

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

FEDERAL ELECTION COMMISSION

Nov 10 1998

1. NAME OF COMMITTEE (in full)
United Services Planning Association PAC

ADDRESS (number and street) Check if different than previously reported
4100 S. Hulen Street

CITY, STATE and ZIP CODE
Ft Worth, TX 76109

2. FEC IDENTIFICATION NUMBER
75-2693991

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

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

Thirtieth day report following the General Election on
11/03/98 in the State of TX


(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	10/15/98 through 11/23/98		
6. (a) Cash on Hand January 1, 19 98			\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period		\$ 0.00	
(c) Total Receipts (from Line 19)		\$ 4,850.00	\$ 62,150.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 4,850.00	\$ 62,150.00
7. Total Disbursements (from Line 30)		\$ 0.00	\$ 6,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 4,850.00	\$ 56,150.00
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
Martin R. Durbin

Signature of Treasurer  Date
11/06/98

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

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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE United Services Planning Association PAC		REPORT COVERING PERIOD FROM 10/15/98 TO: 11/23/98	
		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)	4,755.00	41,480.00	11(c)(8)
ii. Unitemized	95.00	20,170.00	11(c)(9)
iii. Total (add i and ii) >	4,850.00	61,650.00	11(c)(10)
b. Political Party Committees	0.00	0.00	11(d)
c. Other Political Committees (such as PACs)	0.00	0.00	11(e)
d. Total Contributions (add a, b, c and d) >	4,850.00	61,650.00	11(f)
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	500.00	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) >	4,850.00	62,150.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >	4,850.00	62,150.00	20
II. Disbursements			
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 (add a i, a ii, and b) >	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	0.00	5,500.00	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 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(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 Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements	0.00	500.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	0.00	6,000.00	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) >	0.00	6,000.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4,850.00	61,650.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,850.00	61,650.00	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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 14
FOR LINE NUMBER 11 a 1

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)
United Services Planning Association PAC

<p>A. Full Name, Mailing Address and ZIP Code Denny Glynn, 10400 Griffin Rd, Suite 100 Cooper City, FL 33328</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00 (\$40.00 Monthly)</p>
<p>B. Full Name, Mailing Address and ZIP Code Ray Herrog, 2931 Zelda Rd Montgomery, AL 36106-2648</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00 (\$40.00 Monthly)</p>
<p>C. Full Name, Mailing Address and ZIP Code Raleigh Kone, 3975 University Dr, Suite 110 Fairfax, VA 22030</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00 (\$40.00 Monthly)</p>
<p>D. Full Name, Mailing Address and ZIP Code Edward Rush, 2434 Pass Rd, Suite E Biloxi, MS 39531</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>50.00 (\$50.00 Monthly)</p>
<p>E. Full Name, Mailing Address and ZIP Code Rafael Cotto, 1717 S Rustle, Suite 210 Spokane, WA 99224</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00 (\$40.00 Monthly)</p>
<p>F. Full Name, Mailing Address and ZIP Code Bob Harman, 1615 West Lincoln Trail Blvd Radcliff, KY 40160</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 360.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>40.00 (\$40.00 Monthly)</p>
<p>G. Full Name, Mailing Address and ZIP Code Kyle Marx, 591 Camino De La Reina, 1200 San Diego, CA 92108</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 450.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt This Period</p> <p>50.00 (\$50.00 Monthly)</p>

