REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

C00258228 091798 N 209
EDWARD J BABBITT
WESTERN AND SOUTHERN LIFE INSU
RANCE CO POLITICAL ACTION COMM
400 BROADWAY
CINCINNATI OH 45202

RECEIVED
FEDERAL ELECTION
COMMISSION
OCT 14 11 23 AM '98

2. FEC IDENTIFICATION NUMBER

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 7-01-98 through 9-30-98		
6. (a) Cash on Hand January 1, 19 98		$ 2,619.75
(b) Cash on Hand at Beginning of Reporting Period	$5,473.40	
(c) Total Receipts (from Line 19)	$2,480.19	$14,683.84
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$7,953.59	$17,303.59
7. Total Disbursements (from Line 30)	$5,425.00	$14,775.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$2,528.59	$ 2,528.59
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 202-694-1100

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
Edward J. Babbitt

Signature of Treasurer
Edward J Babbitt

Date
10-9-98

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 9/98)

FE8A#064

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

(revised 1/1/91)

NAME OF COMMITTEE The Western & Southern Life Insurance Co. Political Action Committee

REPORT COVERING PERIOD FROM 7-1-98 TO: 9-30-98

	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)	$1,797.19	$10,769.38	11(a)(i)
ii. Unitemized	683.00	3,914.46	11(a)(ii)
iii. Total (add i and ii) ➤	2,480.19	14,683.84	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a iii, b and c) ➤	2,480.19	14,683.84	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	2,480.19	14,683.84	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	2,480.19	14,683.84	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	0	0	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	250.00	1,900.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0	0	28(d)
29. Other Disbursements	5,175.00	12,875.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	5,425.00	14,775.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	5,425.00	14,775.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,480.19	14,683.84	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,480.19	14,683.84	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0	0	37

FE8AN084

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11ai

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)
The Western & Southern Life Insurance Co. Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Herb Brown, 8777 Grenada Drive, Cincinnati, OH 45231	The Western & Southern Life Ins. Company / Vice President	2-24-98 (Lump Sum + Pyrl Ded)	$198.00 (3 mos pyrl ded @ $66 per mo.)
Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Aggregate Year-to-Date $ 591.00		
B. Robert Cogan, Three Radnor Corp. Center, 100 MatsonFord Rd., Ste. 420, Radnor, PA 19087-8538	Capital Analysts, Inc. / President	1-14-98	$138.00 (3 mos. pyrl ded @ $46 per mo.)
Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Aggregate Year-to-Date $ 368.00		
C. Edward S. Heenan, 7476 Fitzroy Court, Cincinnati, Ohio 45241	The Western & Southern Life Ins. Company / Vice Pres. & Comptroller	2-12-98	$150.00 (3 mos. pyrl ded. @ $50 per mo.)
Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Aggregate Year-to-Date $ 350.00		
D. Dale Hennie, 990 Hickoryview Drive, Cincinnati, Ohio 45233	The Western & Southern Life Ins. Company / Sr. Vice President	1-10-98	$120.00 (3 mos. pyrl ded @ $40 per mo.)
Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Aggregate Year-to-Date $ 320.00		
E. Carroll R. Hutchinson, 8659 Hollyhock Drive, Cincinnati, Ohio 45231	The Western & Southern Life Ins. Company / Sr. Vice President	2-11-98	$150.00 (3 mos. pyrl ded. @ $50 per mo.)
Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Aggregate Year-to-Date $ 350.00		
F. Bill Ledwin, 6175 S. Clippinger Road, Cincinnati, OH 45243	Ft. Washington Investment Advisors / President	1-10-98 (Lump Sum + Pyrl Ded)	$63.00 (3 mos. pyrl ded. @ $21 per mo.)
Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Aggregate Year-to-Date $ 397.00		
G. Jill McGruder, 6820 Hammerstone Way, Cincinnati, OH 45227	The Western & Southern Life Ins. Company / Sr. Vice President	1-98	$150.00 (3 mos. pyrl ded. @ $50 per mo.)
Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Aggregate Year-to-Date $ 400.00		

SUBTOTAL of Receipts This Page (optional) $969.00

TOTAL This Period (last page this line number only) .....

