

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

OCT 14 11 01 AM '97

**NEW PAC**  
**1700 LINCOLN STREET**  
**DENVER, COLORADO 80203**

October 3, 1997

Public Records Office  
FEDERAL ELECTION COMMITTEE  
999 E Street, N.W.  
Washington, D.C. 20463

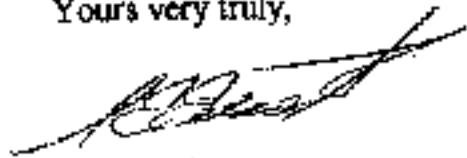
**CERTIFIED MAIL - P 218 413 430**  
**Return Receipt Requested**

Gentlemen:

Enclosed is FEC Form 3X filed on behalf of Newmont Mining Corporation Political Action Committee (NEW PAC) for the period July 1, 1997 through September 30, 1997.

Please acknowledge receipt of this enclosure by signing or stamping the copy of this letter and returning it to us in the stamped envelope provided.

Yours very truly,



Scott E. Earnest  
Director, Corporate Taxation

SEE:ssb  
Enclosure  
L100397

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

Oct 14 11 01 AM '97

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) NEWMONT MINING CORPORATION POLITICAL ACTION COMMITTEE (NEWPAC)		2. FEC IDENTIFICATION NUMBER C 00 206672
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1700 LINCOLN STREET		
CITY, STATE and ZIP CODE DENVER, COLORADO 80203		
3. <input type="checkbox"/> 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

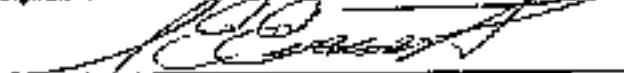
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period JULY 1, 1997 through SEPTEMBER 30, 1997		
6. (a) Cash on Hand January 1, 1997		\$ 11,458.17
(b) Cash on Hand at Beginning of Reporting Period	\$ 17,995.17	
(c) Total Receipts (from Line 19)	\$ 6,010.00	\$ 17,547.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 24,005.17	\$ 29,005.17
7. Total Disbursements (from Line 20)	\$ 6,000.00	\$ 11,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 18,005.17	\$ 18,005.17
9. Debts and Obligations Owed TO 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 800-424-6530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

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

Scott E. Earnest

Signature of Treasurer



Date

10 Oct 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.

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FEC FORM 3X  
(revised 8/93)

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

(revised 1/1/91)

NAME OF COMMITTEE NEWMONT MINING CORPORATION POLITICAL ACTION COM.		REPORT COVERING PERIOD FROM 7/1/97 TO: 9/30/97	
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	6,010	17,547	11400
ii. Unitemized			11400
iii. Total (add i and ii) >	6,010	17,547	11400
b. Political Party Committees			1160
c. Other Political Committees (such as PACs)			1160
d. Total Contributions (add a ii, b and c) >	6,010	17,547	1160
12. Transfers From Affiliated/Other Party Committees			2
13. All Loans Received			3
14. Loan Repayments Received			4
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			5
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			6
17. Other Federal Receipts (Dividends, Interest, etc.)			7
18. Transfers from Nonfederal Account for Joint Activity			8
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	6,010	17,547	13
20. Total Federal Receipts (subtract line 18 from line 19) >	6,010	17,547	20
<b>Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21600
i. Federal Share			21600
ii. Non-Federal Share			2160
b. Other Federal Operating Expenditures			2160
c. Total Operating Expenditures (add a i, a ii, and b) >	NONE	NONE	2160
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000	11,000	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			2860
b. Political Party Committees			2860
c. Other Political Committees (such as PACs)			2860
d. Total Contribution Refunds (add a, b and c) >			2860
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,000	11,000	31
<b>Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	6,010	17,547	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)	6,010	17,547	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	NONE	NONE	35
36. Offsets to Operating Expenditures (from line 15)	NONE	NONE	36
37. Net Operating Expenditures (subtract line 36 from 35) >	NONE	NONE	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 8  
FOR LINE NUMBER 1181

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)**  
NEWMONT MINING CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVE CONIF 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT GOLD COMPANY	07/10/97	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 400	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY FARMAR 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT GOLD COMPANY	07/10/97	390.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 1,092	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RALPH GARDAN 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT GOLD COMPANY	07/10/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIRECTOR	Aggregate Year-to-Date > \$ 225	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JACK MORRIS 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT GOLD COMPANY	07/10/97	375.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 1160	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM J. MULLIN 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT GOLD COMPANY	07/10/97	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT	Aggregate Year-to-Date > \$ 800	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WAYNE BURDY 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT GOLD COMPANY	07/10/97	600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO, SR. VICE PRESIDENT	Aggregate Year-to-Date > \$1,800	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KAYE REITZENSIEIN 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT GOLD COMPANY	07/10/97	90.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ASSISTANT CONTROLLER	Aggregate Year-to-Date > \$ 240	

**SUBTOTAL** of Receipts This Page (optional) ..... 1,980.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 3  
FOR LINE NUMBER 11 a i

