81	99210.44
7. Total Disbursements (from line 30)	8730.55	87177.18
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12033.26	12033.26
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 989 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 Electronically Filed by Ms. Leigh Ann Pusey	
Signature of Treasurer	Date 01/31/2000

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 9/98)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE American Insurance Association Federal Political Action Committee		REPORT COVERING PERIOD FROM 12/01/1999 TO: 12/31/1999	
I. 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)	3733.06	35654.41	11.a.i.
ii. Unitemized	55.00	4281.82	11.a.ii.
iii. Total	3788.06	40176.23	11.a.iii.
b. Political Party Committees	0.00	0.00	11.b.
c. Other Political Committees (such as PACs)	5000.00	53500.00	11.c.
d. Total Contributions	8788.06	93676.23	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.)	10.13	120.46	17.
18. Transfers From Nonfederal Account for Joint Activity	0.00	0.00	18.
19. Total Receipts	8798.19	93796.69	19.
20. Total Federal Receipts	8798.19	93796.69	20.
II. Disbursements			
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	0.00	43.84	21.b.
c. Total Operating Expenditures	0.00	43.84	21.c.
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees	8230.55	85133.24	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 Sch. 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 Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	500.00	2000.00	29.
30. Total Disbursements	8730.55	87177.18	30.
31. Total Federal Disbursements	8730.55	87177.18	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	8788.06	93676.23	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	8788.06	93676.23	34.
35. Total Federal Operating Expenditures	0.00	43.84	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	0.00	43.84	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 9
			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)
American Insurance Association Federal Political Action Committee

Full Name, Mailing Address, and ZIP Code Kathleen G. Bissel 980 9th Street Suite 2080 Sacramento CA 95814	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Assistant Vice President		
		Aggregate Year-to-Date > \$ 212.50	
Full Name, Mailing Address, and ZIP Code Mr. Paul C. Blume 1501 Oak Avenue #403 Evanston IL 60201-4221	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Vice President, Midwest Region		
		Aggregate Year-to-Date > \$ 520.00	
Full Name, Mailing Address, and ZIP Code Mrs. Elizabeth Story 4014 Laurel Avenue Oakland CA 94602-3820	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation PA Director, Western Regional Office		
		Aggregate Year-to-Date > \$ 255.00	
Full Name, Mailing Address, and ZIP Code Mr. Craig Berrington 5920 Granby Road Denwood MD 20855-1419	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Senior Vice President & General Counsel		
		Aggregate Year-to-Date > \$ 1845.00	
Full Name, Mailing Address, and ZIP Code Mr. David Snyder 410 Lincoln Avenue Falls Church VA 22046-2618	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 50.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Assistant General Counsel		
		Aggregate Year-to-Date > \$ 615.00	
Full Name, Mailing Address, and ZIP Code Mr. Alan J. Stein 5513 Roosevelt Street Bethesda MD 20817-3761	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Assistant General Counsel		
		Aggregate Year-to-Date > \$ 380.00	
Full Name, Mailing Address, and ZIP Code Mr. David L. Unnewehr 12421 Madeley Lane Bowie MD 20715-2904	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Senior Research Manager		
		Aggregate Year-to-Date > \$ 260.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	4 / 9
					FOR LINE NUMBER 11A1
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NAME OF COMMITTEE (In Full) American Insurance Association Federal Political Action Committee					
Full Name, Mailing Address, and ZIP Code Mr. Robert E. Vagley 1035 Belmev Place McLean VA 22102-1551		Name of Employer American Insurance Association		Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 384.60
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation President		Aggregate Year-to-Date > \$ 4807.50	
Full Name, Mailing Address, and ZIP Code Ms. Melissa W. Shelk 4845 Yorktown Blvd. Arlington VA 22207		Name of Employer American Insurance Association		Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 80.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Assistant Vice President-Federal Affa		Aggregate Year-to-Date > \$ 835.00	
Full Name, Mailing Address, and ZIP Code Mr. Carlos A. Munoz 9603 Hillridge Drive Kensington MD 20895-3121		Name of Employer American Insurance Association		Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Sr. VP-Finance & Admin and Corporate S		Aggregate Year-to-Date > \$ 975.00	
Full Name, Mailing Address, and ZIP Code Mr. John G. Arlington 518 E Street, N.E. Washington DC 20002-5214		Name of Employer American Insurance Association		Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 38.48
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Assistant Vice President		Aggregate Year-to-Date > \$ 498.98	
Full Name, Mailing Address, and ZIP Code Mr. Daniel Zielinski 4025 Lake Glen Road Fairfax VA 22033-4379		Name of Employer American Insurance Association		Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 20.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Media Relations Director		Aggregate Year-to-Date > \$ 260.00	
Full Name, Mailing Address, and ZIP Code Mr. Ramani Ayer 22 Pasture Lane West Simsbury CT 06092-2309		Name of Employer The Hartford		Date (month, day, year) 12/08/1999	Amount of Each Receipt this Period 2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Chairman & CEO		Aggregate Year-to-Date > \$ 2000.00	
Full Name, Mailing Address, and ZIP Code Mrs. Leigh Ann Pusey 4321 Majoram Court Alexandria VA 22310-1454		Name of Employer American Insurance Association		Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 170.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		Occupation Senior Vice President - Federal Affairs		Aggregate Year-to-Date > \$ 2330.00	
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 9
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
American Insurance Association Federal Political Action Committee

