

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION

Nov 10 10 48 AM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (By Full) United Services Planning Association PAC	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 4100 S. Hulan Street	
CITY, STATE and ZIP CODE Ft Worth, TX 76109	
	2. FEC IDENTIFICATION NUMBER 75-2693991
	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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- 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 NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/98</u> through <u>09/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 0.00	
(c) Total Receipts (from Line 19)	\$ 14,580.00	\$ 51,980.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 14,580.00	\$ 51,980.00
7. Total Disbursements (from Line 30)	\$ 3,000.00	\$ 5,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 11,580.00	\$ 46,480.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9590 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Type or Print Name of Treasurer Martin R. Durbin	Date
Signature of Treasurer 	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. 5497g.

**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 07/01/98 TO: 09/30/98	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	13,755.00	32,010.00	11(a)(i)
ii. Unitemized	825.00	19,970.00	11(a)(ii)
B. Total (add i and ii) >	14,580.00	51,980.00	11(a)(B)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a ii, b and c) >	14,580.00	51,980.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	14,580.00	51,980.00	19
20. Total Federal Receipts (subtract line 16 from line 19) >	14,580.00	51,980.00	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	3,000.00	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	0.00	29
30. Total Disbursements (add 21 c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3,000.00	5,500.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	3,000.00	5,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	14,580.00	51,980.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	14,580.00	51,980.00	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 13
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 committees.

NAME OF COMMITTEE (in Full)

United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code
Denny Glynn,
10400 Griffin Rd, Suite 108
Cooper City, FL 33328

Receipt For: Primary General
 Other (specify):

Name of Employer
Self Employed

Occupation
Agent

Aggregate Year-to-Date > \$ 280.00

Date (month, day, year)
Payroll
Deduction

Amount of Each Receipt this Period
120.00
(\$40.00
Monthly)

B. Full Name, Mailing Address and ZIP Code
Ray Herzog,
2931 Zelda Rd
Montgomery, AL 36106-2648

Receipt For: Primary General
 Other (specify):

Name of Employer
Self Employed

Occupation
Agent

Aggregate Year-to-Date > \$ 280.00

Date (month, day, year)
Payroll
Deduction

Amount of Each Receipt this Period
120.00
(\$40.00
Monthly)

C. Full Name, Mailing Address and ZIP Code
Raleigh Kone,
3975 University Dr, Suite 110
Fairfax, VA 22030

Receipt For: Primary General
 Other (specify):

Name of Employer
Self Employed

Occupation
Agent

Aggregate Year-to-Date > \$ 280.00

Date (month, day, year)
Payroll
Deduction

Amount of Each Receipt this Period
120.00
(\$40.00
Monthly)

D. Full Name, Mailing Address and ZIP Code
Howard Rush,
2434 Pass Rd, Suite E
Biloxi, MS 39531

Receipt For: Primary General
 Other (specify):

Name of Employer
Self Employed

Occupation
Agent

Aggregate Year-to-Date > \$ 350.00

Date (month, day, year)
Payroll
Deduction

Amount of Each Receipt this Period
150.00
(\$50.00
Monthly)

E. Full Name, Mailing Address and ZIP Code
Rafael Cotto,
1717 E Rustle, Suite 210
Spokane, WA 99224

Receipt For: Primary General
 Other (specify):

Name of Employer
Self Employed

Occupation
Agent

Aggregate Year-to-Date > \$ 280.00

Date (month, day, year)
Payroll
Deduction

Amount of Each Receipt this Period
120.00
(\$40.00
Monthly)

F. Full Name, Mailing Address and ZIP Code
Bob Harman,
1615 West Lincoln Trail Blvd
Radcliff, KY 40160

Receipt For: Primary General
 Other (specify):

Name of Employer
Self Employed

Occupation
Agent

Aggregate Year-to-Date > \$ 280.00

Date (month, day, year)
Payroll
Deduction

Amount of Each Receipt this Period
120.00
(\$40.00
Monthly)

G. Full Name, Mailing Address and ZIP Code
Kyla Marx,
591 Camino De La Reina, 1200
San Diego, CA 92108

Receipt For: Primary General
 Other (specify):

Name of Employer
Self Employed

Occupation
Agent

Aggregate Year-to-Date > \$ 350.00

Date (month, day, year)
Payroll
Deduction

Amount of Each Receipt this Period
150.00
(\$50.00
Monthly)