FE8NN064

SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11ai

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NAME OF COMMITTEE (In Full)

The Western & Southern Life Insurance Co. Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. J. J. Miller 10800 Doral Court Union, KY 41091 Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	The Western & Southern Life Ins. Company Occupation: Sr. Vice President Aggregate Year-to-Date $ 400.00	1-07-98	$150.00 (3 mos. pyrl ded. @ $50 per month)
B. Kenneth A. Palmer 603 Palmer Court Crestview Hills, KY 41017 Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	The Western & Southern Life Ins. Company Occupation: Sr. Vice President Aggregate Year-to-Date $ $400.00	1-08-98	$150.00 (3 mos. pyrl ded. @ $50 per month)
C. Mario San Marco 11225 Terwilliger's Run Cincinnati, OH 45249 Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	Eagle Realty Group Occupation: President Aggregate Year-to-Date $ 320.00	1-07-98	$120.00 (6 bi-wkly ded. @ $20 bi-wkly)
D. Robert Starnes 7430 Waterford Dr., #201 Mason, Ohio 45040 Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	The Western & Southern Life Ins. Company Occupation: Vice President (Retired) Aggregate Year-to-Date $ 350.00	1-07-98	$100.00 (2 mos. pyrl ded. @ $50 per month)
E. Richard K. Taulbee 9215 Applecrest Court Cincinnati, Ohio 45242 Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	The Western & Southern Life Ins. Company Occupation: Vice President Aggregate Year-to-Date $ 240.00	1-08-98	$90.00 (3 mos. pyrl ded. @ $30 per month)
F. Donald J. Wuebbling 2949 Pineridge Avenue Cincinnati, Ohio 45208 Receipt For: ☐ Primary ☐ General ☐ Other (specify): Not Applicable	The Western & Southern Life Ins. Company Occupation: Vice President & General Counsel Aggregate Year-to-Date $ 581.84	1-12-98	$218.19 (3 mos. pyrl ded @ $72.73 per month)
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) ..... $ 828.19

TOTAL This Period (last page this line number only) $1,797.19

FE5AND84

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

The Western and Southern Life Insurance Co. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ken Lucas for Congress 8100 Burlington Pike STE 334 Florence, KY 41042	Candidate for U.S. Representative, Fourth Dist., KY Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9-29-98	$250.00
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)	$250.00
TOTAL This Period (last page this line number only)	$250.00

FE8AN064

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
The Western and Southern Life Insurance Co. Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Dusty Rhodes Campaign 6929 Juniperview Cincinnati, OH 45243	Candidate for Hamilton County Auditor	7-9-98	$ 150.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Suster for Justice Committee 405 East Town Street Columbus, OH 43215	Candidate for Ohio Supreme Court	8-10-98	$ 250.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Ohioans for Blackwell 75 East Gay Street Columbus, OH 43215	Candidate for Ohio Secretary of State	9-6-98	$ 500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Hottinger 386 Sabrecutt Drive Newark, OH 43055	Candidate for Ohio State Senate	9-8-98	$ 150.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Mottley for State Representative 1641 Longbow Lane West Carrollton, OH 45449	Candidate for State Representative, Ohio	9-8-98	$ 150.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Elect Householder Committee 642 Wyandotte Avenue Logan, OH 43138-0801	Candidate for Ohio State Representative	9-8-98	$ 150.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Ohio Republican Party - State Candidate Fund 211 South Fifth Street Columbus, OH 43215	Funds for Ohio State Candidates (Repub-liean)	9-11-98	$3,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Finan For State Senate 6927 Whippoorwill Drive Cincinnati, OH 45230	Candidate for Ohio State Senate	9-29-98	$ 500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary [ ] General [X] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Committee to Re-Elect Chief Justice Thomas Moyer Box 15367 Columbus, OH 43215-0367	Candidate for Chief Justice, Ohio Supreme Court	9-29-98	$ 125.00

SUBTOTAL of Disbursements This Page (optional) $4,975.00

TOTAL This Period (last page this line number only) .....

FEBA/0/04

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

The Western and Southern Life Insurance Co. Political Action Committee

A. Full Name, Mailing Address and ZIP Code Hamilton County Democratic Party 615 Main Street Cincinnati, Ohio 45202	Purpose of Disbursement Funding For Local & State Democratic Candidates Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 9-29-98	Amount of Each Disbursement This Period $200.00
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

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

FEBANC64

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.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 10-9-98
☐	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	

Jm D
PREPARER

10/14/98
DATE PREPARED

(4/98)