

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

1. NAME OF COMMITTEE (in full) First Union Corporation Employees Good Government "P" Fund II	SEP 21 9 22 AM '98
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported ONE FIRST UNION CENTER ATTN: LYNN L LEANDER	2. FEC IDENTIFICATION NUMBER C00300178
CITY, STATE and ZIP CODE CHARLOTTE, NC 282890630	3. <input checked="" type="checkbox"/> 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
- Twelfth day report preceding _____
(Type of Election)
 election on _____ in the State of _____
- Thirtieth day 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>08/01/98</u> through <u>08/31/98</u>		
6. (a) Cash on Hand January 1, 1998		\$ 8,036.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 101,262.28	
(c) Total Receipts (from Line 19)	\$ 18,977.50	\$ 121,299.68
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 120,239.78	\$ 129,336.57
7. Total Disbursements (from Line 30)	\$ 15,500.00	\$ 24,596.79
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).	\$ 104,739.78	\$ 104,739.78
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9880 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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
RUFUS F. BEATTY, TREASURER

Signature of Treasurer: Date: **9-17-98**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE First Union Corporation Employees Good Government "P" Fund II	REPORT COVERING PERIOD FROM 08/01/98 TO 08/31/98	
	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)	14,730.00	15,188.00
ii. Unitemized	4,247.50	5,369.00
iii. Total	18,977.50	20,549.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions	18,977.50	20,549.00
12. Transfers From Affiliated/Other Party Committees	0.00	100,750.68
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates & Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts	18,977.50	121,299.68
20. Total Federal Receipts	18,977.50	121,299.68
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	0.00	96.79
c. Total Operating Expenditures	0.00	96.79
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	15,500.00	24,500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441 a(d))(use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contribution Refunds	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements	15,500.00	24,596.79
31. Total Federal Disbursements	15,500.00	24,596.79
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	18,977.50	20,549.00
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	18,977.50	20,549.00
35. Total Federal Operating Expenditures	0.00	96.79
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures	0.00	96.79

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4

FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
 First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code ROSS W ANNABLE 1566 QUEENS RD W CHARLOTTE, NC 28207		Name of Employer FIRST UNION NATIONAL BANK	Date (month, day, year) 08/11/98	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation CMKG MNGG DIR OPEN CMNT	Aggregate Year-to-Date > \$ 1,500.00	
B. Full Name, Mailing Address and ZIP Code LARRY DEWAR BOGGS 100 ELEANOR ST LAVALE, MD 21502		Name of Employer WHEATFIRST	Date (month, day, year) 08/13/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation FINANCIAL CONSULTANT	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code THOMAS BOHRER 701 QUEEN CHARLOTTE'S COU CHARLOTTE, NC 28211		Name of Employer FIRST UNION NATIONAL BANK	Date (month, day, year) 08/11/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation CMKG DIR USCB	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code WALTER W. CRAIGIE 204 POPLAR LA RICHMOND, VA 23226		Name of Employer WHEATFIRST	Date (month, day, year) 08/13/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation DIRECTOR, BUSINESS DEVELOPMENT	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code MARK M GAMBILL 1215 ROTHESAY CIR RICHMOND, VA 23221		Name of Employer WHEATFIRST	Date (month, day, year) 08/13/98	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation PRESIDENT	Aggregate Year-to-Date > \$ 2,500.00	
F. Full Name, Mailing Address and ZIP Code RUTH RICHARDSON GIBBS 804 HILLSIDE ST VALDESE, NC 28690		Name of Employer WHEATFIRST	Date (month, day, year) 08/13/98	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation BRANCH MRNAGER	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code MORTON GOLDFIELD 1901 JFK BLVD #2220 PHILADELPHIA, PA 19103		Name of Employer WHEATFIRST	Date (month, day, year) 08/13/98	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation FINANCIAL CONSULTANT	Aggregate Year-to-Date > \$ 300.00	
SUBTOTAL of Receipts This Page (optional)				6,800.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PATSY A GREEN 2031 FROSTBURG ROAD FROSTBURG, MD 21532	WHEATFIRST	08/13/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation BRANCH MANAGER	Aggregate Year-to-Date > \$ 300.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM B GROTH 2287 JOHNSON ROAD GERMANTOWN, TN 38139	FIRST UNION NATIONAL BANK	08/11/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CHKG DIR TAXABLE SLS	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALICE T HARRELL 2609 BRANCHWOOD DRIVE KINSTON, NC 28504	WHEATFIRST	08/13/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation FINANCIAL CONSULTANT	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARA G HOLLEY 651 CUMBERLAND RD NE ATLANTA, GA 30306	FIRST UNION NATIONAL BANK	08/21/98	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SALES MANAGER	Aggregate Year-to-Date > \$ 400.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVEN W KOHLHAGEN 6415 GAYWIND DR, CHARLOTTE, NC 28226	FIRST UNION NATIONAL BANK	08/15/98 08/31/98	45.00 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CHKG MGRK DIR HEAD OF DERIV	Aggregate Year-to-Date > \$ 720.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL J LUDENAN 5105 STRATFORD CRESCENT RICHMOND, VA 23226	WHEATFIRST	08/21/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation HEAD OF INVESTMENT MANAGEMENT	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID W MCCLINTOCK 14026 CLARENDON PT MURTERSVILLE, NC 28078	FIRST UNION NATIONAL BANK	08/11/98	240.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CHKG VP III TAXABLE SLS	Aggregate Year-to-Date > \$ 240.00	
SUBTOTAL of Receipts This Page (optional)			2,530.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "P" Fund II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOSEPH A. NIGGEL 4928-71 WATER DAK ROAD CHARLOTTE, NC 28211	FIRST UNION NATIONAL BANK	08/11/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CNKG VP III PUBLIC FIN	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY P O'MALLEY	WHEATFIRST	08/21/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation BANKER	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HAROLD L PHILLIPS JR 4001 KROMOS PL CHARLOTTE, NC 28210	FIRST UNION NATIONAL BANK	08/11/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CNKG DIR TAXABLE SLS	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CASSANDRA K RICKETTS 802 FAIRGREEN RD GREENSBORO, NC 27410	WHEATFIRST	08/13/98	600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation FINANCIAL CONSULTANT	Aggregate Year-to-Date > \$ 600.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID ALAN RUBEN 9221 FALL RIVER LANE POTOMAC, MD 20854	WHEATFIRST	08/13/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation FINANCIAL CONSULTANT	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LOUIS A SCHMITT JR 2800 ROSEGATE LAKE CHARLOTTE, NC 28270	FIRST UNION NATIONAL BANK	08/11/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CO-MANAGING DIR CAP MKTS	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
E BRYAN TALLMAN JR 1305 DECATUR ROAD JACKSONVILLE, NC 28540	WHEATFIRST	08/13/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation FINANCIAL CONSULTANT	Aggregate Year-to-Date > \$ 300.00	
SUBTOTAL of Receipts This Page (optional)			3,150.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code GEORGE K THOMPSON 615 COLVILLE RD CHARLOTTE, NC 28207	Name of Employer FIRST UNION NATIONAL BANK	Date (month, day, year) 08/11/98	Amount of Each Receipt this Period 2,000.00
	Occupation CO-MANAGING DIR CAP MKTS	Aggregate Year-to-Date > \$ 2,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
B. Full Name, Mailing Address and ZIP Code LINDA ANNE ZIGLAR 35 HALVERN AVENUE #2 RICHMOND, VA 23221	Name of Employer WHEATFIRST	Date (month, day, year) 08/21/98	Amount of Each Receipt this Period 250.00
	Occupation SR PORTFOLIO MGR, 15+, EQUITY	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:			
SUBTOTAL of Receipts This Page (optional)			2,250.00
TOTAL This Period (last page this line number only)			14,730.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 10
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
BACHUS FOR CONGRESS P.O. BOX 59444 BIRMINGHAM, AL 35259	SPENCER BACHUS U S CONGRESS AL6 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	1,000.00
BOB RILEY FOR CONGRESS PO BOX 700 ASHLAND, AL 36251	BOB RILEY U S CONGRESS AL03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	500.00
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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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PAGE 2 OF 10
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
AMERICAN SUCCESS PAC C/O WILLIAMS & JENSEN 1155 21ST STREET, N.W. SUITE 300 WASHINGTON, DC 20036	DAVID DREIER U S CONGRESS CA00028 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	2,500.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			2,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 10
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FRIENDS OF CHRIS DODD 203 C STREET, NE WASHINGTON, DC 20002	CHRISTOPHER DODD U S SENATE CT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
SUBTOTAL of Disbursements This Page (optional)			1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 10

