

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

1 / 10  
07/15/1998 15 : 28

<b>1. NAME OF COMMITTEE (in full)</b> <b>Paul Magliocchetti Associates, Inc. Political Action Committee</b>	
<b>ADDRESS (number and street)</b> <input type="checkbox"/> Check if different than previously reported 1755 Jefferson Davis Highway Suite 1107	<b>2. FEC IDENTIFICATION NUMBER</b> C00260321
<b>CITY, STATE, and ZIP CODE</b> Arlington                      VA    22202	3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee (see FEC Form 1M)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report                      Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only)
- Termination report
- Twelfth day report preceding \_\_\_\_\_  
(election type) \_\_\_\_\_  
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>04/01/1998</u> through <u>08/30/1998</u>		
6. (a) Cash on Hand, January 1, <u>1998</u> .....		13041.57
(b) Cash on Hand at Beginning of Reporting Period .....	10186.57	
(c) Total Receipts (from line 19) .....	10185.00	31820.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	20361.57	44861.57
7. Total Disbursements (from line 30) .....	19500.00	44000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	861.57	861.57
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 989 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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 <b>Electronically Filed by Joseph S. Littleton, III</b>	
Signature of Treasurer	Date 07/14/1998

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

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**FEC FORM 3X**  
(revised 9/98)

**DETAILED SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

(PAGE 2, FEC FORM 3X)

(revised 1/1/91)

NAME OF COMMITTEE <b>Paul Magliocchetti Associates, Inc. Political Action Committee</b>		REPORT COVERING PERIOD FROM 04/01/1998 TO: 06/30/1998	
<b>I. Receipts</b>		<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year</b>
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A) .....	10165.00	31820.00	11.a.i.
ii. Unitemized .....	0.00	0.00	11.a.ii.
iii. Total .....	10165.00	31820.00	11.a.iii.
b. Political Party Committees .....	0.00	0.00	11.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	11.c.
d. Total Contributions .....	10165.00	31820.00	11.d.
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00	12.
13. All Loans Received .....	0.00	0.00	13.
14. Loan Repayments Received .....	0.00	0.00	14.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....	0.00	0.00	15.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees ..	0.00	0.00	16.
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00	17.
18. Transfers From Nonfederal Account for Joint Activity .....	0.00	0.00	18.
19. Total Receipts .....	10165.00	31820.00	19.
20. Total Federal Receipts .....	10165.00	31820.00	20.
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share .....	0.00	0.00	21.a.i.
ii. Non-Federal Share .....	0.00	0.00	21.a.ii.
b. Other Federal Operating Expenditures .....	0.00	0.00	21.b.
c. Total Operating Expenditures .....	0.00	0.00	21.c.
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00	22.
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	19500.00	44000.00	23.
24. Independent Expenditures (use Schedule E) .....	0.00	0.00	24.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Sch. F)	0.00	0.00	25.
26. Loan Repayments Made .....	0.00	0.00	26.
27. Loans Made .....	0.00	0.00	27.
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees .....	0.00	0.00	28.a.
b. Political Party Committees .....	0.00	0.00	28.b.
c. Other Political Committees (such as PACs) .....	0.00	0.00	28.c.
d. Total Contributions Refunds .....	0.00	0.00	28.d.
29. Other Disbursements .....	0.00	0.00	29.
30. Total Disbursements .....	19500.00	44000.00	30.
31. Total Federal Disbursements .....	19500.00	44000.00	31.
<b>III. Net Contributions / Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d) .....	10165.00	31820.00	32.
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	10165.00	31820.00	34.
35. Total Federal Operating Expenditures .....	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36.
37. Net Operating Expenditures .....	0.00	0.00	37.

