

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
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DEC 3 11 04 AM '97

USE FEC MAILING LABEL OR TYPE OR PRINT


1. NAME OF COMMITTEE (in full) MR. FRANK G. ATWATER NATIONAL ASSOCIATION OF RETIRED FEDERAL EMPLOYEES ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported 606 NORTH WASHINGTON STREET CITY, STATE and ZIP CODE ALEXANDRIA, VA 22314	2. FEC IDENTIFICATION NUMBER C00091561 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
- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Thirtieth day report following the General Election on  
 Nov. 4th, 1997 the State of SEVERAL
- (b) Is this Report an Amendment?     YES     NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10-16-97</u> through <u>11-24-97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 1,186,369.18
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,048,913.69	
(c) Total Receipts (from Line 19)	\$ 6,521.95	\$ 112,906.88
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 1,055,435.64	\$ 1,299,276.06
7. Total Disbursements (from Line 30)	\$ 81,947.00	\$ 325,787.42
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 973,488.64	\$ 973,488.64
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - 0 -	For further information contact: Federal Election Commission 888 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ - 0 -	

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 FRANK G. ATWATER	
Signature of Treasurer 	Date 11-28-97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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**FEC FORM 3X**  
(revised 8/93)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS  
PAGE 2, FEC FORM 8X**

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM 10-16-97	TO: 11-24-97	
	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	-	3,330.00	11(a)(i)
ii. Unitemized	4,100.85	71,049.05	11(a)(ii)
iii. Total (add i and ii) >	4,100.85	74,379.05	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) >	4,100.85	74,379.05	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	2,421.10	38,527.83	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	6,521.95	112,906.88	19
20. Total Federal Receipts (subtract line 16 from line 19) >	6,521.95	112,906.88	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	197.00	52,927.42	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	197.00	52,927.42	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	81,750.00	222,750.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		110.00	28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)		110.00	28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
28. Other Disbursements			28
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	81,947.00	325,787.42	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	81,947.00	325,787.42	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	4,100.85	74,379.05	32
33. Total Contribution Refunds (from line 28d)		110.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,100.85	74,269.05	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	197.00	52,927.42	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	197.00	52,927.42	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) 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)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Bank 1507 Connecticut Avenue, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Interest Income	10/31/97	\$ 12.19
	Occupation		
	Aggregate Year-to-Date >		\$ 118.72
Nations Bank-Money Market 3 Dupont Circle, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Interest Income	10/31/97	111.37
	Occupation		
	Aggregate Year-to-Date >		\$ 969.17
Signet Bank-Interest Checking 3 Dupont Circle, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Interest Income	10/31/97	2,297.54
	Occupation		
	Aggregate Year-to-Date >		\$ 22,703.29
Nations Bank-Interest Checking 3 Dupont Circle, NW Washington, DC 20036 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Interest Income	- 0 -	- 0 -
	Occupation		
	Aggregate Year-to-Date >		\$ 829.39
U.S. Treasury Bureau of the Public Debt Washington, DC 20013 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Interest Income	- 0 -	- 0 -
	Occupation		
	Aggregate Year-to-Date >		\$ 67,734.00
U.S. Treasury Bureau of the Public Debt Washington, DC 20013 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	'96 Tax Refund	- 0 -	- 0 -
	Occupation		
	Aggregate Year-to-Date >		\$ 6,173.26
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 >		\$

**SUBTOTAL** of Receipts This Page (optional) .....

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

\$ 2,421.30

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21B

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**NAME OF COMMITTEE (in Full)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Subscription	Date (month, day, year)	Amount of Each Disbursement This Period
The Róthenberg Political Report 900 Second Street, NE, Ste 107 Washington, DC 20002	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/97	\$ 197.00
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 (specify)	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 (specify)	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 (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) .....