BUSTOTAL of Receipts This Page (optional)	900.00
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 13
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

<p>A. Full Name, Mailing Address and ZIP Code Bob McCall, 221 3rd St, Suite 300 Newport, RI 02840</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 > \$ 350.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>150.00 (\$50.00 Monthly)</p>
<p>B. Full Name, Mailing Address and ZIP Code Rose Hayden, 1300 Washington Dr, Suite 200 Faibanks, AR 99709</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 > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>C. Full Name, Mailing Address and ZIP Code Kathy Reichbach, 190 S Orchard Ave, Suite B115 Vacaville, CA 95688-3636</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 > \$ 350.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>150.00 (\$50.00 Monthly)</p>
<p>D. Full Name, Mailing Address and ZIP Code Jerry Stanley, 4100 South Hulen Fort Worth, TX 76109</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer United Services Planning Assn.</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 320.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>E. Full Name, Mailing Address and ZIP Code Skipper Bennett, 6410 SW Blvd, Suite 200 Fort Worth, TX 76109-3920</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 > \$ 700.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>300.00 (\$100.00 Monthly)</p>
<p>F. Full Name, Mailing Address and ZIP Code John Sciancalepore, 4100 S Hulen Fort Worth, TX 76109</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>G. Full Name, Mailing Address and ZIP Code Tom Elmendorf, 6410 SW Blvd, Suite 200 Fort Worth, TX 76109-3920</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 > \$ 455.00</p>	<p>Date (month, day, year)</p> <p>Payroll</p> <p>Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>195.00 (\$65.00 Monthly)</p>

SUBTOTAL of Receipts This Page (optional) 1,155.00

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 13
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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Dunn, 5900 W Glenn Dr, Suite 140 Glendale, AZ 85301	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
Steve Monoski, 5566 Loisdale Ct, Suite 205 Springfield, VA 22150	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
Ted Smith, 7205 W Gore Blvd Lawton, OK 73505	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
Dave Washnock, 507 Russell Pky, Suite C Warner Robbins, GA 31088	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
Terry Bolling, 151 Business Park Drive Virginia Beach, VA 23462	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
Boyd Adams, 7400 Viscount Blvd, Suite 103 El Paso, TX 79925	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
Lonnie Bowman, 315 Houston St, Suite L Manhattan, KS 66502	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	

SUBTOTAL of Receipts This Page (optional) 840.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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

A. Full Name, Mailing Address and ZIP Code Jim Barkey, 4704 W Commercial Dr, Suite C North Little Rock, AK 72231 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Agent Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
B. Full Name, Mailing Address and ZIP Code John Anderson, PO Box 738 Browns Mills, NJ 08015 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Agent Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
C. Full Name, Mailing Address and ZIP Code Rick Rein, 11832 Rock Landing Dr, Ste 102 Newport News, VA 23606-4231 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Agent Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
D. Full Name, Mailing Address and ZIP Code Pat Patterson, 11211 Gold Country Blvd, 108 Gold River, CA 95670 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Agent Aggregate Year-to-Date > \$ 455.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 195.00 (\$65.00 Monthly)
E. Full Name, Mailing Address and ZIP Code Jeff Baraci, 330 Corporate Way, Suite 100 Orange Park, FL 32073 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Agent Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
F. Full Name, Mailing Address and ZIP Code Al Lucas, 385 Garrisonville Rd Suite 120 Stafford, VA 22554 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Agent Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
G. Full Name, Mailing Address and ZIP Code Jerry Wagner, 4167 Avenida De La Plata, 102 Oceanside, CA 92056 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Employed Occupation Agent Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) Payroll Deduction	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

915.00

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 **5** OF **13**
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
Bill Cox, 10201 S Padre Island Dr, 310 Corpus Christi, TX 78418	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	120.00
	Aggregate Year-to-Date > \$	280.00	(\$40.00 Monthly)
Bob Wallace, 4100 South Eulan 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	120.00
	Aggregate Year-to-Date > \$	320.00	(\$40.00 Monthly)
Jim Provo, 11 N Skokie Hw, Suite 300 Lake Bluff, IL 60044	Self Employed		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Agent	Payroll	150.00
	Aggregate Year-to-Date > \$	350.00	(\$50.00 Monthly)
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	120.00
	Aggregate Year-to-Date > \$	240.00	(\$40.00 Monthly)
Elise 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	120.00
	Aggregate Year-to-Date > \$	280.00	(\$40.00 Monthly)
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	120.00
	Aggregate Year-to-Date > \$	280.00	(\$40.00 Monthly)
Dick Terrell, 700 FM 78, 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	120.00
	Aggregate Year-to-Date > \$	280.00	(\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional) **870.00**

