# REPORT OF RECEIPTS AND DISBURSEMENTS

**For Other Than An Authorized Committee**
**(Summary Page)**

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

DEC 22 12 30 PM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
American Chiropractic Association - PAC

ADDRESS (number and street) [ ] Check if different than previously reported
1701 Clarendon Boulevard

CITY, STATE and ZIP CODE
Arlington, VA 22209

2. FEC IDENTIFICATION NUMBER
C00102764

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

**4. TYPE OF REPORT**

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

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

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

[ ] Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? [ ] YES [X] NO

| SUMMARY | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 5. Covering Period 11/1/97 through 11/30/97 | | |
| 6. (a) Cash on Hand January 1, 19 97 | | $ 33714.71 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 41651.99 | |
| (c) Total Receipts (from Line 19) | $ 22711.25 | $ 161817.70 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 64363.24 | $ 195532.41 |
| 7. Total Disbursements (from Line 30) | $ 5500.00 | $ 136669.17 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 58863.24 | $ 58863.24 |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) | $ 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | $ 0.00 | |

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

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

Type or Print Name of Treasurer: James D. Edwards

Signature of Treasurer: James D Edwards DC

Date: 12/15/97

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)

4-00173

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

(revised 1/1/91)

NAME OF COMMITTEE: American Chiropractic Association - PAC

REPORT COVERING PERIOD FROM 11/1/97 TO 11/30/97

| | 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) | 9400.00 | 63375.00 | 11( |
| ii. Unitemized | 13311.25 | 98442.70 | 11( |
| iii. Total (add i and ii) ➤ | 22711.25 | 161817.70 | 11( |
| b. Political Party Committees | 0.00 | 0.00 | 11( |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 11( |
| d. Total Contributions (add a iii, b and c) ➤ | 22711.25 | 161817.70 | 11( |
| 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 (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤ | 22711.25 | 161817.70 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) ➤ | 22711.25 | 161817.70 | 20 |
| **II. Disbursements** | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | 0.00 | 0.00 | 21( |
| ii. Non-Federal Share | 0.00 | 0.00 | 21( |
| b. Other Federal Operating Expenditures | 0.00 | 0.00 | 21( |
| c. Total Operating Expenditures (add a i, a ii, and b) ➤ | 0.00 | 0.00 | 21( |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 5500.00 | 136669.17 | 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 Schedule 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( |
| b. Political Party Committees | 0.00 | 0.00 | 28( |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 28( |
| d. Total Contribution Refunds (add a, b and c) ➤ | 0.00 | 0.00 | 28( |
| 29. Other Disbursements | 0.00 | 0.00 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | 5500.00 | 136669.17 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤ | 5500.00 | 136669.17 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 22711.25 | 161817.70 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0.00 | 0.00 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 22711.25 | 161817.70 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤ | 0.00 | 0.00 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | 0.00 | 0.00 | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) ➤ | 0.00 | 0.00 | 37 |

4-00179

SCHEDULE A ITEMIZED RECEIPTS

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



For Line Number 11a (i)

Contributions from Individuals

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 for such committee.

**NAME OF COMMITTEE (In Full)**
American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Name of Employer / Occupation | Date(month day, year) | Amount of Each Receipt this period |
|---|---|---|---|
| Thomas J Allenburg<br>7810 Tarrey Pine Court<br>Eden Prairie, MN 55347<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date > $ 500.00 | 11/13/97 | 500.00 |
| Chester T Baron<br>7A Laurel St<br>Fairhaven, MA 02719-2738<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date > $ 250.00 | 11/21/97 | 50.00 |
| Rodney L Betts<br>1210 North Main Street<br>Findlay, OH 45840-3855<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date > $ 300.00 | 11/25/97 | 50.00 |
| Terry Bragg<br>615 Leeper Pky<br>Lenoir City, TN 37772-6151<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date > $ 500.00 | 11/03/97 | 250.00 |
| Richard M Bruns<br>371 Union ST<br>Bangor, ME 04401-4504<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date > $ 500.00 | 11/21/97 | 500.00 |
| Wendy S Coren<br>16 Isaac St<br>Norwalk, CT 06850-4107<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date > $ 300.00 | 11/25/97 | 225.00 |

SUBTOTAL of Receipts This Page (optional)----------> 1575.00

TOTAL This Period(last page this line number only)---> 1575.00

SCHEDULE A ITEMIZED RECEIPTS

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



For Line Number 11a (i)