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

\$ 197.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	7
FOR LINE NUMBER		23

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NAME OF COMMITTEE (In Full)  
 National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Allen for Congress Committee P.O. Box 2884 Washington, DC 20013	Contribution Rep. Tom Allen (ME-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	\$ 1,000.00
Andrews for Congress P.O. Box 2314 Washington, DC 20013	Contribution Rep. Rob Andrews (NJ-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Ken Bentsen for Congress Committee P.O. Box 75214 Washington, DC 20013	Contribution Rep. Ken Bentsen (TX-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
Friends of Sherrod Brown 111 Edgefield Drive Elyria, OH 44035	Contribution Rep. Sherrod Brown (OH-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Julia Carson for Congress 1 North Capitol Ave., Suite 211 Indianapolis, IN 46204	Contribution Rep. Julia Carson (IN-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Clayton for Congress Committee Southwest Station PO Box 70015 Washington, DC 20024-0015	Contribution Rep. Eva Clayton (NC-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Congressman Bob Clement Committee 7757 Inversham Drive, Suite 235 Falls Church, VA 22042	Contribution Rep. Bob Clement (TN-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Collins for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Contribution Rep. Mac Collins (GA-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Friends for Cunningham P.O. Box 40227 San Diego, CA 92164	Contribution Rep. Randy Cunningham (CA-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	250.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	\$ 9,250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
DeFazio for Congress PO Box 1316 Springfield, OR 97477	Rep. Peter DeFazio (OR-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code Diana DeGette for Congress, Inc. 770 Grant Street, Suite 238 Denver, CO 80203	Rep. Diana DeGette (CO-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,500.00
C. Full Name, Mailing Address and ZIP Code Friends of Rosa DeLauro 5501 Cherokee Ave., Suite 112 Alexandria, VA 22312	Rep. Rosa DeLauro (CT-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
D. Full Name, Mailing Address and ZIP Code Friends of Lane Evans PO Box 5263 Rock Island, IL 61204	Rep. Lane Evans (IL-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
E. Full Name, Mailing Address and ZIP Code Fattah for Congress 2043 Walnut Street Philadelphia, PA 19103	Rep. Chaka Fattah (PA-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
F. Full Name, Mailing Address and ZIP Code Bob Filner for Congress PO Box 127868 San Diego, CA 92112	Rep. Bob Filner (CA-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
G. Full Name, Mailing Address and ZIP Code Friends of Congressman Mike Forbes PO Box 505 Farmingville, LI, NY 11738-0505	Rep. Michael Forbes (NY-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
H. Full Name, Mailing Address and ZIP Code Martin Frost Campaign Committee PO Box 4219 Dallas, TX 75208	Rep. Martin Frost (TX-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	3,000.00
I. Full Name, Mailing Address and ZIP Code Callegly for Congress PO Box 3789 Sierra Valley, CA 93093	Rep. Elton Callegly (CA-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00

SUBTOTAL of Disbursements This Page (optional) .....

14,500.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gejdenson Re-Election Committee 5501 Cherokee Ave., Suite 112 Alexandria, VA 22312	Contribution Rep. Sam Gejdenson (CT-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	\$ 2,000.00
Gibbons for Congress c/o 811 Chetworth Place Alexandria, VA 22314	Contribution Rep. Jim Gibbons (NV-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Citizens for Gilman: PO Box 3001 Middletown, NY 10940	Contribution Rep. Ben Gilman (NY-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	3,000.00
Citizens for Gillmor 2316 South Rolfe Street Arlington, VA 22202	Contribution Rep. Paul Gillmor (OH-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Gene Greene Congressional Campaign PO Box 75214 Washington, DC 20013-5214	Contribution Rep. Gene Greene (TX-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
Friends of Maurice Hinchey 236 Massachusetts Ave., NE, #202 Washington, DC 20002	Contribution Rep. Maurice Hinchey (NY-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
Hoyer for Congress 7905 Malcolm Rd, Suite 102 Clinton, MD 20735	Contribution Rep. Steny Hoyer (MD-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
Johnson for Congress PO Box 2884 Washington, DC 20013	Contribution Rep. Eddie Benice Johnson (TX-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Re-Elect Nancy Johnson to Congress 4451 Brookfield Corporate Dr., Ste 200 Chantilly, VA 20151-1652	Contribution Rep. Nancy Johnson (CT-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

15,000.00

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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FOR LINE NUMBER 23

