AICPA

Effective Legislation Committee
A copy of our report is filed with the Federal Election Commission and is available for purchase from the Federal Election Commission, Washington, D.C.

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

MAR 25 10 57 AM '99

March 19, 1999

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Mr. Andrew Dodson
Public Records Office
Federal Election Commission
999 E Street, NW
Washington, DC 20463

Re: American Institute of Certified Public Accountants (AICPA) Effective Legislation Committee C-00077321

Dear Mr. Dodson:

Enclosed is the monthly "Report of Receipts and Expenditures" (FEC Form 3X) for the period February 1 through February 28, 1999. If you have any comments or questions, please telephone me at (201) 938-3210.

Sincerely,

Donna Borowicz

Donna Borowicz, CPA
Treasurer

DB:mb
Enclosure

cc: D. Atherton
S. Eisenberg
T. Higginbotham
K. Rote

dodson.doc

American Institute of Certified Public Accountants
Harborside Financial Center, 201 Plaza Three, Jersey City, NJ 07311-3881 (201) 938-3000 • (212) 318-0500 • fax (201) 938-3329

The CPA. Never underestimate the value.

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)
American Institute of Certified Public Accountants Effective Legislation Committee

ADDRESS (number and street) [ ] Check if different than previously reported
201 Plaza 3, Harborside Financial Center

CITY, STATE and ZIP CODE
Jersey City, NJ 07311

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM
MAR 25 10 57 AM '99

2. FEC IDENTIFICATION NUMBER
C-00077321

3. [X] 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
[X] 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 [X] NO

SUMMARY 5. Covering Period 2/1/99 through 2/28/99	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 1999		$ 139684.98
(b) Cash on Hand at Beginning of Reporting Period	$ 132603.38	
(c) Total Receipts (from line 19)	$ 13948.10	$ 21866.50
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 146551.48	$ 161551.48
7. Total Disbursements (from Line 30)	$ 27500.00	$ 42500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 119051.48	$ 119051.48
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$ 3110.86	

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

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
Donna Borowicz

Signature of Treasurer
Donna Borowicz

Date
March 19, 1999

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of

FEC FORM 3
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE: American Institute of Certified Public Accountants Effective Legislation Committee

REPORT COVERING PERIOD FROM: 2/1/99 TO: 2/28/99

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	12975.00	20690.00
ii. Unitemized		
iii. Total (add i and ii)	0 12975.00	20690.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c)	0 12975.00	20690.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	712.00	712.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	261.10	464.50
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	0 13948.10	21866.50
20. Total Federal Receipts (subtract line 18 from line 19)	0 13948.10	21866.50
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (Add a i, a ii, and b)	0	
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	27500.00	42500.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d))	(use Schedule F)	
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c)	0	
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	27500.00	42500.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	0 27500.00	42500.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	12975.00	20690.00
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	12975.00	20690.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	0	
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35)	0	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 16

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 a purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code Friends of Harry Reid 116 Princeton Avenue Las Vegas, NV 89107 Receipt for: [X] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-To-Date: 712.00	Date (month, day, year) 2/11/99	Amount of Each Receipt this Period 712.00
B. 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
C. 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
D. 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
E. 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
F. 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
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)	712.00
TOTAL This Period (last page this line number only)	712.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code Bankers Trust Company 280 Park Avenue New York, NY Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date: 464.50	Date (month, day, year) 2/28/99	Amount of Each Receipt this Period 261.10
B. 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
C. 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
D. 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
E. 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
F. 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
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)	261.10
TOTAL This Period (last page this line number only)	261.10

SCHEDULE B ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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)
American Institute of Certified Public Accountants Effective Legislation Committee FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Barton for Congress P.O. Box 1444 Ennis, TX 75120	House Candidate, 6thTX [X] Primary [ ] General [ ] Other (specify)	2/3/99	1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Tauscher for Congress 504 Capitol Court, NE Washington, DC 20002	House Candidate,10thCA [X] Primary [ ] General [ ] Other (specify)	2/3/99	1000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Mark Foley 4451 Brookfield Corporate Drive Chantilly, VA 20151	House Candidate,16thFL [X] Primary [ ] General [ ] Other (specify)	2/3/99	1000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Lieberman 2000 236 Massachusetts Ave., NE Washington, DC 20002	Senate Candidate (CT) [X] Primary [ ] General [ ] Other (specify)	2/3/99	1000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Congressional Committee 320 1st St., SE Washington, DC 20003	Annual Membership [ ] Primary [ ] General [ ] Other (specify)	2/3/99	15000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Davis for Congress 3304 Juniper Way Falls Church, VA 22044	House Candidate,11thVA [X] Primary [ ] General [ ] Other (specify)	2/3/99	1000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Mark Foley 4451 Brookfield Corporate Drive Chantilly, VA 20151	House Candidate,16thFL [X] Primary [ ] General [ ] Other (specify)	2/17/99	1500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Lazio for Congress P.O. Box 5063 Bayshore, NY 11706	House Candidate, 2ndNY [X] Primary [ ] General [ ] Other (specify)	2/17/99	5000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for:	Date (month, day, year)	Amount of Each Disbursement This Period
Nita Lowey for Congress 105 Beverly Road Harrison, NY 10580	House Candidate,18thNY [X] Primary [ ] General [ ] Other (specify)	2/17/99	1000.00

SUBTOTAL of Disbursements This Page (optional) 27500.00

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
American Institute of Certified Public Accountants Effective Legislation Committee FEC ID No. C-00077321

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pappas for Congress 340 North Avenue Cranford, NJ 07016	Redesignation - Disbursement for: [X] Primary [ ] General General to 2000 Primary [ ] Other (specify) Originally reported 10/14/98	2/28/99	MEMO 1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Coverdell Government Committee 3091 Maple Drive Atlanta, GA 30305	Redesignation - Disbursement for: [X] Primary [ ] General General to Primary (2004) [ ] Other (specify) Originally reported 10/8/98	2/28/99	MEMO 1000.00
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)	-0-
TOTAL This Period (last page this line number only)	27,500.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full) American Institute of Certified Public Accountants Effective Legislation Committee	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Internal Revenue Service Holtsville, NY 00501	3110.86	-0-.	-0-.	3110.86
Nature of Debt (Purpose): Income Taxes				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				3110.86
2) TOTALS This Period (last page this line only)				3110.86
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				3110.86

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 3/22/99
☐	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	
		3/25/99
	PREPARER	DATE PREPARED

(4/98)