Contributions from Individuals

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**NAME OF COMMITTEE (In Full)**
American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Name of Employer | Date(month day, year) | Amount of Each Receipt this period |
|---|---|---|---|
| Glenn Czuleda<br>927 Main St<br>Dickson City, PA 18519-1337 | self<br>Occupation<br>chiropractor | 11/07/97 | 200.00 |
| Receipt for: \| \| Primary \| \| General<br>\| \| Other (specify) | Aggregate Year To Date> $ 300.00 | | |
| **Full Name, Mailing Address & Zip Code** | **Name of Employer** | **Date(month day, year)** | **Amount of Each Receipt this period** |
| Kevin W Davis<br>PO Box 1371<br>Norfolk, NE 68702-1371 | self<br>Occupation<br>chiropractor | 11/26/97 | 375.00 |
| Receipt for: \| \| Primary \| \| General<br>\| \| Other (specify) | Aggregate Year To Date> $ 500.00 | | |
| **Full Name, Mailing Address & Zip Code** | **Name of Employer** | **Date(month day, year)** | **Amount of Each Receipt this period** |
| Charles F Downing<br>3006 Breeden<br>San Antonio, TX 78212-1427 | self<br>Occupation<br>chiropractor | 11/24/97 | 100.00 |
| Receipt for: \| \| Primary \| \| General<br>\| \| Other (specify) | Aggregate Year To Date> $ 350.00 | | |
| **Full Name, Mailing Address & Zip Code** | **Name of Employer** | **Date(month day, year)** | **Amount of Each Receipt this period** |
| Darrell E Fore<br>13200 W 95th St<br>Lenexa, KS 66215-3731 | self<br>Occupation<br>chiropractor | 11/14/97 | 250.00 |
| Receipt for: \| \| Primary \| \| General<br>\| \| Other (specify) | Aggregate Year To Date> $ 250.00 | | |
| **Full Name, Mailing Address & Zip Code** | **Name of Employer** | **Date(month day, year)** | **Amount of Each Receipt this period** |
| Ronald O Fudala<br>6969 Royalgreen Dr<br>Cincinnati, OH 45244-4003 | self<br>Occupation<br>chiropractor | 11/18/97 | 300.00 |
| Receipt for: \| \| Primary \| \| General<br>\| \| Other (specify) | Aggregate Year To Date> $ 300.00 | | |
| **Full Name, Mailing Address & Zip Code** | **Name of Employer** | **Date(month day, year)** | **Amount of Each Receipt this period** |
| Austin A Gentry<br>899 N Wilmot Ste A-3<br>Tucson, AZ 85711-1712 | self<br>Occupation<br>chiropractor | 11/03/97 | 200.00 |
| Receipt for: \| \| Primary \| \| General<br>\| \| Other (specify) | Aggregate Year To Date> $ 300.00 | | |

**SUBTOTAL** of Receipts This Page (optional)----------> 1425.00

**TOTAL** This Period(last page this line number only)----> 3000.00

SCHEDULE A ITEMIZED RECEIPTS

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



For Line Number 11a (i)

Contributions from Individuals

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**NAME OF COMMITTEE (In Full)**
American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Name of Employer / Occupation | Date(month day, year) | Amount of Each Receipt this period |
|---|---|---|---|
| Kevin M Grimes<br>PO Box 148<br>Key Largo, FL 33037-0148<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date> $ 550.00 | 11/19/97 | 300.00 |
| Donald H Handley<br>6005 Rittiman Plaza<br>San Antonio, TX 78218-5216<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date> $ 1000.00 | 11/05/97 | 500.00 |
| Corrie E Horshinski<br>420 E 86th St Ste 1A<br>New York, NY 10028-6478<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date> $ 300.00 | 11/18/97 | 300.00 |
| Lyndon C Jones<br>1121 E Tyler<br>Harlingen, TX 78550-7137<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date> $ 325.00 | 11/05/97 | 200.00 |
| Mike Kantorosinski<br>407 Essex St<br>Salem, MA 01970-3155<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date> $ 400.00 | 11/18/97 | 300.00 |
| Karen K Konarski-Hart<br>422 N Cedar<br>Little Rock, AR 72205-5538<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>chiropractor<br>Aggregate Year To Date> $ 225.00 | 11/07/97 | 75.00 |

**SUBTOTAL of Receipts This Page (optional)**----------> 1675.00

**TOTAL This Period(last page this line number only)**----> 4675.00

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For Line Number 11a (i)