Full Name, Mailing Address, and ZIP Code Mr. John G. Severcool 1130 Connecticut Ave., NW. Suite 1000 Washington DC 20036	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 125.00
	Occupation Vice President-Federal Affairs		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 508.25			
Full Name, Mailing Address, and ZIP Code Ms. Paula T. Nowakowski 1130 Connecticut Ave., NW Suite 1000 Washington DC 20036	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 80.00
	Occupation Senior Vice President - Public Affairs		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 690.00			
Full Name, Mailing Address, and ZIP Code Mr. Jeffrey R. Schmidt 1130 Connecticut Ave., NW Suite 1000 Washington DC 20036	Name of Employer American Insurance Association	Date (month, day, year) 12/08/1998	Amount of Each Receipt this Period 30.00
	Occupation Political Director		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 285.00			
Full Name, Mailing Address, and ZIP Code Mr. Hans L. Carstensen, III 108 Myrtle Street North Quincy MA 02171	Name of Employer CGU Life Insurance Company	Date (month, day, year) 12/29/1999	Amount of Each Receipt this Period 400.00
	Occupation President		
	Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
Aggregate Year-to-Date > \$ 400.00			

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SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	3733.06

SCHEDULE A	ITEMIZED RECEIPTS	6 / 9
		Use separate schedule(s) for each category of the Detailed Summary Page
		FOR LINE NUMBER 11C
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) American Insurance Association Federal Political Action Committee		
Full Name, Mailing Address, and ZIP Code CHUBB PAC 15 Mountain View Road PO Box 1815 Warren NJ 07059-6711	Name of Employer CHUBB PAC	Date (month, day, year) 12/20/1998
	Occupation	Amount of Each Receipt This Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate Year-to-Date > 5 5000.00	
<input type="checkbox"/> Other (specify) :		
SUBTOTALS of Receipts This Page (Optional)		
TOTALS This Period (last page this line number only)		5000.00

SCHEDULE A	ITEMIZED RECEIPTS	7 / 9
		Use separate schedule(s) for each category of the Detailed Summary Page
		FOR LINE NUMBER 17
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) American Insurance Association Federal Political Action Committee		
Full Name, Mailing Address, and ZIP Code First Union Bank, N.A. 1100 Connecticut Avenue, NW Washington DC 20036	Name of Employer First Union Bank, N.A.	Date (month, day, year) 12/31/1999
	Occupation	Amount of Each Receipt This Period 10.13
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5 120.48	
SUBTOTALS of Receipts This Page (Optional)		
TOTALS This Period (last page this line number only)		10.13

