48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of $1000 or more, received within 20 days of the election.

1. NAME OF COMMITTEE IN FULL: CHAMBLISS FOR CONGRESS

ADDRESS (number and street): POST OFFICE BOX 4084

CITY, STATE and ZIP CODE: MACON, GEORGIA 31208

2. NAME OF CANDIDATE: SAXBY CHAMBLISS

3. OFFICE SOUGHT: GA/8TH

4. FEC IDENTIFICATION NUMBER: C00266932

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.

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount
REALTORS PAC 430 N. Michigan Ave. Chicago, IL 60611		10/29/98	2000.00
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
AMERICAN HOSPITAL ASSOC. PAC 325 Seventh Street, NW WASHINGTON, DC 20004		10/29/98	1000.00
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
Dr. Bill Clark, Jr. P.O. Box 2009 WAYCROSS, GA 31501	CLARK EYE CLINIC OPTOMETRIST	10/29/98	1000.00
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
Sue Clark 1409 SATILLA BOULEVARD WAYCROSS, GA 31501	retired	10/29/98	1000.00
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount**
Jill Clark 501 Hill Street WAYCROSS, GA 31501	housewife	10/29/98	1000.00

SIGNATURE (optional) | DATE

For further information contact:
Federal Election Commission
999 E Street, NW, Washington, DC 20463
Toll Free 800-424-9530, Local 202-219-3420

FEC FORM 6
(11/93)

6-00172