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American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Name of Employer / Occupation | Date(month day, year) | Amount of Each Receipt this period |
|---|---|---|---|
| Howard W Lampe<br>4491 Jenny Rd<br>Doylestown, PA 18901-1552<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 300.00 | 11/14/97 | 100.00 |
| Daniel W Larson<br>501 N Main, Suite 130<br>Wasilla, AK 99654-7096<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 300.00 | 11/03/97 | 300.00 |
| Timothy W Love<br>2432 Applegate Drive<br>Concord, NC 28027<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: Chiropractor<br>Aggregate Year To Date> $ 550.00 | 11/21/97 | 300.00 |
| Matthew J Mallen<br>1214 Bennington St<br>Boston, MA 02128-1203<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 450.00 | 11/18/97 | 250.00 |
| Jack M Markey<br>PO Box 246<br>Jefferson, NH 03583<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | Name of Employer:<br>Occupation:<br>Aggregate Year To Date> $ 250.00 | 11/07/97 | 250.00 |
| Daniel J McClure<br>1327 US Highway 160B PO Box 738<br>Bayfield, CO 81122-9719<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 600.00 | 11/25/97 | 250.00 |

SUBTOTAL of Receipts This Page (optional)——————> 1450.00

TOTAL This Period(last page this line number only)——> 6125.00

SCHEDULE A ITEMIZED RECEIPTS

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



For Line Number 11a(i)

Contributions from Individuals

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**NAME OF COMMITTEE (In Full)**
American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Name of Employer / Occupation | Date(month day, year) | Amount of Each Receipt this period |
|---|---|---|---|
| Rick A McMichael<br>McMichael Chiro Fmly Prac, Inc 3945 Fulton Drive N<br>Canton, OH 44718-3042 | self<br>chiropractor | 11/19/97 | 500.00 |
| Receipt for: \| \| Primary \| \| General \| \| Other (specify) | Aggregate Year To Date> $ 500.00 | | |
| Paul E Okamoto<br>11935 SW Greenburg Rd.<br>Tigard, OR 97223-8463 | self<br>chiropractor | 11/05/97 | 300.00 |
| Receipt for: \| \| Primary \| \| General \| \| Other (specify) | Aggregate Year To Date> $ 300.00 | | |
| Donald J Pachl<br>4147 Fremont Ave<br>Minneapolis, MN 55412-1626 | self<br>chiropractor | 11/21/97 | 150.00 |
| Receipt for: \| \| Primary \| \| General \| \| Other (specify) | Aggregate Year To Date> $ 400.00 | | |
| Lawrence B Payne<br>7349 Burlington Pike<br>Florence, KY 41042-1509 | self<br>chiropractor | 11/03/97 | 200.00 |
| Receipt for: \| \| Primary \| \| General \| \| Other (specify) | Aggregate Year To Date> $ 300.00 | | |
| Arthur T Phelps<br>1296 Wadsworth Blvd<br>Lakewood, CO 80215-5108 | self<br>chiropractor | 11/25/97 | 350.00 |
| Receipt for: \| \| Primary \| \| General \| \| Other (specify) | Aggregate Year To Date> $ 850.00 | | |
| Roger S Redleaf<br>95 Sockanosset Crossroads #303<br>Cranston, RI 02920-5559 | self<br>chiropractor | 11/14/97 | 100.00 |
| Receipt for: \| \| Primary \| \| General \| \| Other (specify) | Aggregate Year To Date> $ 400.00 | | |

**SUBTOTAL of Receipts This Page (optional)**----------> 1600.00

**TOTAL This Period(last page this line number only)**----> 7725.00

SCHEDULE A ITEMIZED RECEIPTS

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



For Line Number 11a ( )

Contributions from Individuals

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**NAME OF COMMITTEE (In Full)**
American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Name of Employer / Occupation | Date(month day, year) | Amount of Each Receipt this period |
|---|---|---|---|
| Brian K Scharf<br>85 Franklin Street<br>Springville, NY 14141-1303<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 300.00 | 11/13/97 | 200.00 |
| Kenneth D Shelton<br>1114 Dixie Hwy<br>Rossford, OH 43460-1337<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 550.00 | 11/05/97 | 300.00 |
| Paul L Silcox<br>728 Stone Street<br>Fremont, OH 43420-4152<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 250.00 | 11/18/97 | 250.00 |
| Larry Steffensmeier<br>510 South Main<br>Rock Springs, WY 82901-6350<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 550.00 | 11/19/97 | 300.00 |
| John D Turner<br>320 E Army Trail Rd<br>Glendale Heights, IL 60139-1704<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 450.00 | 11/24/97 | 250.00 |
| Bruce R Turton<br>1171 East Putnam Avenue<br>Riverside, CT 06878-1426<br>Receipt for: \| \| Primary \| \| General \| \| Other (specify) | self<br>Occupation: chiropractor<br>Aggregate Year To Date> $ 400.00 | 11/24/97 | 200.00 |