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	<b>3 / 10</b>
				FOR LINE NUMBER <b>11A</b>	
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Paul Magliocchetti Associates, Inc. Political Action Committee</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph S. Littleton, III 10220 Greenwood Way  Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/07/1998	Amount of Each Receipt this Period 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 3400.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Dan Cunningham 3442 Mt. Burnside Way  Woodbridge VA 22192	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 04/08/1998	Amount of Each Receipt this Period 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> John Lynch 16719 Osterbury Ct.  Dumfries VA 22026	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 04/17/1998	Amount of Each Receipt this Period 455.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 1820.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Wladawski 409 Collin Lane NW  Vienna VA 22180	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/20/1998	Amount of Each Receipt this Period 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 1900.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Pat Hiu 3652 Knox Court  Woodbridge VA 22193	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/20/1998	Amount of Each Receipt this Period 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 1800.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Sean Fogarty 9508 Yawl Court  Burke VA 22015	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/21/1998	Amount of Each Receipt this Period 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Greg Hansen 8815 Arlington Blvd.  Fairfax VA 22031-2705	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 04/30/1998	Amount of Each Receipt this Period 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Associate	Aggregate Year-to-Date > \$ 1200.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>		<b>ITEMIZED RECEIPTS</b>		Use separate schedule(s) for each category of the Detailed Summary Page	4 / 10
				FOR LINE NUMBER <b>11A</b>	
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.					
<b>NAME OF COMMITTEE (In Full)</b> <b>Paul Magliocchetti Associates, Inc. Political Action Committee</b>					
<b>Full Name, Mailing Address, and ZIP Code</b> Tom Vetri 6729 Huntsman Blvd.  Springfield VA 22152	<b>Name of Employer</b> Paul Magliocchetti Associates, Inc.	<b>Date (month, day, year)</b> 05/01/1998	<b>Amount of Each Receipt this Period</b> 500.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Wladawski 405 Colin Lane NW  Vienna VA 22180	<b>Name of Employer</b> Paul Magliocchetti Associates, Inc.	<b>Date (month, day, year)</b> 05/04/1998	<b>Amount of Each Receipt this Period</b> 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > \$ 1800.00			
<b>Full Name, Mailing Address, and ZIP Code</b> John Lynch 16719 Osterbury Ct.  Dumfries VA 22026	<b>Name of Employer</b> Paul Magliocchetti Associates	<b>Date (month, day, year)</b> 05/04/1998	<b>Amount of Each Receipt this Period</b> 455.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > \$ 1820.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Pat Hiu 3852 Knox Court  Woodbridge VA 22193	<b>Name of Employer</b> Paul Magliocchetti Associates, Inc.	<b>Date (month, day, year)</b> 05/04/1998	<b>Amount of Each Receipt this Period</b> 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > \$ 1800.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Dan Cunningham 3442 Mt. Burnside Way  Woodbridge VA 22192	<b>Name of Employer</b> Paul Magliocchetti Associates	<b>Date (month, day, year)</b> 05/13/1998	<b>Amount of Each Receipt this Period</b> 400.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> Sean Fogarty 9508 Yawl Court  Burke VA 22015	<b>Name of Employer</b> Paul Magliocchetti Associates, Inc.	<b>Date (month, day, year)</b> 05/21/1998	<b>Amount of Each Receipt this Period</b> 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > \$ 2000.00			
<b>Full Name, Mailing Address, and ZIP Code</b> John Lynch 16719 Osterbury Ct.  Dumfries VA 22026	<b>Name of Employer</b> Paul Magliocchetti Associates	<b>Date (month, day, year)</b> 06/01/1998	<b>Amount of Each Receipt this Period</b> 455.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > \$ 1820.00			
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....					
<b>TOTALS</b> This Period (last page this line number only) .....					

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>5 / 10</b>
			FOR LINE NUMBER <b>11A</b>

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**NAME OF COMMITTEE (In Full)**  
**Paul Magliocchetti Associates, Inc. Political Action Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Tom Vetri 6729 Huntsman Blvd.  Springfield VA 22152	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/01/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 2000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Greg Hansen 8815 Arlington Blvd.  Fairfax VA 22031-2705	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/02/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 1200.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph S. Littleton, III 10220 Grovewood Way  Fairfax VA 22032	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/04/1998	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 3400.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Dan Cunningham 3442 Mt. Burnside Way  Woodbridge VA 22192	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 06/04/1998	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 2000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mark Wladawski 409 Colin Lane NW  Vienna VA 22180	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/05/1998	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 1600.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Pat Hiu 3652 Knox Court  Woodbridge VA 22193	Name of Employer Paul Magliocchetti Associates, Inc.	Date (month, day, year) 06/05/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 1800.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Keylene Green PO Box 419  Oakton VA 22124	Name of Employer Paul Magliocchetti Associates	Date (month, day, year) 06/08/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	Occupation Associate	Aggregate Year-to-Date > \$ 3000.00	

