

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) National Action Committee (NACPAC) ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 701 Brickell Avenue, Suite 3260 CITY, STATE and ZIP CODE Miami, FL 33131	RECEIVED FEDERAL ELECTION COMMISSION OCT 13 11 32 AM '98 2. FEC IDENTIFICATION NUMBER C00147983 3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
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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 <u>07/01/98</u> through <u>09/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 15,454
(b) Cash on Hand at Beginning of Reporting Period	\$ 17,910	
(c) Total Receipts (from Line 18)	\$ 4,113	\$ 54,613
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 22,023	\$ 70,067
7. Total Disbursements (from Line 30)	\$ 19,749	\$ 67,793
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2,274	\$ 2,274
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ N/A	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)	\$ N/A	

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 Judith Ellenbogen by Chairman, Mark R. Vogel	Date 10/05/98
Signature of Treasurer 	

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 3/93)

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

(revised 1/1/91)

NAME OF COMMITTEE National Action Committee (NACPAC)		REPORT COVERING PERIOD FROM 07/01/98 TO 09/30/98	
		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)		2,125	46,485
ii. Unitemized		1,941	7,955
iii. Total (add i and ii) >		4,066	54,440
b. Political Party Committees		N/A	N/A
c. Other Political Committees (such as PACs)		N/A	N/A
d. Total Contributions (add a ii, b and c) >		4,066	54,440
12. Transfers from Affiliated/Other Party Committees		N/A	N/A
13. All Loans Received		N/A	N/A
14. Loan Repayments Received		N/A	N/A
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		N/A	N/A
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		N/A	N/A
17. Other Federal Receipts (Dividends, Interest, etc.)	Interest	47	173
18. Transfers from Nonfederal Account for Joint Activity		N/A	N/A
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		4,113	54,613
20. Total Federal Receipts (subtract line 18 from line 19) >		4,113	54,613
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		N/A	N/A
ii. Non-Federal Share		N/A	N/A
b. Other Federal Operating Expenditures		2,999	10,543
c. Total Operating Expenditures (add a i, a ii, and b) >		2,999	10,543
22. Transfers to Affiliated/Other Party Committees		N/A	N/A
23. Contributions to Federal Candidates/Committees and Other Political Committees		16,750	57,250
24. Independent Expenditures (use Schedule E)		N/A	N/A
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 44-1a(d)) (use Schedule F)		N/A	N/A
26. Loan Repayments Made		N/A	N/A
27. Loans Made		N/A	N/A
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		N/A	N/A
b. Political Party Committees		N/A	N/A
c. Other Political Committees (such as PACs)		N/A	N/A
d. Total Contribution Refunds (add a, b and c) >		N/A	N/A
29. Other Disbursements		N/A	N/A
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 29d, and 29) >		19,749	67,793
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		19,749	67,793
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		4,066	54,400
33. Total Contribution Refunds (from line 28d)		N/A	N/A
34. Net Contributions (other than loans)(subtract line 33 from 32)		4,066	54,400
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		2,999	10,543
36. Offsets to Operating Expenditures (from line 15)		N/A	N/A
37. Net Operating Expenditures (subtract line 36 from 35) >		2,999	10,543

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11, a, 1

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)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jerome Bettner 1490 W. 49th Place, #555 Hialeah, FL 33012	Self	08/12/98	350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Luncheon	Occupation: Surgeon Aggregate Year-to-Date > \$ 350		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sanford Miot 1 S.E. 3rd Avenue, 15th Floor Miami, FL 33131	Self	08/17/98	25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Luncheon	Occupation: Real Estate Development Aggregate Year-to-Date > \$ 2,700		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Jacobson 903 N.E. 199th Street, #208 Miami, FL 33179	Self	08/17/98 09/28/98	25 25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Luncheon	Occupation: Software Design Aggregate Year-to-Date > \$ 825		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stuart Sisisky 6690 Windsor Lane Miami Beach, FL 33141	Northern Trust Bank	08/17/98 09/28/98	25 25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Luncheon	Occupation: Vice President Aggregate Year-to-Date > \$ 3,600		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
H. Allen Benowitz 46 S.W. 1st Street, #100 Miami, FL 33130	Self	08/17/98	25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Luncheon	Occupation: Court Reporter Aggregate Year-to-Date > \$ 575		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charlotte Chester 2950 Alton Road Miami Beach, FL 33140	Self	08/17/98	25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Luncheon	Occupation: Real Estate Aggregate Year-to-Date > \$ 700		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Neal Sommett 2 S. Biscayne Blvd., #2600 Miami, FL 33131	Self	08/31/98	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dues	Occupation: Attorney Aggregate Year-to-Date > \$ 500		

SUBTOTAL of Receipts This Page (optional)

1,025

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11, a, 1

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 committees.