SUBTOTAL of Receipts This Page (optional)----------> 1500.00

TOTAL This Period(last page this line number only)----> 9225.00

SCHEDULE A ITEMIZED RECEIPTS

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



Contributions from Individuals

For Line Number 11a [i]

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**NAME OF COMMITTEE (In Full)**
American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Name of Employer / Occupation | Date(month day, year) | Amount of Each Receipt this period |
|---|---|---|---|
| Jeffrey P Wheeler<br>2483 Harrison Blvd<br>Ogden, UT 84401-2831<br>Receipt for: [ ] Primary [ ] General [ ] Other (specify) | Name of Employer: self<br>Occupation: chiropractor<br>Aggregate Year To Date > $ 250.00 | 11/05/97 | 125.00 |
| Gery W Williams<br>P O Box 40<br>Stryker, OH 43557-0040<br>Receipt for: [ ] Primary [ ] General [ ] Other (specify) | Name of Employer: self<br>Occupation: chiropractor<br>Aggregate Year To Date > $ 250.00 | 11/21/97 | 50.00 |

**SUBTOTAL of Receipts This Page (optional)——————>** 175.00

**TOTAL This Period(last page this line number only)——>** 9400.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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



Contributions to Federal Candidates/Committees and Other Political Committees

For Line Number 23

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**NAME OF COMMITTEE (In Full)**
American Chiropractic Association - PAC

| Full Name, Mailing Address & Zip Code | Purpose of Disbursement | Date(month day, year) | Amount of Each Disb. this period |
|---|---|---|---|
| Committee to Reelect Congressman Dana Rohrabacher<br>1234 Sixth Street<br>#204<br>Santa Monica, CA 90401 | Dana Rohrabacher<br>(R-45th-CA)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/06/97 | 1000.00 |
| Friends of Bud Cramer<br>P.O. Box 2621<br>Huntsville, AL 35804 | Robert Cramer<br>(D-05th-AL)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/10/97 | 500.00 |
| Hon. James Maloney<br>15 Wooster Heights<br>Danbury, CT 06810 | James Maloney<br>(D-05th-CT)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/10/97 | 500.00 |
| Hon. Leonard Boswell<br>Rural Route 1<br>Box 130<br>Davis City, IA 50065 | Leonard Boswell<br>(D-03rd-IA)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/10/97 | 500.00 |
| Hon. Steven Rothman<br>25 Main Street 6th Floor<br>Hackensack, NJ 07601 | Steven Rothman<br>(D-09th-NJ)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/21/97 | 500.00 |
| Paxon for Congress<br>4280 South Buffalo Street<br>Orchard Park, NY 14127 | Bill Paxon<br>(R-27th-NY)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/21/97 | 500.00 |
| The Evan Bayh Committee<br>One North Capitol Avenue<br>Suite 200<br>Indianapolis, IN 46204 | Evan Bayh (Candidate)<br>(D-IN-JR)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/10/97 | 1000.00 |
| The Freedom Project<br>111 C Street, NE<br>Lower Unit<br>Washington, DC 20003 | Freedom Project Event for Rep. John Boehner (R-OH-08)<br>Disb for: \|X\| Primary \| \| General \| \| Other (specify) | 11/06/97 | 1000.00 |

**SUBTOTAL of Disbursement This Page (optional)**----------> 5500.00

**TOTAL This Period(last page this line number only)**----> 5500.00

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 recived.

| | | |
|---|---|---|
| ☐ | Hand Delivered | Date of Receipt |
| ☐ | First Class Mail | POSTMARKED |
| ☑ | Registerd/Certified Mail | POSTMARKED 12-16-97 |
| ☐ | No Postmark | |
| ☐ | Postmark Illegible | |
| ☐ | Received from the House office of Records and Registration | Date of Receipt |
| ☐ | Received from the Senate Office of Public Records | Date of Receipt |
| ☐ | Other ( Specify): | Postmarked _____ and/or Date of Receipt |
| ☐ | Electronic Filing | |

| | |
|---|---|
| PREPARER | 12-22-97 DATE PREPARED |

(7/97)