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
CONTINUE THE MAJORITY 605 E. ROBINSON STREET SUITE 305 ORLANDO, FL 32801	BILL MCCOLLUM U S CONGRESS FL 05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/13/98	1,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 10
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
COVERDELL GOOD GOVERNMENT COMMITTEE 3091 MAPLE DRIVE SUITE 200 ATLANTA, GA 30305	PAUL COVERDELL U S SENATE GA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	2,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 2,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 6 OF 10
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
VOLUNTEERS FOR VENTO P O BOX 65254 ST PAUL, MN 55165	BRUCE F VENTO U S CONGRESS MN04 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	1,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 10

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
BOB ETHERIDGE FOR CONGRESS P O BOX 27646 SUITE 210 RALEIGH, NC 27611	BOB ETHERIDGE U S CONGRESS NC000002 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/25/98	500.00
WALTER B JONES JR FOR CONGRESS CMT. P O BOX 99667 RALEIGH, NC 27624	WALTER JONES JR U S CONGRESS NC003 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	1,000.00
COMMITTEE TO RE-ELECT CONGRESSMAN MIKE MCINTYRE P.O. BOX 1 LUMBERTON, NC 28359	D GARNICHAEL MCINTYRE III U S CONGRESS NC07 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	1,000.00
SUE MYRICK FOR CONGRESS COMMITTEE P O BOX 37091 CHARLOTTE, NC 28237	SUE MYRICK U S CONGRESS NC009 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	2,000.00
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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

4,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 8 OF 10
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FRIENDS OF JOHN LAFALCE BOX 2884 WASHINGTON, DC 20013	JOHN LAFALCE U S CONGRESS NY029 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	1,000.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
 First Union Corporation Employees Good Government "F" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FOX FOR CONGRESS P.O. BOX 1059 MORRISTOWN, PA 19404	JOHN FOX U S CONGRESS PA13 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	500.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 10 OF 10
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
First Union Corporation Employees Good Government "P" Fund II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
COOK 198 P.O. BOX 11336 SALT LAKE CITY,, UT 84147	MERRILL COOK U S CONGRESS LTD2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	08/27/98	500.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			500.00
TOTAL This Period (Last page this line number only)			15,500.00

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 9-21-98
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<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	
 PREPARER	9-21-98 DATE PREPARED