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)
Teen Republicans for Utilizing Sensible Tactics TRUSTPAC

ADDRESS (number and street) ☐ Check if different than previously reported
P.O. Box 221543

CITY, STATE and ZIP CODE
Chantilly, VA 20151

FEDERAL ELECTION COMMISSION
Dec 3 11 06 AM '98

2. FEC IDENTIFICATION NUMBER
C00330720

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 11-3 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 10-15 through 11-23		
6. (a) Cash on Hand January 1, 19 98		$ 441.89
(b) Cash on Hand at Beginning of Reporting Period	$ 7642.73	
(c) Total Receipts (from Line 19)	$ 8,750	$ 34,810.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 16392.73	$ 35,252.39
7. Total Disbursements (from Line 30)	$ 2701.88	$ 21,561.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 13690.85	$ 13690.85
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
Thomas R. Donnelly Jr.

Signature of Treasurer
Thomas R. Donnelly Jr.

Date
12-1-98

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 3/93)

FESAN\21

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X (revised 1/1/91)

NAME OF COMMITTEE: TRUST PAC Team Republicans for Utilizing Sensible Tactics

REPORT COVERING PERIOD FROM: TO:

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)	750.00	7,250	11(a)(i)
ii. Unitemized	0	1,000	11(a)(ii)
iii. Total (add i and ii) ➤	750.00	8,250	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	8,000	26,500	11(c)
d. Total Contributions (add a iii, b and c) ➤	8,750	34,750	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	$60.50	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) ➤	8,750	34,810.50	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	8,750	34,810.50	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	1,701.88	7115.19	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	1701.88	7115.19	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000	14,750	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	0	0	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	2701.88	21561.54	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	2701.88	21561.54	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8,750	36,750	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	8,750	36,750	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	1701.88	7115.19	35
36. Offsets to Operating Expenditures (from line 15)	0	60.50	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	1701.88	7054.69	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 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): TRUST PAC Team Republicans for Utilizing Sensible Tactics

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Kim McKernan, 123 W Maple St., Alexandria, VA 22301	Name of Employer: O'Brian, Calio Occupation: Principal	10-17-98	$250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 250		
B. Lydia Calio, 3701 McKinley St. NW, Washington, DC 20016	Name of Employer: Homemaker Occupation:	10-17-98	$500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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

FEBAN131

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER 11C

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NAME OF COMMITTEE (In Full)

TRUSTPAC Team Republicans for Utilizing Sensible Tactics

A. Full Name, Mailing Address and ZIP Code Duquesne Light Corp PAC 411 7th Ave Pittsburg PA 15230	Name of Employer	Date (month, day, year) 10-28-98	Amount of Each Receipt this Period $1,000
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000		
B. Full Name, Mailing Address and ZIP Code Energy PAC P.O. 31995 Jackson, MS 39286	Name of Employer	Date (month, day, year) 10-29-98	Amount of Each Receipt this Period $1,000
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000		
C. Full Name, Mailing Address and ZIP Code Columbia Energy PAC 13880 Dulles Corner Lane Herndon, VA. 20171	Name of Employer	Date (month, day, year) 10-22-98	Amount of Each Receipt this Period $500
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 500		
D. Full Name, Mailing Address and ZIP Code Public Service Elect & Gas PAC 80 Park Plaza #4A Newark, NJ 07102	Name of Employer	Date (month, day, year) 10-7-98	Amount of Each Receipt this Period $1,000
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000		
E. Full Name, Mailing Address and ZIP Code Allegheny Power PAC 10435 Downsville Pike Hagerstown, MD 21740	Name of Employer	Date (month, day, year) 10-7-98	Amount of Each Receipt this Period $1,000
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 1,000		
F. Full Name, Mailing Address and ZIP Code GAS PAC 1515 Wilson Blvd. Arlington, VA 22209	Name of Employer	Date (month, day, year) 10-13-98	Amount of Each Receipt this Period $500
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 500		
G. Full Name, Mailing Address and ZIP Code N.Y. State Elect. & Gas. PAC 4500 Vestal Pkwy. East Binghamton NY 13902	Name of Employer	Date (month, day, year) 10-9-98	Amount of Each Receipt this Period $500
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $ 500		

SUBTOTAL of Receipts This Page (optional) > $5,500

TOTAL This Period (last page this line number only) > $5,500

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full): TRUST PAC Team Republicans for Utilizing Sensible Tactics

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Southern Company Services PAC, 241 Ralph McGill Blvd., Atlanta GA 30308		10-9-98	$500
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 500		
B. American Hospital Assoc. PAC, 325 7th St, NW, Washington, DC 20004		9-28-98	$1,000
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 1000		
C. NorthEast Utilities PAC, Hartford, CT 06115		9-28-98	$1,000
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $ 1,000		
D. Full Name, Mailing Address and ZIP Code			
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code			
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code			
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code			
Receipt For: Primary / General / Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) > $2,500

TOTAL This Period (last page this line number only) > $8,000

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21 A2

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NAME OF COMMITTEE (In Full): TRUST PAC Team Republicans for Military Sensible Tactics

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bittersweet Catering 103 N. Alfred St. Alexandria, VA 22314	Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11-18-98	303.65
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Century Nat'l Bank 1875 Eye St. NW Washington, DC 20006	Service Charges Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11-1-98	29.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barolo 223 Pennsylvania Ave., SE Washington, DC.	fundraising Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	10-15-98	1368.23
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional) $1701.88

TOTAL This Period (last page this line number only) $1701.88

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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)
TRUST PAC Team Republicans for Values Sensible Tactics

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Joe Fox for Congress P.O. Box 1054 Abington, PA 19404	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10-30-98	$500
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Hickey for the House 601 Orchard Northville, MI 48167	Contribution Disbursement for: ☐ Primary ☑ General ☐ Other (specify)	10-30-98	$500
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) $1,000

TOTAL This Period (last page this line number only) $1,000

FE8AN121

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 12/3/98
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	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	

PREPARER

12/3/98
DATE PREPARED

(4/98)