

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION

OCT 18 10 45 AM '98

1. NAME OF COMMITTEE (in full)

000178053 081898 N 250

SUSAN SEABURY ASELAGÉ orted

SABREPAC SABRELINER CORPORATION

N POLITICAL ACTION COMMITTEE

7733 FORSYTH BLVD., SUITE 1500

PIERRE LACLEDÉ CENTER

ST LOUIS MD 63105

2. FEC IDENTIFICATION NUMBER
000178053

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 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>7-1-98</u> through <u>9-30-98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 10,372.84
(b) Cash on Hand at Beginning of Reporting Period	\$ 2,972.43	
(c) Total Receipts (from Line 19)	\$ -0-	\$ 250.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 2,972.43	\$ 10,622.84
7. Total Disbursements (from Line 30)	\$ 1,340.06	\$ 8,990.47
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1,632.37	\$ 1,632.37
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 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -0-	
<i>I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.</i>		

Type or Print Name of Treasurer
SUSAN S. ASELAGÉ

Signature of Treasurer Date
Susan S. Aselage 10/14/98

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		REPORT COVERING PERIOD		
SABREPAC SABRELINER CORPORATION POLITICAL ACTION COMMITTEE		FROM 7/1/98	TO: 9/30/98	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
i.	Itemized (use Schedule A)	-0-	-0-	11(a)(i)
ii.	Unitemized	-0-	-0-	11(b)(i)
iii.	Total (add i and ii) >	-0-	-0-	11(a)(ii)
b.	Political Party Committees	-0-	-0-	13(b)
c.	Other Political Committees (such as PACs)	-0-	-0-	13(c)
d.	Total Contributions (add a ii, b and c) >	-0-	250.00	11(d)
12.	Transfers From Affiliated/Other Party Committees	-0-	-0-	12
13.	All Loans Received	-0-	-0-	13
14.	Loan Repayments Received	-0-	-0-	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-	17
18.	Transfers from Nonfederal Account for Joint Activity	-0-	-0-	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	-0-	250.00	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	-0-	250.00	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	-0-	-0-	21(a)(i)
ii.	Non-Federal Share	-0-	-0-	21(a)(ii)
b.	Other Federal Operating Expenditures	90.06	240.47	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	90.06	240.47	21(c)
22.	Transfers to Affiliated/Other Party Committees	-0-	-0-	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	1,250.00	8,750.00	23
24.	Independent Expenditures (use Schedule E)	-0-	-0-	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-	25
26.	Loan Repayments Made	-0-	-0-	26
27.	Loans Made	-0-	-0-	27
28.	Refunds of Contributions To:			
a.	Individuals/Persons Other Than Political Committees	-0-	-0-	28(a)
b.	Political Party Committees	-0-	-0-	28(b)
c.	Other Political Committees (such as PACs)	-0-	-0-	28(c)
d.	Total Contribution Refunds (add a, b and c) >	-0-	-0-	28(d)
29.	Other Disbursements	-0-	-0-	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1,340.06	8,990.47	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	1,340.06	8,990.47	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	-0-	250.00	32
33.	Total Contribution Refunds (from line 28d)	-0-	-0-	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	-0-	250.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	90.06	240.47	35
36.	Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	90.06	240.47	37

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
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)

SABREPAC SABRELINER CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Todd Tiahrt for Congress 2250 N. Rock Rd., #118-228 Wichita, KS 67226	Todd Tiahrt House (R-KS, 4) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/7/98	\$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Costello for Congress Committee P.O. Box 8250 Belleville, IL 62222	Jerry F. Costello House (D-IL, 12) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/9/98	\$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Talent for Congress 1031 Executive Parkway, Ste. 100 St. Louis, MO 63141	James M. Talent House (R-MO, 2) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/98	\$250.00
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 (specify)		
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 (specify)		
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 (specify)		
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 (specify)		
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 (specify)		
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 (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1,250.00