BUBTOTAL of Receipts This Page (optional) 300.00

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 14
FOR LINE NUMBER 11 a i

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)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code Bob McCall, 221 3rd St, Suite 300 Newport, RI 02840	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Agent	Payroll Deduction	50.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 450.00		
B. Full Name, Mailing Address and ZIP Code Rose Hayden, 1300 Washington Dr, Suite 200 Fairbanks, AK 99709	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 320.00		
C. Full Name, Mailing Address and ZIP Code Jim Karr, 424 Delaware St, Suite C-2 Leavenworth, KS 66048	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280.00		
D. Full Name, Mailing Address and ZIP Code Gordon Kearl, 4100 South Hulen Fort Worth, TX	Name of Employer United Services Planning Assn.	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Agent	Payroll Deduction	25.00 (\$25.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
E. Full Name, Mailing Address and ZIP Code Kathy Reichbach, 190 S Orchard Ave, Suite B115 Vacaville, CA 95688-3636	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Agent	Payroll Deduction	50.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 450.00		
F. Full Name, Mailing Address and ZIP Code Jerry Stanley, 4100 South Hulen Fort Worth, TX 76109	Name of Employer United Services Planning Assn.	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
G. Full Name, Mailing Address and ZIP Code Joe Morrin, 4100 South Hulen Fort Worth, TX 76109	Name of Employer United Services Planning Assn.	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Agent	Payroll Deduction	25.00 (\$25.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional) 270.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code Skipper Bennett, 6410 SW Blvd, Suite 200 Fort Worth, TX 76109-3920 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Agent	Payroll Deduction	100.00 (\$100.00)
Aggregate Year-to-Date > \$ 900.00			Monthly)
B. Full Name, Mailing Address and ZIP Code John Sciancalepore, 4100 S Hulen Fort Worth, TX 76109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Agent	Payroll Deduction	40.00 (\$40.00)
Aggregate Year-to-Date > \$ 360.00			Monthly)
C. Full Name, Mailing Address and ZIP Code Tom Elmendorf, 6410 SW Blvd, Suite 200 Fort Worth, TX 76109-3920 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Agent	Payroll Deduction	65.00 (\$65.00)
Aggregate Year-to-Date > \$ 685.00			Monthly)
D. Full Name, Mailing Address and ZIP Code Paul Dunn, 5800 W Glenn Dr, Suite 140 Glendale, AZ 85301 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Agent	Payroll Deduction	40.00 (\$40.00)
Aggregate Year-to-Date > \$ 360.00			Monthly)
E. Full Name, Mailing Address and ZIP Code Steve Monoski, 6564 Loisdale Ct, Suite 205 Springfield, VA 22150 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Agent	Payroll Deduction	40.00 (\$40.00)
Aggregate Year-to-Date > \$ 360.00			Monthly)
F. Full Name, Mailing Address and ZIP Code Rex Conner, 4100 South Hulen Fort Worth, TX 76109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Services Planning Assn.	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Agent	Payroll Deduction	25.00 (\$25.00)
Aggregate Year-to-Date > \$ 250.00			Monthly)
G. Full Name, Mailing Address and ZIP Code Ted Smith, 7205 W Gore Blvd Lawton, OK 73505 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation Agent	Payroll Deduction	40.00 (\$40.00)
Aggregate Year-to-Date > \$ 360.00			Monthly)

SUBTOTAL of Receipts This Page (optional) 350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) United Services Planning Association PAC			
A. Full Name, Mailing Address and ZIP Code Dave Washnock, 607 Russell Pky, Suite C Warner Robbins, GA 31088	Name of Employer Self Employed	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 360.00	Monthly)
B. Full Name, Mailing Address and ZIP Code Terry Bolling, 161 Business Park Drive Virginia Beach, VA 23462	Name of Employer Self Employed	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 360.00	Monthly)
C. Full Name, Mailing Address and ZIP Code Boyd Adams, 7400 Viscount Blvd, Suite 103 El Paso, TX 79925	Name of Employer Self Employed	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 360.00	Monthly)
D. Full Name, Mailing Address and ZIP Code Lonnie Bowman, 315 Houston St, Suite L Manhattan, KS 66502	Name of Employer Self Employed	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 360.00	Monthly)
E. Full Name, Mailing Address and ZIP Code Jim Harkey, 4704 W Commercial Dr, Suite C North Little Rock, AK 72231	Name of Employer Self Employed	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 360.00	Monthly)
F. Full Name, Mailing Address and ZIP Code John Anderson, PO Box 738 Browns Mills, NJ 08015	Name of Employer Self Employed	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 360.00	Monthly)
G. Full Name, Mailing Address and ZIP Code Rick Rein, 11832 Rock Landing Dr, Ste 102 Newport News, VA 23606-4231	Name of Employer Self Employed	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Aggregate Year-to-Date > \$ 360.00	Monthly)
SUBTOTAL of Receipts This Page (optional)			280.00
TOTAL This Period (last page this line number only)			280.00