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A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Kildee for Congress PO Box 2884 Washington, DC 20013	Rep. Dale Kildee (MI-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	\$ 2,000.00
Lampson for Congress 38 Ivy Street, SE Washington, DC 20003	Rep. Nick Lampson (TX-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Levin for Congress PO Box 1092 Warren, MI 48090	Rep. Sander Levin (MI-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
Nita Lowey for Congress PO Box 271 White Plains, NY 10605	Rep. Nita Lowey (NY-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Matthew Martinez Congressional Committee PO Box 723 Alhambra, CA 91802	Rep. Matthew Martinez (CA-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
Mascara for Congress 3610 38th, NW #F270 Washington, DC 20016	Rep. Frank Mascara (PA-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Karen McCarthy for Congress PO Box 2884 Washington, DC 20013	Rep. Karen McCarthy (MO-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Mike McIntyre for Congress PO Box 1 Lumberton, NC 28358	Rep. Mike McIntyre (NC-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Menendez for Congress PO Box 484 Union City, NJ 07087	Rep. Robert Menendez (NJ-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

13,000.00

**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

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**NAME OF COMMITTEE (In Full)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Richard E. Neal Committee PO Box 2884 Washington, DC 20013	Contribution Rep. Richard Neal (NA-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	\$ 2,000.00
B. Full Name, Mailing Address and ZIP Code Citizens for Eleanor H. Norton 1730 Rhode Island Ave., NW Ste 712 Washington, DC 20036	Contribution Rep. Eleanor Holmes Norton (DC-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
C. Full Name, Mailing Address and ZIP Code Pallone for Congress PO Box 3176 Long Branch, NJ 07740	Contribution Rep. Frank Pallone (NJ-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
D. Full Name, Mailing Address and ZIP Code Pastor for Arizona 6282 Occoquan Forest Drive Manassas, VA 20112	Contribution Rep. Ed Pastor (AZ-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
E. Full Name, Mailing Address and ZIP Code Payne for Congress Committee PO Box 75214 Washington, DC 20013-5214	Contribution Rep. Donald Payne (NJ-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
F. Full Name, Mailing Address and ZIP Code Rangel for the 106th Congress Comm. PO Box 5577 New York, NY 10027	Contribution Rep. Charles Rangel (NY-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
G. Full Name, Mailing Address and ZIP Code Citizens for Rush 421 New Jersey Ave., SW Washington, DC 20003	Contribution Rep. Bobby Rush (IL-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
H. Full Name, Mailing Address and ZIP Code Bernie Sanders for Congress PO Box 391 Burlington, VT 05402	Contribution Rep. Bernie Sanders (VT-I) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
I. Full Name, Mailing Address and ZIP Code Max Sandlin for Congress PO Box 1281 Marshall, TX 75671	Contribution Rep. Max Sandlin (TX-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00

SUBTOTAL of Disbursements This Page (optional) .....

11,000.00

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 6 OF 7  
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)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
The Tom Sawyer Committee PO Box 75214 Washington, DC 20013-5214	Rep. Tom Sawyer (OH-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	\$ 2,000.00
Friends of Jim Saxton PO Box 795 Mount Holly, NJ 08060-9943	Rep. Jim Saxton (NJ-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Ike Skelton for Congress Committee PO Box A Harrisonville, MO 64701	Rep. Ike Skelton (MO-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Louise Slaughter Re-Election Committee PO Box 14117 Rochester, NY 14614	Rep. Louise Slaughter (NY-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	2,000.00
Stabenow for Congress 38 Ivy Street, SE Washington, DC 20003	Rep. Debbie Stabenow (MI-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Ted Strickland for Congress PO Box 580 Lucasville, OH 45648	Cand. Ted Strickland (OH-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Stupak for Congress Committee 817 Ninth Ave., PO Box 143 Menominee, MI 49858	Rep. Bart Stupak (MI-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00
Eric Vitaliano for Congress PO Box 60602 Statens Island, NY 10306	Cand. Eric Vitaliano (NY-D) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) House Spec. Ele.	10/29/97	2,000.00
The Weygand Committee P.O. Box 28405 Providence, RI 02908	Rep. Robert Weygand (RI-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/29/97	1,000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

12,000.00

**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 7 OF 7  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution Rep. Frank Wolf (VA-R) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 10/29/97	Amount of Each Disbursement This Period \$ 2,000.00
B. Full Name, Mailing Address and ZIP Code Mikulski for Senate PO Box 22616 Baltimore, MD 21298-9406	Purpose of Disbursement Contribution Sen. Barbara Mikulski (MD-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senate 1998	Date (month, day, year) 10/29/97	Amount of Each Disbursement This Period 2,000.00
C. Full Name, Mailing Address and ZIP Code People for Patty Murray 6282 Occoquan Forest Drive Manassas, VA 20112	Purpose of Disbursement Contribution Sen. Patty Murray (VA-D) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Senate 1998	Date (month, day, year) 10/29/97	Amount of Each Disbursement This Period 3,000.00
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) .....

