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REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED FEDERAL ELECTION COMMISSION REPORTS ANALYSIS DIVISION

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

AMENDED

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
NWPC CAMPAIGN SUPPORT COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
1211 Connecticut Avenue NW, Suite 425

NOTE NEW ADDRESS

JUL 14 12 07 PM '98

CITY, STATE and ZIP CODE
Washington DC 20036

1630 CONN. NW
#201
WASH. DC 20009

2. FEC IDENTIFICATION NUMBER
C0034256

3. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☒ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of

☐ 30-Day Post-Election
on _____

FEC I.D.# C00034256

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 4/1/98 through 6/30/98		
6. (a) Cash on Hand January 1, 19 98		$ 11 343.09
(b) Cash on Hand at Beginning of Reporting Period	$ 1,809.15	
(c) Total Receipts (from Line 19)	$ 1,691.95	$ 7 358.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 3 501.10	$ 18 701.10
7. Total Disbursements (from Line 30)	$ 1.500.00	$ 16.700.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2.001.10	$ 2 001 10
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)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Anita Perez Ferguson

ROSELYN O'CONNELL

05-06-2000

Signature of Treasurer

Date 7/10/98

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

FEC FORM 3X
(revised 9/93)

18033250218

DETAILED SUMMARY PAGE AMENDED

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: NWPC CAMPAIGN SUPPORT COMMITTEE

REPORT COVERING PERIOD FROM 4/1/98 TO: 6/30/98

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	610.00	3205.00	1
ii. Unitemized	1070.00	4100.00	1
iii. Total (add i and ii) ➤	1680.00	7305.00	1
b. Political Party Committees			1
c. Other Political Committees (such as PACs)			1
d. Total Contributions (add a iii, b and c) ➤	1680.00 OK	7305.00 OK	1
12. Transfers From Affiliated/Other Party Committees			1
13. All Loans Received			1
14. Loan Repayments Received			1
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			1
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			1
17. Other Federal Receipts (Dividends, Interest, etc.)	11.95	53.01	1
18. Transfers from Nonfederal Account for Joint Activity			1
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	1691.95	7358.01	1
20. Total Federal Receipts (subtract line 18 from line 19) ➤	1691.95 OK	7358.01 OK	2
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			2
ii. Non-Federal Share			2
b. Other Federal Operating Expenditures	0.00	700.00	2
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0.00	700.00	2
22. Transfers to Affiliated/Other Party Committees			2
23. Contributions to Federal Candidates/Committees and Other Political Committees	1500.00	16000.00	2
24. Independent Expenditures (use Schedule E)			2
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			2
26. Loan Repayments Made			2
27. Loans Made			2
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			2
b. Political Party Committees			2
c. Other Political Committees (such as PACs)			2
d. Total Contribution Refunds (add a, b and c) ➤			2
29. Other Disbursements			2
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	1500.00	16700.00	3
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	1500.00	16700.00	3
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	1680.00 ~~1780.00~~	7305.00 ~~7405.00~~	3
33. Total Contribution Refunds (from line 28d)			3
34. Net Contributions (other than loans)(subtract line 33 from 32)	1680.00 ~~1780.00~~	7305.00 ~~7405.00~~	3
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	700.00	3
36. Offsets to Operating Expenditures (from line 15)			3
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	700.00	3

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11ai

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)
MWPC Campaign Support Comm.

No change

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frances Coleman 2221 So. Lowell Blvd. Denver CO 80219 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Retired Aggregate Year-to-Date > $	6/13/98	235.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Constance Whitney PhD 10601 Wilshire Blvd. Los Angeles. CA 90024 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Drucker Corporation Occupation: Register Aggregate Year-to-Date > $	6/13/98	275.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Judy Melanson 5415 24th Avenue South Minneapolis. MN 55417 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: MWPC - ED Occupation: Executive Director Aggregate Year-to-Date > $ 100.00	6/1/98	100 00
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) > $

TOTAL This Period (last page this line number only) > 610.00

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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)

NWPC CAMPAIGN SUPPORT COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Bank P.O. Box 26150 Richmond, VA 23260 6150 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Income Occupation Aggregate Year-to-Date > $ 41.06	4/30/98	6.36
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Bank P.O. Box 26150 Richmond VA 23260 6150 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Income Occupation Aggregate Year-to-Date > $	5/31/98	2.78
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Crestar Bank P.O Box 26150 Richmond. VA 23260 6150 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Interest Income Occupation Aggregate Year-to-Date > $	6/30/98	2.01
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) 11.95

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF [ ]

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.

no change

NAME OF COMMITTEE (In Full)

MWPC CAMPAIGN SUPPORT COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Pe
A. Virginia Woodard for Congress P.O Box 14198 Louisville KY 40214 0198	Candidate Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/14/98	500.00
B. Roxanne Qualls 19 Garfield Pl Cincinnati, OH 45202	Candidate Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	6/22/98	500.00
C. Mary Boyle for Senate P.O Box 6328 Cleveland OH 44101 1328	Candidate Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	6/22/98	500.00
D.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Pe
E.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Pe
F.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Pe
G.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Pe
H.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Pe
I.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Pe

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

TOTAL This Period (last page this line number only) 1,500.00

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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 5-8-00
☐	First Class Mail	POSTMARKED
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☐	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	

[illegible]	5-8-00
PREPARER	DATE PREPARED

(4/98)