



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

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COMMISSION MAIL ROOM

AUG 20 1 53 PM '99

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AUG - 2 1999

TEAMSTERS
LOC. 886

JUL 28 1999

Shirley Russell, Treasurer
DRIVE Political Fund Chapter 886
3528 West Reno
Oklahoma City, OK 73107

Identification Number: C00000489

Reference: 12 Day Pre-General Report (10/1/98-10/14/98)

Dear Ms. Russell:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Line 6(a) of the Summary Page represents the total cash-on-hand as of January 1, 1998. This figure should be the same on all the reports covering the calendar year. Please amend your report to clarify the change made in Line 6(a).

-The total listed on Line 7, Column B of the Summary Page appears to be incorrect. Please be advised that you should add the "Calendar Year-to-Date" total from your previous report to the current "Total This Period" figure from Column A to derive the correct Column B total. Please amend your report and any subsequent reports that may be affected by this correction.

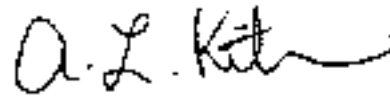
-Please provide the total(s) for Line 30, Column B of the Detailed Summary Page. Note that changes in your figures may affect your Column B totals on this report and/or on subsequent reports.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our

P.S. AMENDED AS REQUESTED!

toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,

A handwritten signature in cursive script that reads "A. L. Kitchen".

Antoinette Kitchen
Reports Analyst
Reports Analysis Division

271

REPORT OF RECEIPTS AND DISBURSEMENTS

OK COUNCIL: Z 291 855 166
 DRIVE: Z 291 855 165
 FED: Z 291 855 164

For Other Than An Authorized Committee
 (Summary Page)

RECEIVED
 FEDERAL ELECTION
 COMMISSION MAIL ROOM

AUG 20 1 53 PM '99

USE FEC MAILING LABEL
 OR
 TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
**D. R. I. V. E.
 TEAMSTERS LOCAL UNION 886**

ADDRESS (number and street) Check if different than previously reported
3528 West Reno (P.O. Box 25556)

CITY, STATE and ZIP CODE
Oklahoma City, OK 73107

2. FEC IDENTIFICATION NUMBER
00000489

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
 - March 20
 - April 20
 - May 20
 - June 20
 - July 20
 - August 20
 - September 20
 - October 20
 - November 20
 - December 20
 - January 31

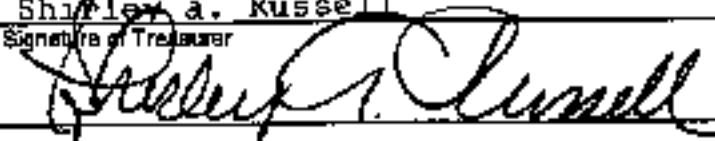
- 12-Day Pre-Election Report for the State
 (Type of Election)
 election on 11/3/98 in the State of Oklahoma
- 30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period <u>10/1/98</u> through <u>10/14/98</u>		This Period	Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 19____		\$ 6,449.77
(b)	Cash on Hand at Beginning of Reporting Period	\$ 6,449.77	
(c)	Total Receipts (from Line 19)	\$ -0-	\$ -0-
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 6,449.77	\$ 6,449.77
7.	Total Disbursements (from Line 30)	\$ -0-	\$ 2,000.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4,449.77	\$ 4,449.77
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	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)	\$	

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
Shirley A. Russell

Signature of Treasurer


Date
8/12/99

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 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE D.R.I.V.E. POLITICAL FUND		REPORT COVERING PERIOD FROM 10/1/98 TO 10/14/98	
		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)		11(a)
ii.	Unitemized		11(b)
iii.	Total (add i and ii) >		11(c)
b.	Political Party Committees		11(d)
c.	Other Political Committees (such as PACs)		11(e)
d.	Total Contributions (add a iii, b and c) >		11(f)
12.	Transfers From Affiliated/Other Party Committees		12
13.	All Loans Received		13
14.	Loan Repayments Received		14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		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) >		19 4,449.77
20.	Total Federal Receipts (subtract line 18 from line 19) >		20
II Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		21(a)
ii.	Non-Federal Share		21(b)
b.	Other Federal Operating Expenditures		21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >		21(d)
22.	Transfers to Affiliated/Other Party Committees		22
23.	Contributions to Federal Candidates/Committees and Other Political Committees		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		27
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees		28(a)
b.	Political Party Committees		28(b)
c.	Other Political Committees (such as PACs)		28(c)
d.	Total Contribution Refunds (add a, b and c) >		28(d)
29.	Other Disbursements		29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		30 2,000.00
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >		31
III Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)		32
33.	Total Contribution Refunds (from line 28d)		33
34.	Net Contributions (other than loans)(subtract line 33 from 32)		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

NO RECEIPTS THIS PERIOD

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
FOR LINE NUMBER 19

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)

D.R.I.V.E. POLITICAL FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	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):	Aggregate Year-to-Date \$		

NO RECEIPTS THIS PERIOD!

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4
FOR LINE NUMBER 30

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)

D.R.I.V.E. POLITICAL FUND

A. 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
B. 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
C. 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
D. 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
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

NO DISBURSEMENTS THIS PERIOD

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