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**NAME OF COMMITTEE (In Full)**  
NEWMONT MINING CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LEROY J. SCHUTZ 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT EXPLORATION LIMITED	07/10/97	90.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: REGIONAL GEOLOGIST Aggregate Year-to-Date > \$ 270.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCOTT D. BAK 1700 LINCOLN STREET DENVER, CO 80203	INTERNATIONAL RECRUITING SERVICES LIMITED	07/10/97	120.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR Aggregate Year-to-Date > \$ 280.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KIM ECCLES 1700 LINCOLN STREET DENVER, CO 80203	INTERNATIONAL RECRUITING SERVICES LIMITED	07/10/97	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CHIEF MINE ENGINEER Aggregate Year-to-Date > \$ 70.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LELAND KRUGERUD 1700 LINCOLN STREET DENVER, CO 80203	INTERNATIONAL RECRUITING SERVICES LIMITED	07/10/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VICE PRESIDENT Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHILLY F. PIRKLE 1700 LINCOLN STREET DENVER, CO 80203	INTERNATIONAL RECRUITING SERVICES LIMITED	07/10/97	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER Aggregate Year-to-Date > \$ 450.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID FAIRY 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT EXPLORATION LIMITED	07/10/97	45.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR Aggregate Year-to-Date > \$ 135.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEFFERY HUSPENT 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT EXPLORATION LIMITED	07/10/97	120.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: DIRECTOR Aggregate Year-to-Date > \$ 320.00		

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

630.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 8

FOR LINE NUMBER 11 a i

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**NAME OF COMMITTEE (in Full)**

NEWMONT MINING CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
IRENEBERT G. KROL 1700 LINCOLN STREET DENVER, CO 80203	NEWMONT EXPLORATION LIMITED	07/10/97	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT Aggregate Year-to-Date > \$ 410.00		
B. Full Name, Mailing Address and ZIP Code RON ANDRES P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MAINTENANCE GENERAL FIREMAN Aggregate Year-to-Date > \$ 225.00		
C. Full Name, Mailing Address and ZIP Code RICHARD BASILIAN P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MINE MAINTENANCE SUPERINTENDENT Aggregate Year-to-Date > \$ 360.00		
D. Full Name, Mailing Address and ZIP Code JAN BENDIXSEN P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation DIRECTOR Aggregate Year-to-Date > \$ 225.00		
E. Full Name, Mailing Address and ZIP Code TROY BYINGTON P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SUPERVISOR Aggregate Year-to-Date > \$ 225.00		
F. Full Name, Mailing Address and ZIP Code FRANK OUX P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SENIOR ENGINEER Aggregate Year-to-Date > \$ 90.00		
G. Full Name, Mailing Address and ZIP Code CLAYTON CRACRAFT P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation GENERAL FOREMAN Aggregate Year-to-Date > \$ 225.00		

**SUBTOTAL** of Receipts This Page (optional) ..... 600.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 4 OF 8  
FOR LINE NUMBER 11 a i

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**NAME OF COMMITTEE (in Full)**

NEWMONT MINTING CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code THOMAS CROXON P.O. BOX 669 CARLIN, NV 89822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NEWMONT GOLD COMPANY  Occupation GENERAL FOREMAN Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/23/97	Amount of Each Receipt this Period 75.00
B. Full Name, Mailing Address and ZIP Code GARY KOWLE P.O. BOX 669 CARLIN, NV 89822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NEWMONT GOLD COMPANY  Occupation ASSISTANT SUPERINTENDENT Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) 09/23/97	Amount of Each Receipt this Period 120.00
C. Full Name, Mailing Address and ZIP Code TOM EWIS P.O. BOX 669 CARLIN, NV 89822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NEWMONT GOLD COMPANY  Occupation GENERAL MANAGER Aggregate Year-to-Date > \$ 850.00	Date (month, day, year) 09/23/97	Amount of Each Receipt this Period 300.00
D. Full Name, Mailing Address and ZIP Code KATHY GUISTI P.O. BOX 669 CARLIN, NV 89822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NEWMONT GOLD COMPANY  Occupation PURCHASING Aggregate Year-to-Date > \$ 450.00	Date (month, day, year) 09/23/97	Amount of Each Receipt this Period 150.00
E. Full Name, Mailing Address and ZIP Code MANUEL IRRNANDEZ P.O. BOX 669 CARLIN, NV 89822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NEWMONT GOLD COMPANY  Occupation GENERAL FOREMAN Aggregate Year-to-Date > \$ 180.00	Date (month, day, year) 09/23/97	Amount of Each Receipt this Period 60.00
F. Full Name, Mailing Address and ZIP Code LEE HOFFMAN P.O. BOX 669 CARLIN, NV 89822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NEWMONT GOLD COMPANY  Occupation MANAGER Aggregate Year-to-Date > \$ 225.00	Date (month, day, year) 09/23/97	Amount of Each Receipt this Period 75.00
G. Full Name, Mailing Address and ZIP Code DON HULLINGER P.O. BOX 669 CARLIN, NV 89822  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer NEWMONT GOLD COMPANY  Occupation DIRECTOR Aggregate Year-to-Date > \$ 360.00	Date (month, day, year) 09/23/97	Amount of Each Receipt this Period 120.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**