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 14
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code Pat Patterson, 11211 Gold Country Blvd, 108 Gold River, CA 95670	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 65.00 (\$65.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 0 585.00		
B. Full Name, Mailing Address and ZIP Code Jeff Geraci, 330 Corporate Way, Suite 100 Orange Park, FL 32073	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 8 360.00		
C. Full Name, Mailing Address and ZIP Code Al Lucas, 385 Garrisonville Rd Suite 120 Stafford, VA 22554	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 1 360.00		
D. Full Name, Mailing Address and ZIP Code Jerry Wagner, 4167 Avenida De La Plata, 102 Oceanside, CA 92056	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 5 360.00		
E. Full Name, Mailing Address and ZIP Code Bill Coxe, 10201 S Padre Island Dr, 310 Corpus Christi, TX 78418	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 6 360.00		
F. Full Name, Mailing Address and ZIP Code Bob Wallace, 4100 South Hulen Fort Worth, TX 76109	Name of Employer United Services Planning Assn. Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 8 400.00		
G. Full Name, Mailing Address and ZIP Code Jim Provo, 11 N Skokie Hw, Suite 300 Lake Bluff, IL 60044	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 50.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > 6 450.00		

SUBTOTAL of Receipts This Page (optional)	315.00
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 14
FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (in Full)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Lucas, 400 S 2nd Ave, Suite 208 Barstow, CA 92311	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date	\$ 320.00	
Eliza John, 10730 E Bethany Dr, Suite 300 Aurora, CO 80014	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date	\$ 360.00	
Dave Johnson, 2629 Plaza Pkw, Suite 10-B Wichita Falls, TX 76308	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date	\$ 360.00	
Dick Terrell, 700 FM 7B, Suite 200 Cibolo, TX 78108-0557	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date	\$ 360.00	
Dave Sargent, 14502 Granview Dr, Suite 206 Laurel, ND 58008-4217	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date	\$ 360.00	
Tony Anconetani, 5363 Veterans Pkw Columbus, GA 31904	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date	\$ 360.00	
Jim Vejar, 740 General Stewart, Suite 101 Hinesville, GA 31313	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date	\$ 360.00	

SUBTOTAL of Receipts This Page (optional) 280.00

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 7 OF 14
FOR LINE NUMBER 11 a 1

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)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gene Johnson, 193 Wolfcreek Professional Ctr Havelock, NC 28532	Self Employed	Payroll Deduction	40.00 (\$40.00 Monthly)
	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 320.00		
B. Full Name, Mailing Address and ZIP Code Steve Ray, 1200 Rucker Blvd Enterprise, AL 36330	Self Employed	Payroll Deduction	40.00 (\$40.00 Monthly)
	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 360.00		
C. Full Name, Mailing Address and ZIP Code Robert Eaines, 5801 Allentown Rd, Suite 410 Camp Springs, MD 20746	Self Employed	Payroll Deduction	50.00 (\$50.00 Monthly)
	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 450.00		
D. Full Name, Mailing Address and ZIP Code Don Davidson, 207 Temple Ave Colonial Heights, VA 23834	Self Employed	Payroll Deduction	40.00 (\$40.00 Monthly)
	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 360.00		
E. Full Name, Mailing Address and ZIP Code Carl Brown, 591 Camino de la Reina, 1200 San Diego, CA 92108	Self Employed	Payroll Deduction	40.00 (\$40.00 Monthly)
	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 360.00		
F. Full Name, Mailing Address and ZIP Code Brad Berger, 7504 Bridgeport Way West Tacoma, WA 98499	Self Employed	Payroll Deduction	50.00 (\$50.00 Monthly)
	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 450.00		
G. Full Name, Mailing Address and ZIP Code Frank Gagliardi, 4375 Las Vegas Blvd N Ste 20A Las Vegas, NV 89115	Self Employed	Payroll Deduction	40.00 (\$40.00 Monthly)
	Occupation Agent		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 360.00		

SUBTOTAL of Receipts This Page (optional) 300.00

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 **14**

FOR LINE NUMBER
11 a 1

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)
United Service Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Esau Williamson, 235 Westlake Rd, Suite 201 Fayetteville, NC 28314	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	40.00
	Aggregate Year-to-Date > \$	360.00	(\$40.00) Monthly
Lindsay Blanton, 11900 Parklawn Dr, Suite 210 Rockville, MD 20852	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	50.00
	Aggregate Year-to-Date > \$	450.00	(\$50.00) Monthly
Hugh Blomke, 1214 Progressive Dr, Suite 200 Chesapeake, VA 23320	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	50.00
	Aggregate Year-to-Date > \$	450.00	(\$50.00) Monthly
Ray Bondy, 237 C Street Lancoro, CA 93245	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	40.00
	Aggregate Year-to-Date > \$	360.00	(\$40.00) Monthly
John Draper, 3300 S 14th St, Suite 200 Abilene, TX 79605	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	30.00
	Aggregate Year-to-Date > \$	240.00	(\$30.00) Monthly
Gordon Edgin, 1711 E Central Expway, 201-A Killeen, TX 76541	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	40.00
	Aggregate Year-to-Date > \$	360.00	(\$40.00) Monthly
Jeff Miller, 1711 E Central Expway, 201-A Killeen, TX 76524	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	25.00
	Aggregate Year-to-Date > \$	225.00	(\$25.00) Monthly