7,000.00

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

\$ 81,750.00

**LOANS**

Name of Committee (in Full) <b>National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)</b>			
<b>A. Full Name, Mailing Address and ZIP Code of Loan Source</b>  <p style="text-align: center;">N/A</p>	<b>Original Amount of Loan</b>	<b>Cumulative Payment To Date</b>	<b>Balance Outstanding at Close of This Period</b>
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) <span style="float: right;"><input type="checkbox"/> Secured</span>			
List All Endorsers or Guarantors (if any) to Item A			
<b>1. Full Name, Mailing Address and ZIP Code</b>	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
<b>2. Full Name, Mailing Address and ZIP Code</b>	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
<b>3. Full Name, Mailing Address and ZIP Code</b>	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
<b>B. Full Name, Mailing Address and ZIP Code of Loan Source</b>	<b>Original Amount of Loan</b>	<b>Cumulative Payment To Date</b>	<b>Balance Outstanding at Close of This Period</b>
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): _____			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ %(apr) <span style="float: right;"><input type="checkbox"/> Secured</span>			
List All Endorsers or Guarantors (if any) to Item B			
<b>1. Full Name, Mailing Address and ZIP Code</b>	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
<b>2. Full Name, Mailing Address and ZIP Code</b>	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
<b>3. Full Name, Mailing Address and ZIP Code</b>	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
<b>SUBTOTALS This Period This Page (optional)</b> .....			
<b>TOTALS This Period (last page in this line only)</b> .....			
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

**LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS**

NAME OF COMMITTEE (IN FULL) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)		FED IDENTIFICATION NUMBER	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER)  N/A		AMOUNT OF LOAN	INTEREST RATE (APR)
		DATE INCURRED OR ESTABLISHED	DATE DUE

A. Has loan been restructured?  No  Yes If yes, date originally incurred: \_\_\_\_\_

B. If line of credit, amount of this draw: \_\_\_\_\_; total outstanding balance: \_\_\_\_\_

C. Are other parties secondarily liable for the debt incurred?  
 No  Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?  
 No  Yes If yes, specify: \_\_\_\_\_

What is the value of this collateral? \_\_\_\_\_

Does the lender have a perfected security interest in it?  No  Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?

No  Yes. If yes, specify: \_\_\_\_\_ What is the estimated value? \_\_\_\_\_

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: \_\_\_\_\_ Location of account: \_\_\_\_\_

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER	DATE
TYPED NAME	SIGNATURE

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE	TITLE	DATE
TYPED NAME	SIGNATURE	

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Name of Committee (in Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)	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  N/A				
Nature of Debt (Purpose):				
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)				
2) TOTALS This Period (last page in this line only)				
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)				

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Name of Committee (or Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)				
Full Name, Mailing Address, & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
N/A				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
				<input type="checkbox"/> Support <input type="checkbox"/> Oppose
(a) SUBTOTAL of Itemized Independent Expenditures .....			\$ _____	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			\$ _____	
(c) TOTAL Independent Expenditures .....			\$ _____	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_

My Commission expires: \_\_\_\_\_

NOTARY PUBLIC

Signature \_\_\_\_\_ Date \_\_\_\_\_

**ITEMIZED COORDINATED EXPENDITURES MADE BY  
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENTS(S)  
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE  
(2 U.S.C. §441a(d))**

(To be used only by Political Committees in the General Election)

Name of Political Committee (In Full) <b>National Association of Retired Federal Employees Political Action Committees (NARFE-PAC)</b>				
Has your Committee been designated to make coordinated expenditures by a political party committee? <span style="float:right"><input type="checkbox"/> YES    <input checked="" type="checkbox"/> NO</span> If YES, name the designating committee:				
Full Name, Mailing Address and ZIP Code of Subordinate Committee   <p align="center">N/A</p>				
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				
Full Name, Mailing Address and ZIP Code of Each Payee	Name of Federal Candidate Supported, State, District & Office Sought	Purpose of Expenditure	Date (month, day, year)	Amount
Aggregate General Election Expenditure for this Candidate—\$				
<b>SUBTOTAL of Expenditures This Page (optional) .....</b>				
<b>TOTAL This Period (last page this line number only) .....</b>				