NEWMONT MINING CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
DOUGLAS JONES P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SUPERINTENDENT Aggregate Year-to-Date: \$ (28%)		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MARTIN JONES P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER Aggregate Year-to-Date: \$400.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MARY KORPT P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	120.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER Aggregate Year-to-Date: \$360.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MIKE LEE P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER Aggregate Year-to-Date: \$ 225.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
EDWARD LEVY P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: SUPERINTENDENT Aggregate Year-to-Date: \$ 225.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
RAYMOND LEWIS P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER Aggregate Year-to-Date: \$ 225.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WILLIAM MALONE P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: MANAGER Aggregate Year-to-Date: \$ 450.00		

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

670.00

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



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 6 OF 8  
FOR LINE NUMBER 11 a f

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**NAME OF COMMITTEE (In Full)**  
NEWMONT MINING CORPORATION POLITICAL ACTION COMMITTEE

<p><b>A. Full Name, Mailing Address and ZIP Code</b> WILLIAM MILES P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation DIRECTOR</p> <p>Aggregate Year-to-Date \$ 225.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 75.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> KIM MORRIS P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation GENERAL FOREMAN</p> <p>Aggregate Year-to-Date \$ 225.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 75.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> BILL NEWTON P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation MANAGER</p> <p>Aggregate Year-to-Date \$ 225.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 75.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> RICHARD PERRY P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation MANAGER</p> <p>Aggregate Year-to-Date \$ 225.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 75.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> JIM PRISKI P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation SUPERINTENDENT</p> <p>Aggregate Year-to-Date \$ 225.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 75.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> ROBERT PETERSON P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation GENERAL WORKMAN</p> <p>Aggregate Year-to-Date \$ 225.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 75.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> CINDY RIDER P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation MANAGER</p> <p>Aggregate Year-to-Date \$ 270.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 90.00</p>

<p><b>SUBTOTAL of Receipts This Page (optional)</b> .....</p>	<p>540.00</p>
<p><b>TOTAL This Period (last page this line number only)</b> .....</p>	<p></p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 7 OF 8  
FOR LINE NUMBER

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)**

NEWMONT MINING CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MERLIN RIGGS P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	60.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation GENERAL FOREMAN Aggregate Year-to-Date > \$ 160.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCOTT SANITI P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MANAGER Aggregate Year-to-Date > \$ 450.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GILBERT SARGENT P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MINE SUPERVISOR Aggregate Year-to-Date > \$ 225.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALT SOLLANI P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MANAGER Aggregate Year-to-Date > \$225.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOUGLAS STOUT P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation SR. MECHANICAL ENGINEER Aggregate Year-to-Date > \$ 90.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CRAIG SWANSON P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation ASSISTANT DIRECTOR Aggregate Year-to-Date > \$ 225.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HANS VAN-GORTLER P.O. BOX 669 CARLIN, NV 89822	NEWMONT GOLD COMPANY	09/23/97	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation MANAGER Aggregate Year-to-Date > \$ 225.00		

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

540.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 8 OF 8  
FOR LINE NUMBER 11 of 1

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**NAME OF COMMITTEE (in Full)**

NEWMONT MINTING CORPORATION POLITICAL ACTION COMMITTEE

<p><b>A. Full Name, Mailing Address and ZIP Code</b> MARK WOOD P.O. BOX 669 CARLIN, NV 89822</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer NEWMONT GOLD COMPANY</p> <p>Occupation CHIEF MINE ENGINEER</p> <p>Aggregate Year-to-Date &gt; \$ 300.00</p>	<p>Date (month, day, year) 09/23/97</p>	<p>Amount of Each Receipt this Period 150.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

**SUBTOTAL** of Receipts This Page (optional) ..... 300.00

**TOTAL** This Period (last page this line number only) ..... 6,010.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**  
 NEWMONT MINING 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
NINEPAC NATIONAL MINING ASSOCIATION 1130 17th St., N.W. WASHINGTON D.C. 20035	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/97	2,500
B. Full Name, Mailing Address and ZIP Code CITIZENS FOR BARNETT F. HOLLINGS c/o DELORIS DAVIES P.O. BOX 65271 WASHINGTON DC 20035	CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/97	1,000
C. Full Name, Mailing Address and ZIP Code KICK HILL FOR CONGRESS P.O. BOX 1256 HELENA, MT 59624	CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/97	1,000
D. Full Name, Mailing Address and ZIP Code CURTIN FOR CONGRESS c/o COXITE WILSON P.O. BOX 4657 CASPER, WY 82604	CAMPAIGN CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/11/97	500
E. Full Name, Mailing Address and ZIP Code JOHN ENSIGN FOR CONGRESS c/o Jan Taylor (Assistant Treasurer) 925 East Eldorado Las Vegas, NV 89123	FUNDRAISER Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/19/97	1,000
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) .....

6,000

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
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>10-10-97</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JMU</i> PREPARER	<i>10-14-97</i> DATE PREPARED