NAME OF COMMITTEE (In Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Stanford Alexander 203 Timberwilde Houston, TX 77024	Weingarten Realty Investors	09/ /98	500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues</u>	Occupation Real Estate Executive Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Melvin Dow 9 Greenway Plaza, Suite 2300 Houston, TX 77046	Dow, Cogburn	09/18/98	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues</u>	Occupation Attorney Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Mandel 5223 N. Bay Road Miami Beach, FL 33140	Self	09/18/98	25
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Luncheon</u>	Occupation Attorney Aggregate Year-to-Date > \$ 330		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marvin Lando 1121 Manati Avenue Coral Gables, FL 33146	Deloitte & Touche	09/22/98	250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues</u>	Occupation C.P.A. Aggregate Year-to-Date > \$ 250		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Alan Weisberg 1401 Brickell Avenue, Suite 800 Miami, FL 33131	Self	09/28/98	75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Luncheon</u>	Occupation Attorney Aggregate Year-to-Date > \$ 1,225		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	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):	Occupation Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional) 1,100

TOTAL This Period (last page this line number only) 2,125

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER 11, 8, ii.

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NAME OF COMMITTEE (in Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code Itemized receipts under \$200	Name of Employer Occupation	Date (month, day, year) 07/01/98 through 09/30/98	Amount of Each Receipt this Period 1,941
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): <u>Dues & Luncheons</u>			
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code			
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			
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			
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			
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			
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			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1,941

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21.b.

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NAME OF COMMITTEE (In Full)

National Action Committee (NACPAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mark R. Vogel, P.A. 701 Brickell Avenue, #3260 Miami, FL 33131	Reimbursement of Adm. Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/03/98 08/03/98 09/01/98	750 750 750
B. Full Name, Mailing Address and ZIP Code Bankers Club 2 S. Biscayne Blvd., 14th Floor Miami, FL 33131	Purpose of Disbursement Luncheon Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/28/98	472.29
C. Full Name, Mailing Address and ZIP Code Miscellaneous Disbursements Under \$200	Purpose of Disbursement Copies, courier, supplies, reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/01/98 through 09/30/98	276.32
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

SUBTOTAL of Disbursements This Page (optional) \$2,998.61

TOTAL This Period (last page this line number only) Rounded \$2,999.00

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)

National Action Committee (NACFAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$500 U.S. House of Rep. Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 07/09/98	Amount of Each Disbursement This Period 500
Cong. Leonard Boswell U.S. House of Representatives Washington, D.C. 20515			
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$500 U.S. House of Rep. Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 07/09/98	Amount of Each Disbursement This Period 500
Cong. Anne Northup U.S. House of Representatives Washington, D.C. 20515			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$250 U.S. House of Rep. Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 07/09/98	Amount of Each Disbursement This Period 250
Cong. Ike Skelton U.S. House of Representatives Washington, D.C. 20515			
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$1,500 U.S. House of Rep. Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 07/01/98	Amount of Each Disbursement This Period 1,500
Cong. Jerry Weller U.S. House of Representatives Washington, D.C. 20515			
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$500 U.S. House of Rep. Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 08/05/98	Amount of Each Disbursement This Period 500
Cong. Jim Davis U.S. House of Representatives Washington, D.C. 20515			
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$500 U.S. House of Rep. Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 08/06/98	Amount of Each Disbursement This Period 500
Cong. Elijah Cummings U.S. House of Representatives Washington, D.C. 20515			
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$5,000 U.S. Senate Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 08/14/98	Amount of Each Disbursement This Period 5,000
Cong. Jim Bunning U.S. House of Representatives Washington, D.C. 20515			
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: \$4,000 U.S. Senate Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 08/21/98 09/16/98	Amount of Each Disbursement This Period 1,000 2,000
Sen. Harry Reid U.S. Senate Washington, D.C. 20510			
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement YTD: 5,000 U.S. Senate Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 General	Date (month, day, year) 09/28/98	Amount of Each Disbursement This Period 5,000
Sen. Patty Murray U.S. Senate Washington, D.C. 20510			

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

16,750

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>10-05-98</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>KRT</i> PREPARER	<i>10-13-98</i> DATE PREPARED