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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dave Sargent, 14502 Greenview Dr, Suite 206 Laurel, MD 20708-4217	Self Employed		
Occupation Agent		Payroll	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	(\$40.00 Monthly)
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tony Anconetani, 5363 Veterans Pkw Columbus, GA 31904	Self Employed		
Occupation Agent		Payroll	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	(\$40.00 Monthly)
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Vejar, 740 General Stewart, Suite 101 Hinesville, GA 31313	Self Employed		
Occupation Agent		Payroll	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	(\$40.00 Monthly)
D. 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		
Occupation Agent		Payroll	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 240.00	(\$40.00 Monthly)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Ray, 1200 Rucker Blvd Enterprise, AL 36330	Self Employed		
Occupation Agent		Payroll	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	(\$40.00 Monthly)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Haines, 5801 Allentown Rd, Suite 410 Camp Springs, MD 20746	Self Employed		
Occupation Agent		Payroll	150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 350.00	(\$50.00 Monthly)
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Don Davidson, 207 Temple Ave Colonial Heights, VA 23834	Self Employed		
Occupation Agent		Payroll	120.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	(\$40.00 Monthly)

SUBTOTAL of Receipts This Page (optional) 870.00

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 13
FOR LINE NUMBER 11 & 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 Carl Brown, 591 Camino de la Reina, 1200 San Diego, CA 92108 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 Aggregate Year-to-Date > \$ 280.00	Payroll Deduction	120.00 (\$40.00)
B. Full Name, Mailing Address and ZIP Code Brad Berger, 7504 Bridgeport Way West Tacoma, WA 98499 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 Aggregate Year-to-Date > \$ 350.00	Payroll Deduction	150.00 (\$50.00)
C. Full Name, Mailing Address and ZIP Code Frank Gagliardi, 4375 Las Vegas Blvd N Ste 20A Las Vegas, NV 89115 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 Aggregate Year-to-Date > \$ 280.00	Payroll Deduction	120.00 (\$40.00)
D. Full Name, Mailing Address and ZIP Code Esau Williamson, 235 Westlake Rd, Suite 201 Fayetteville, NC 28314 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 Aggregate Year-to-Date > \$ 280.00	Payroll Deduction	120.00 (\$40.00)
E. Full Name, Mailing Address and ZIP Code Lindsay Blanton, 11900 Parklawn Dr, Suite 210 Rockville, MD 20852 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 Aggregate Year-to-Date > \$ 350.00	Payroll Deduction	150.00 (\$50.00)
F. Full Name, Mailing Address and ZIP Code Hugh Blomeke, 1214 Progressive Dr, Suite 200 Chesapeake, VA 23320 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 Aggregate Year-to-Date > \$ 350.00	Payroll Deduction	150.00 (\$50.00)
G. Full Name, Mailing Address and ZIP Code Ray Bondy, 237 C Street Lenoire, CA 93245 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 Aggregate Year-to-Date > \$ 280.00	Payroll Deduction	120.00 (\$40.00)

SUBTOTAL of Receipts This Page (optional) 930.00

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 13
FOR LINE NUMBER 11 a 1

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

<p>A. Full Name, Mailing Address and ZIP Code Gordon Edgin, 1711 E Central Expressway, 201-A Killeen, TX 76541</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>B. Full Name, Mailing Address and ZIP Code Bomer Worrell 4100 S Hulen St Fort Worth, TX 76109</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>C. Full Name, Mailing Address and ZIP Code John Stiles, 3007 Knight St, Suite 205 Shreveport, LA 71105</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>D. Full Name, Mailing Address and ZIP Code Ron Huff, 2130 E Academy Blvd, Ste 200 Colorado Springs, CO 80910</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>E. Full Name, Mailing Address and ZIP Code Mark Cincotta, 333 W Wilcox Dr, Suite 201 Sierra Vista, AZ 85635-4748</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>F. Full Name, Mailing Address and ZIP Code Parker Consaul, 11790 Jefferson Ave, Suite 208 Newport News, VA 23606</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 > \$ 350.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>150.00 (\$50.00 Monthly)</p>
<p>G. Full Name, Mailing Address and ZIP Code Paul Cosby, 4100 South Hulen Fort Worth, TX 76109</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer United Services Planning Assn.</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 320.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>