**SUBTOTALS** of Receipts This Page (Optional) .....

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

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>6 / 10</b>
			FOR LINE NUMBER <b>11A</b>
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<b>NAME OF COMMITTEE (In Full)</b> <b>Paul Magliocchetti Associates, Inc. Political Action Committee</b>			
<b>Full Name, Mailing Address, and ZIP Code</b> Sean Fogarty 9506 Yawl Court  Burke VA 22015	<b>Name of Employer</b> Paul Magliocchetti Associates, Inc.	<b>Date (month, day, year)</b> 06/17/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > 5    2000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Joseph S. Littleton, III 10220 Grovewood Way  Fairfax VA 22032	<b>Name of Employer</b> Paul Magliocchetti Associates, Inc.	<b>Date (month, day, year)</b> 06/24/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : N/A	<b>Occupation</b> Associate	<b>Aggregate Year-to-Date</b> > 8    3400.00	
<b>SUBTOTALS</b> of Receipts This Page (Optional) .....			
<b>TOTALS</b> This Period (last page this line number only) .....			<b>10165.00</b>

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>7 / 10</b>
			FOR LINE NUMBER <b>23</b>

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)**  
**Paul Magliocchetti Associates, Inc. Political Action Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Mikulski, Barbara 711 West 40th Street Suite 460 Baltimore MD 21211	Purpose of Disbursement (Senate - MD - 1)	Date (month, day, year) 04/07/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Mikulski, Barbara 711 West 40th Street Suite 460 Baltimore MD 21211	Purpose of Disbursement (Senate - MD - 1)	Date (month, day, year) 04/07/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Joe Skeen Skeen for Congress 2233 Wisconsin Ave., NW Washington DC 20007	Purpose of Disbursement (House - NM - 2)	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Joe Skeen Skeen for Congress 2233 Wisconsin Ave., NW Washington DC 20007	Purpose of Disbursement (House - NM - 2)	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Norm Dicks Norm Dicks for Congress 4451 North Capitol St, NW Washington DC 20001	Purpose of Disbursement (House - WA - 6)	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Jerry Lewis Lewis for Congress Cmte. 4451 Brookfield Corp. Dr. Chantilly VA 20151-1852	Purpose of Disbursement (House - CA - 40)	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Brian Bilbray Re-Elect Brian Bilbray 4451 Brookfield Corp. Dr. San Diego CA 92108	Purpose of Disbursement (House - CA - 49)	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Hinchey, Maurice Hinchey for Congress P.O. Box 4497 Kingslon NC 12402	Purpose of Disbursement (House - NY - 26)	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Molchan Molchan for Congress P.O. Box 1343 Fairmont WV 26554	Purpose of Disbursement (House - WV - 1)	Date (month, day, year) 04/20/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

**SUBTOTALS** of Disbursements This Page (Optional) .....

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

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>8 / 10</b>
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER <b>23</b>
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.				
<b>NAME OF COMMITTEE (In Full)</b> <b>Paul Magliocchetti Associates, Inc. Political Action Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Weldon, Carl Weldon for Congress P.O. Box 1992 Media PA 19063	<b>Purpose of Disbursement</b> (House - PA - 7)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 04/20/1998	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Price, David David Price for Congress P.O. 1986 Raleigh NC 27802	<b>Purpose of Disbursement</b> (House - NC - 4)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 04/20/1998	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Klink, Ron Citizens for Ron Klink P.O. Box 75214 Washington DC 20013-5214	<b>Purpose of Disbursement</b> (House - PA - 4)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 04/23/1998	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Mike McIntyre Mike McIntyre for Congress PO Box 1 Lumberton NC 28359	<b>Purpose of Disbursement</b> (House - NC - 7)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 04/28/1998	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Jim Saxton Friends of Jim Saxton PO Box 795 Mount Holly NJ 08060-9945	<b>Purpose of Disbursement</b> (House - NJ - 3)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/05/1998	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Tom Davis Tom Davis for Congress PO Box 483 Dumfries VA 22027	<b>Purpose of Disbursement</b> (House - VA - 11)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/05/1998	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Hooley, Darlene Darlene Hooley for Congress P.O. Box 2050 Salem OR 97308	<b>Purpose of Disbursement</b> (House - OR - 5)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/05/1998	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Sabo, Martin Martin Sabo for Congress 2475 East Franklin Ave So., # 301 Minneapolis MN 55406	<b>Purpose of Disbursement</b> (House - MN - 5)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/05/1998	<b>Amount of Each Disbursement This Period</b> 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Lofgren, Zoe Lofgren for Congress 111 West St. Johns St, Suite 400 San Jose CA 95113	<b>Purpose of Disbursement</b> (House - CA - 16)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 05/05/1998	<b>Amount of Each Disbursement This Period</b> 500.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....				