**METHOD OF ALLOCATION FOR SHARED FEDERAL  
AND NON-FEDERAL ADMINISTRATIVE EXPENSES  
AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE: National Association of Retired Federal Employees  
Political Action Committee (NARFE-PAC)

**NATIONAL PARTY COMMITTEES**

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) .....  %  
 PRESIDENTIAL YEAR (65%)  
 ALL OTHER YEARS (60%)

**HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES**

N/A

MINIMUM FEDERAL PERCENTAGE (65%) (IF CHECKED, ENTER 65% IN BOX TO RIGHT) .....  %  
 OR  
 FUNDS EXPENDED:  
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL .....  %  
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL .....  %  
 ADJUSTMENTS TO FUNDS EXPENDED:  
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL ..... \$  .....  %  
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL ..... \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 65% IN ANY YEAR.

**SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES**

FUNDS EXPENDED:  
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL .....  %  
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL .....  %  
 ADJUSTMENTS TO FUNDS EXPENDED:  
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL ..... \$  .....  %  
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL ..... \$

**STATE AND LOCAL PARTY COMMITTEES**

**BALLOT COMPOSITION**

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

	NUMBER OF POINTS
1. PRESIDENT ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
2. U.S. SENATE ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
3. U.S. CONGRESS ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3) .....	<input type="text"/>
5. GOVERNOR ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
6. OTHER STATEWIDE OFFICE(S) ..... <input type="checkbox"/> (1 OR 2 POINTS) .....	<input type="text"/>
7. STATE SENATE ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
8. STATE REPRESENTATIVE ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
9. LOCAL CANDIDATES ..... <input type="checkbox"/> (1 OR 2 POINTS) .....	<input type="text"/>
10. EXTRA NON-FEDERAL POINT ..... <input type="checkbox"/> (1 POINT) .....	<input type="text"/>
11. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10) .....	<input type="text"/>
12. TOTAL POINTS (LINE 4 PLUS LINE 11) .....	<input type="text"/>

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 .....  %

**ALLOCATION RATIOS**

NAME OF COMMITTEE National Association of Retired Federal Employees  
Political Action Committee (NARFE-PAC)

**ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.**

Methods of allocation:

- I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT  N/A  ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL %
NAME OF ACTIVITY OR EVENT  ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL %
NAME OF ACTIVITY OR EVENT  ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL %
NAME OF ACTIVITY OR EVENT  ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL %
NAME OF ACTIVITY OR EVENT  ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL %
NAME OF ACTIVITY OR EVENT  ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL %
NAME OF ACTIVITY OR EVENT  ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	FEDERAL %	NON-FEDERAL %

**TRANSFERS FROM  
NON-FEDERAL ACCOUNTS**

<b>NAME OF COMMITTEE</b> National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)	<b>TOTAL AMOUNT TRANSFERRED</b>
---	---------------------------------

NAME OF ACCOUNT		DATE OF RECEIPT			\$
		BREAKDOWN OF TRANSFER RECEIVED			
		ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
N/A					
i) Total Administrative/Voter Drive					
a) Direct Fundraising (List Events-Amount for Each)					
a)					
b)					
c)					
d)					
e) Total Amount Transferred For Direct Fundraising					
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)					
a)					
b)					
c)					
d)					
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support					

NAME OF ACCOUNT		DATE OF RECEIPT			\$
		BREAKDOWN OF TRANSFER RECEIVED			
		ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT	
i) Total Administrative/Voter Drive					
ii) Direct Fundraising (List Events-Amount for Each)					
a)					
b)					
c)					
d)					
e) Total Amount Transferred For Direct Fundraising					
iii) Exempt Activity/Direct Candidate Support (List Events-Amount For Each)					
a)					
b)					
c)					
d)					
e) Total Amount Transferred For Exempt Activity/Direct Candidate Support					

		TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED			
		ADMIN/VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DCS	
SUBTOTAL THIS PAGE					
TOTAL THIS PERIOD					

**JOINT FEDERAL/NON-FEDERAL  
ACTIVITY SCHEDULE**

NAME OF COMMITTEE National Association of Retired Federal Employees  
Political Action Committee (NARFE-PAC)

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
N/A					
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: \$ <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE					
TOTAL THIS PERIOD (last page for each line only) (Fed. share to 21 a 1 and non-Fed. share to 21 a 4) ...					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

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
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<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
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*Jes*  
PREPARER

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