SCHEDULE B		ITEMIZED DISBURSEMENTS		8 / 9
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 23
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) American Insurance Association Federal Political Action Committee				
Full Name, Mailing Address, and ZIP Code Leadership PAC 2000 515 King Street Suite 420 Alexandria VA 22314	Purpose of Disbursement (- VA -) Contribution: Leadership PAC 2000 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Date (month, day, year) 12/07/1998 Contribution: Leadership PAC 2000	Amount of Each Disbursement This Period 3500.00	
Full Name, Mailing Address, and ZIP Code Mike Rogers for Congress PO Box 581 Brighton MI 48116	Purpose of Disbursement (House - MI - 8) Contribution: Mike Rogers -US-HOUSE-MI-8 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/09/1998 Contribution: Mike Rogers -US-HOUSE-MI-8	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Linder for Congress Committee 416 South Harrison Shelbyville IN 46176	Purpose of Disbursement (House - IN - 2) Contribution: Jeff Under -US-HOUSE-IN-2 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/14/1998 Contribution: Jeff Under -US-HOUSE-IN-2	Amount of Each Disbursement This Period 500.00	
Full Name, Mailing Address, and ZIP Code The City Club of Washington 555 13th Street, NW Washington DC 20004	Purpose of Disbursement (House - MI - 8) In-Kind Contribution: Mike Rogers -US-HOUSE-MI-8 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/14/1998 In-Kind Contribution: Mike Rogers -US-HOUSE-MI-8	Amount of Each Disbursement This Period 200.45	
Full Name, Mailing Address, and ZIP Code Premiere Technologies, Inc. Attn: Accounts Payable PO Box 14024 Newark NJ 07198	Purpose of Disbursement (House - MI - 8) In-Kind Contribution: Mike Rogers -US-HOUSE-MI-8 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/14/1998 In-Kind Contribution: Mike Rogers -US-HOUSE-MI-8	Amount of Each Disbursement This Period 15.15	
Full Name, Mailing Address, and ZIP Code Premiere Technologies, Inc. Attn: Accounts Payable PO Box 14024 Newark NJ 07198	Purpose of Disbursement (House - MI - 8) In-Kind Contribution: Mike Rogers -US-HOUSE-MI-8 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/14/1998 In-Kind Contribution: Mike Rogers -US-HOUSE-MI-8	Amount of Each Disbursement This Period 14.95	
Full Name, Mailing Address, and ZIP Code Bill Brady for Congress 2203 Eastland Drive Bloomington IL 61704	Purpose of Disbursement (House - IL - 15) Contribution: William E. Brady -US-HOUSE-IL-15 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/14/1998 Contribution: William E. Brady -US-HOUSE-IL-15	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Friends of Jon Porter Committee 631 North Stephine Street, #143 Henderson NV 89014	Purpose of Disbursement (House - NV - 1) Contribution: Jon Porter -US-HOUSE-NV-1 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/14/1998 Contribution: Jon Porter -US-HOUSE-NV-1	Amount of Each Disbursement This Period 1000.00	
Full Name, Mailing Address, and ZIP Code Citizens for Sarbanes PO Box 26222 Baltimore MD 21210	Purpose of Disbursement (Senate - MD - 0) Contribution: Paul S. Sarbanes -US-SENATE-MD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : Primary	Date (month, day, year) 12/16/1998 Contribution: Paul S. Sarbanes -US-SENATE-MD	Amount of Each Disbursement This Period 1000.00	
SUBTOTALS of Disbursements This Page (Optional)				
TOTALS This Period (last page this line number only)			8230.55	

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	9 / 9 FOR LINE NUMBER 28
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) American Insurance Association Federal Political Action Committee			
Full Name, Mailing Address, and ZIP Code Democratic Party of Wisconsin 222 State Street Madison WI 53703	Purpose of Disbursement (- WI -) Contribution to Democratic Party of Wisc	Date (month, day, year) 12/22/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Other	Contribution to Democratic Party of Wisconsin from Federal Account	
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			500.00