BUSTOTAL of Receipts This Page (optional) **275.00**

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 9 OF 14

FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Stiles, 3007 Knight St, Suite 205 Shreveport, LA 71105	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$	350.00	
Ron Huff, 2130 S Academy Blvd, Ste 200 Colorado Springs, CO 80910	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$	350.00	
Mark Cincotta, 333 W Wilcox Dr, Suite 201 Sierra Vista, AZ 85635-4748	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$	360.00	
Parker Connau, 11790 Jefferson Ave, Suite 208 Newport News, VA 23606	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	50.00 (\$50.00 Monthly)
	Aggregate Year-to-Date > \$	450.00	
Paul Cosby, 4100 South Hulen Fort Worth, TX 76109	United Services Planning Assn.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$	400.00	
Terry Hoefar, 4100 South Hulen Fort Worth, TX 76109	United Services Planning Assn.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	25.00 (\$25.00 Monthly)
	Aggregate Year-to-Date > \$	750.00	
Mike Harvin, 1575 Northside Dr NW, Ste 150 Atlanta, GA 30318	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$	350.00	

SUBTOTAL of Receipts This Page (optional) 275.00

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

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)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Hooker, 240 Plant Ave, Suite A-200 Tampa, FL 33606	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date >	\$ 360.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joe Casey, PO Box 25449 GMP Barrigada, GU 96921	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date >	\$ 360.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dennis Rowe, 1020 Subank Blvd NE Albuquerque, NM 87112	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	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
Bob Watson, 4100 S Hulen Fort Worth, TX 76109	United Services Planning Assn.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	Aggregate Year-to-Date >	\$ 360.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rich Giles, 519 N Mar-Len Olathe, KS 66062	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	200.00 (\$200.00 Monthly)
	Aggregate Year-to-Date >	\$ 1,800.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Doug Gray, 3525 Habersham at Northlake Tucker, GA 30084	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	100.00 (\$100.00 Monthly)
	Aggregate Year-to-Date >	\$ 900.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Scott Hull, 9175 Guilford Rd, Suite 200 Columbia, MD 21046	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	125.00 (\$125.00 Monthly)
	Aggregate Year-to-Date >	\$ 1,125.00	

SUBTOTAL of Receipts This Page (optional) **585.00**

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 11 OF 14
FOR LINE NUMBER 11 11

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NAME OF COMMITTEE (In Full)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill Dean, 5285 Shawnee Rd, Suite 305 Alexandria, VA 22312-2328	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	60.00 (\$60.00) Monthly
	Aggregate Year-to-Date > \$	540.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mike Wheeler, 4605 Fambroke Lake Cir, 200 Virginia Beach, VA 23455	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	65.00 (\$65.00) Monthly
	Aggregate Year-to-Date > \$	585.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bill Breit, 4100 South Hulen Fort Worth, TX 76109	United Services Planning Assn.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	30.00 (\$30.00) Monthly
	Aggregate Year-to-Date > \$	300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred Joy, 6243 I-E 10 West, Suite 250 San Antonio, TX 78201-2022	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00) Monthly
	Aggregate Year-to-Date > \$	360.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tom Ferguson, 4100 South Hulen Fort Worth, TX	United Services Planning Assn.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	50.00 (\$50.00) Monthly
	Aggregate Year-to-Date > \$	500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Chet Carroll, 4500 Twin Oaks Dr Pensacola, FL 32506	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00) Monthly
	Aggregate Year-to-Date > \$	360.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Emile Peroyea, 7005 SE 15th St, Suite 200 Midwest city, OK 73110	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00) Monthly
	Aggregate Year-to-Date > \$	360.00	