SUBTOTAL of Receipts This Page (optional)

870.00

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 19
FOR LINE NUMBER 11 B 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 Associates PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mike Harvin, 1575 Northside Dr NW, Ste 150 Atlanta, GA 30318	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
B. 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		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
C. 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 GMF Barrigada, GU 96921	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$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	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dennis Rowe, 1020 Subank Blvd NE Albuquerque, NM 87112	Self Employed		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
E. 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.		
Occupation Agent	Payroll Deduction		120.00 (\$40.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 280.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rich Giles, 519 N Mur-Len Olathe, KS 66062	Self Employed		
Occupation Agent	Payroll Deduction		500.00 (\$200.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 1,400.00	
G. 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		
Occupation Agent	Payroll Deduction		300.00 (\$100.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date	\$ 700.00	

SUBTOTAL of Receipts This Page (optional) 1,500.00

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

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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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Scott Hull, 9175 Galford 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	375.00 (\$125.00 Monthly)
	Aggregate Year-to-Date > \$	875.00	
B. 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	180.00 (\$60.00 Monthly)
	Aggregate Year-to-Date > \$	420.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nike Wheeler, 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	195.00 (\$65.00 Monthly)
	Aggregate Year-to-Date > \$	455.00	
D. 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	120.00 (\$30.00 Monthly)
	Aggregate Year-to-Date > \$	270.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred Joy, 6243 I-H 10 West, Suite 350 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	120.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$	280.00	
F. 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	150.00 (\$50.00 Monthly)
	Aggregate Year-to-Date > \$	400.00	
G. 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	120.00 (\$40.00 Monthly)
	Aggregate Year-to-Date > \$	280.00	

SUBTOTAL of Receipts This Page (optional) 1,260.00

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

<p>A. Full Name, Mailing Address and ZIP Code Emile Peroyea, 7005 SE 15th St, Suite 200 Midwest City, OK 73110</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>B. Full Name, Mailing Address and ZIP Code Frank LeHardy, 3525 Habersham at Northlake Tucker, GA 30084</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 > \$ 455.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>195.00 (\$65.00 Monthly)</p>
<p>C. Full Name, Mailing Address and ZIP Code Clint Hayes, 780 Lynnhaver Pkw, Suite 100 Virginia Beach, VA 23452</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 > \$ 280.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>D. Full Name, Mailing Address and ZIP Code Phil Loignon, 4100 South Hulen Fort Worth, TX 76109</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer United Services Planning Assn.</p> <p>Occupation Agent</p> <p>Aggregate Year-to-Date > \$ 400.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>150.00 (\$50.00 Monthly)</p>
<p>E. Full Name, Mailing Address and ZIP Code Bill Stropp, 6025 Erin Park Dr, Suite A Colorado Springs, CO 80918</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 > \$ 420.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>180.00 (\$60.00 Monthly)</p>
<p>F. Full Name, Mailing Address and ZIP Code Darryl Anderson, 1575 Northside Dr NW, Ste 150 Atlanta, GA 30318-4208</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 > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>120.00 (\$40.00 Monthly)</p>
<p>G. Full Name, Mailing Address and ZIP Code Paul Kruse, 8283 N Hayden Rd, Suite 295 Scottsdale, AZ 85258</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 > \$ 455.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p>	<p>Amount of Each Receipt this Period</p> <p>195.00 (\$65.00 Monthly)</p>