<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	<b>9 / 10</b>
			FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**  
**Paul Magliocchetti Associates, Inc. Political Action Committee**

<b>Full Name, Mailing Address, and ZIP Code</b> Rep. John Baldacci Baldacci for Congress '98 5501 Cherokee Ave. Alexandria VA 22312	Purpose of Disbursement (House - ME - 2)	Date (month, day, year) 05/19/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. John Baldacci Baldacci for Congress '98 5501 Cherokee Ave. Alexandria VA 22312	Purpose of Disbursement (House - ME - 2)	Date (month, day, year) 05/19/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Patrick Kennedy Cong. Patrick Kennedy 530 Seventh Street, SE Washington DC 20003	Purpose of Disbursement (House - RI - 1)	Date (month, day, year) 05/20/1998	Amount of Each Disbursement This Period 500.00 Redesignation of \$500 of 2/17 contribution to General Election
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Jim Turner Jim Turner for Congress PO Box 780 Crockett TX 75835	Purpose of Disbursement (House - TX - 2)	Date (month, day, year) 06/08/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. John Sununu Sununu for Congress 330 5th St. SE Apt. A Washington DC 20003	Purpose of Disbursement (House - NH - 1)	Date (month, day, year) 06/08/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Randy Cunningham Friends of Cunningham 613 W. Valley Parkway Escondido CA 92055	Purpose of Disbursement (House - CA - 51)	Date (month, day, year) 06/08/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Michael Forbes Friends of Cong. Forbes PO Box 505 Long Island NY 11738	Purpose of Disbursement (House - NY - 1)	Date (month, day, year) 06/08/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Bayh, Evan Evan Bayh Committee 427 Palm Tree Drive Gaithersburg MD 20878	Purpose of Disbursement (Senate - IN - 0)	Date (month, day, year) 06/12/1998	Amount of Each Disbursement This Period 1000.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Connie Morella Friends of Connie Morella PO Box 5945 Bethesda MD 20824	Purpose of Disbursement (House - MD - 8)	Date (month, day, year) 06/22/1998	Amount of Each Disbursement This Period 500.00
	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :		

**SUBTOTALS** of Disbursements This Page (Optional) .....

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

<b>SCHEDULE B</b>		<b>ITEMIZED DISBURSEMENTS</b>		<b>10 / 10</b>
Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER <b>23</b>	
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<b>NAME OF COMMITTEE (In Full)</b> <b>Paul Magliocchetti Associates, Inc. Political Action Committee</b>				
<b>Full Name, Mailing Address, and ZIP Code</b> Murray, Patty People for Patty Murray P.O. Box 3662 Seattle WA 98124	Purpose of Disbursement (Senate - WA - 0)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/22/1998	Amount of Each Disbursement This Period 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Roukema, Marge Committee to Re-Elect Marge Roukem P.O. Box 625 Ridgewood NJ 07451	Purpose of Disbursement (House - NJ - 5)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/23/1998	Amount of Each Disbursement This Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Dick Gephardt Gephardt in Congress Cmte. 530 Seventh St., NE Washington DC 20005	Purpose of Disbursement (House - MO - 3)  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/24/1998	Amount of Each Disbursement This Period 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Rep. Dick Gephardt Gephardt in Congress Cmte. 530 Seventh St., NE Washington DC 20005	Purpose of Disbursement (House - MO - 3)  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 06/24/1998	Amount of Each Disbursement This Period 500.00	
<b>SUBTOTALS</b> of Disbursements This Page (Optional) .....				
<b>TOTALS</b> This Period (last page this line number only) .....			<b>19500.00</b>	