SUBTOTAL of Receipts This Page (optional) 325.00

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 12 OF 14
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code Frank LeHardy, 3525 Nabersham at Northlake Tucker, GA 30084	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 65.00 (\$65.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 585.00	
B. Full Name, Mailing Address and ZIP Code Clint Hayes, 780 Lynnhaver Pkw, Suite 100 Virginia Beach, VA 23452	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 360.00	
C. Full Name, Mailing Address and ZIP Code Phil Loignon, 4100 South Hulen Fort Worth, TX 76109	Name of Employer United Services Planning Assn. Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 50.00 (\$50.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Bill Stropp, 5025 Erin Park Dr, Suite A Colorado Springs, CO 80918	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 60.00 (\$60.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 540.00	
E. Full Name, Mailing Address and ZIP Code Darryl Anderson, 1575 Northside Dr NW, Ste 150 Atlanta, GA 30318-4208	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 320.00	
F. Full Name, Mailing Address and ZIP Code Paul Kruse, 8283 W Hayden Rd, Suite 295 Scottsdale, AZ 85258	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 65.00 (\$65.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 585.00	
G. Full Name, Mailing Address and ZIP Code Charlie Canedy, 1919 Oakwell Farms Pkw, 200 San Antonio, TX 78218	Name of Employer Self Employed Occupation Agent	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 40.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 360.00	

SUBTOTAL of Receipts This Page (optional) 360.00

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 13 OF 14

FOR LINE NUMBER 11 & i

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NAME OF COMMITTEE (In Full)

United Services Planning Associates PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stan Russell, 4605 Pembroke Lake Cir, 200 Virginia Beach, VA 23455	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	65.00 (\$65.00 Monthly)
	Aggregate Year-to-Date > \$	505.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Peggy Galda, 4100 South Hulen Fort Worth, TX 76109	United Services Planning Assn.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	50.00 (\$50.00 Monthly)
	Aggregate Year-to-Date > \$	500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Bos, 4141 Colonel Glenn Hwy Beavercreek, OH 45431	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	40.00 (\$40.00 Monthly)
	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
Jim Petersen, 4605 Pembroke Lake Cir, 200 Virginia Beach, VA 23455	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	100.00 (\$100.00 Monthly)
	Aggregate Year-to-Date > \$	900.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fred Orr, 209 Dover Rd Clarksville, TN 37042-4155	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	50.00 (\$50.00 Monthly)
	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
Bob Swete, 4100 S Hulen Fort Worth, TX 76109	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	100.00 (\$100.00 Monthly)
	Aggregate Year-to-Date > \$	900.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Gorman, 519 North Mur-Len Olathe, KS 66062	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll Deduction	100.00 (\$100.00 Monthly)
	Aggregate Year-to-Date > \$	900.00	

SUBTOTAL of Receipts This Page (optional) 505.00

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 14 OF 14
FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (in Full)
United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dan Wall, 785 SE Bayshore Dr, Suite 201 Oak Harbor, WA 98277 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	40.00 (\$40.00) Monthly
	Occupation Agent		
Aggregate Year-to-Date > \$ 360.00			
B. Full Name, Mailing Address and ZIP Code Jim Lanier, 4100 South Eulen Fort Worth, TX 76109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	United Services Planning Assn.	Payroll Deduction	100.00 (\$100.00) Monthly
	Occupation Agent		
Aggregate Year-to-Date > \$ 1,000.00			
C. Full Name, Mailing Address and ZIP Code Bob Hookness, 119 Davis Rd, Suite 9-A Augusta, GA 30907 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	40.00 (\$40.00) Monthly
	Occupation Agent		
Aggregate Year-to-Date > \$ 360.00			
D. Full Name, Mailing Address and ZIP Code Marty Durbin, 4100 South Eulen Fort Worth, TX 76109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	United Services Planning Assn.	Payroll Deduction	50.00 (\$50.00) Monthly
	Occupation Agent		
Aggregate Year-to-Date > \$ 500.00			
E. Full Name, Mailing Address and ZIP Code Arlen Biehle, 1120 Eglin Parkway Shalimar, FL 32579 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	40.00 (\$40.00) Monthly
	Occupation Agent		
Aggregate Year-to-Date > \$ 360.00			
F. Full Name, Mailing Address and ZIP Code Terry Treat, 5900 Centreville Rd, Suite 310 Centreville, VA 20121 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	40.00 (\$40.00) Monthly
	Occupation Agent		
Aggregate Year-to-Date > \$ 360.00			
G. Full Name, Mailing Address and ZIP Code Bob Lake, 4100 S Eulen St Fort Worth, TX 76109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	United Services Planning Assn.	Payroll Deduction	25.00 (\$25.00) Monthly
	Occupation Agent		
Aggregate Year-to-Date > \$ 225.00			

SUBTOTAL of Receipts This Page (optional)	335.00
TOTAL This Period (last page this line number only)	4,755.00

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 received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 11-6-98
<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>SEN</i> PREPARER	11-10-98 DATE PREPARED