SUBTOTAL of Receipts This Page (optional) 1,080.00

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

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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
Charlie Canedy, 1919 Oakwell Farms Pkwy, 200 San Antonio, TX 78218 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	120.00 (\$40.00 Monthly)
	Occupation Agent		
Aggregate Year-to-Date > \$ 280.00			
Stan Russell, 4605 Pembroke Lake Cir, 200 Virginia Beach, VA 23455 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	195.00 (\$65.00 Monthly)
	Occupation Agent		
Aggregate Year-to-Date > \$ 455.00			
Peggy Galda, 4100 South Hulen 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	150.00 (\$50.00 Monthly)
	Occupation Agent		
Aggregate Year-to-Date > \$ 400.00			
John Boe, 4141 Colonel Glenn Hwy Beavercreek, OH 45431 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	120.00 (\$40.00 Monthly)
	Occupation Agent		
Aggregate Year-to-Date > \$ 280.00			
Jim Petersen, 4605 Pembroke Lake Cir, 200 Virginia Beach, VA 23455 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	300.00 (\$100.00 Monthly)
	Occupation Agent		
Aggregate Year-to-Date > \$ 700.00			
Fred Orr, 209 Dover Rd Clarksville, TN 37042-4155 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	150.00 (\$50.00 Monthly)
	Occupation Agent		
Aggregate Year-to-Date > \$ 350.00			
Bob Swete, 4100 S Hulen Fort Worth, TX 76109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed	Payroll Deduction	300.00 (\$100.00 Monthly)
	Occupation Agent		
Aggregate Year-to-Date > \$ 700.00			

BUSTOTAL of Receipts This Page (optional) 1,335.00

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

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

A. Full Name, Mailing Address and ZIP Code Bob Gorman, 519 North Nur-Len Olathe, KS 66062	Name of Employer Self Employed	Date (month, day, year) Payroll	Amount of Each Receipt This Period 300.00 (\$100.00 Monthly)
	Occupation Agent	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 700.00		
B. Full Name, Mailing Address and ZIP Code Dan Wall, 785 SE Bayshore Dr, Suite 201 Oak Harbor, WA 98277	Name of Employer Self Employed	Date (month, day, year) Payroll	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
	Occupation Agent	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280.00		
C. Full Name, Mailing Address and ZIP Code Jim Lanier, 4100 South Hulen Fort Worth, TX 76109	Name of Employer United Services Planning Assn.	Date (month, day, year) Payroll	Amount of Each Receipt This Period 300.00 (\$100.00 Monthly)
	Occupation Agent	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 800.00		
D. Full Name, Mailing Address and ZIP Code Bob Hookness, 119 Davis Rd, Suite 9-A Augusta, GA 30907	Name of Employer Self Employed	Date (month, day, year) Payroll	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
	Occupation Agent	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280.00		
E. Full Name, Mailing Address and ZIP Code Marty Durbin, 4100 South Hulen Fort Worth, TX 76109	Name of Employer United Services Planning Assn.	Date (month, day, year) Payroll	Amount of Each Receipt This Period 150.00 (\$50.00 Monthly)
	Occupation Agent	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
F. Full Name, Mailing Address and ZIP Code Arlen Biehle, 1120 Eglin Parkway Shalimar, FL 32579	Name of Employer Self Employed	Date (month, day, year) Payroll	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
	Occupation Agent	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280.00		
G. Full Name, Mailing Address and ZIP Code Terry Treat, 5900 Centreville Rd, Suite 310 Centreville, VA 20121	Name of Employer Self Employed	Date (month, day, year) Payroll	Amount of Each Receipt This Period 120.00 (\$40.00 Monthly)
	Occupation Agent	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 280.00		

SUBTOTAL of Receipts This Page (optional) 1,230.00

TOTAL This Period (last page this line number only) 13,755.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

United Services Planning Association PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lauch Faircloth For Senate P.O. Box 26585 Raleigh, NC 27611	Lauch Faircloth, U.S. SENATE NC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/02/98	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Senator D'Amato 910 Congress Ave. Second Floor Austin, TX 78701	Alfonso M. D'Amato, U.S. SENATE NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/08/98	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
KAY GRANGER CAMPAIGN FUND 910 HOUSTON ST, SUITE 105-C FORT WORTH, TX 76102	Kay Granger, U.S. HOUSE 12th TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/11/98	500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
OXLEY FOR CONGRESS PO BOX 1998 FINDLAY, OH 45839	Michael G. Oxley, U.S. HOUSE 6th OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/11/98	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

3,000.00


TOTAL This Period (last page this line number only)

3,000.00

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
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<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	
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