

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 15 11 29 AM '99

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Manufacturers & Traders Trust Company Political Action Committee		2. FEC IDENTIFICATION NUMBER CO0137273
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported One M&T Plaza, 19th Floor		
CITY, STATE and ZIP CODE Buffalo, NY 14203		
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 |
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/99</u> through <u>3/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 1,343.37
(b) Cash on Hand at Beginning of Reporting Period	\$ 1,343.37	
(c) Total Receipts (from Line 19)	\$ 9,765.19	\$ 9,765.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 11,108.56	\$ 11,108.56
7. Total Disbursements (from Line 20)	\$ 5,895.00	\$ 5,895.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 5,213.56	\$ 5,213.56
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20462 Toll Free 800-424-9630 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

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
Marlene Tomasselli

Signature of Treasurer

Marlene Tomasselli

Date

4/9/99

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

FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD		
Manufacturers & Traders Trust Company Political Action Committee		FROM 1/1/99	TO: 3/31/99	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individuals/Persons Other Than Political Committees			11(a)(i)
i.	Itemized (use Schedule A)	4,437.91	4,437.91	11(a)(ii)
ii.	Unitemized	5,327.28	5,327.28	11(a)(iii)
iii.	Total (add i and ii) >	9,765.19	9,765.19	11(b)
b.	Political Party Committees			11(c)
c.	Other Political Committees (such as PACs)			11(d)
d.	Total Contributions (add a ii, b and c) >	9,765.19	9,765.19	12
12.	Transfers From Affiliated/Other Party Committees			13
13.	All Loans Received			14
14.	Loan Repayments Received			15
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)			16
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees			17
17.	Other Federal Receipts (Dividends, Interest, etc.)			18
18.	Transfers from Nonfederal Account for Joint Activity	9,765.19	9,765.19	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	9,765.19	9,765.19	20
20.	Total Federal Receipts (subtract line 18 from line 19) >	9,765.19	9,765.19	
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i.	Federal Share			21(a)(ii)
ii.	Non-Federal Share			21(b)
b.	Other Federal Operating Expenditures			21(c)
c.	Total Operating Expenditures (add a i, a ii, and b) >			22
22.	Transfers to Affiliated/Other Party Committees	100.00	100.00	23
23.	Contributions to Federal Candidates/Committees and Other Political Committees			24
24.	Independent Expenditures (use Schedule E)			25
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26.	Loan Repayments Made			27
27.	Loans Made			
28.	Refunds of Contributions To:			28(a)
a.	Individuals/Persons Other Than Political Committees			28(b)
b.	Political Party Committees			28(c)
c.	Other Political Committees (such as PACs)			28(d)
d.	Total Contribution Refunds (add a, b and c) >	5,795.00	5,795.00	28
29.	Other Disbursements	5,895.00	5,895.00	30
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	5,895.00	5,895.00	31
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	0	0	32
33.	Total Contribution Refunds (from line 28d)	0	0	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	0	0	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	0	35
36.	Offsets to Operating Expenditures (from line 15)	0	0	36
37.	Net Operating Expenditures (subtract line 36 from 35) >	0	0	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11a(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)

Manufacturers & Traders Trust Company Political Action Committee

A. Full Name, Mailing Address and ZIP Code Steven M. Coen 41 Four Winds Way Snyder, NY 14226		Name of Employer M&T Bank	Date (month, day, year) 1/13/99	Amount of Each Receipt this Period \$325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation SVP	Aggregate Year-to-Date > \$ 325.00	
B. Full Name, Mailing Address and ZIP Code Atwood Collins III 21 Fox Hill Lane Darfen, CT 06820		Name of Employer M&T Bank	Date (month, day, year) 3/5/99	Amount of Each Receipt this Period \$1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation BVP	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code Scott E. Dagenais 295 East Center Street Shavertown, PA 18708		Name of Employer M&T Bank	Date (month, day, year) payroll deduct	Amount of Each Receipt this Period \$230.76 (\$38.46 biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Division Pres.	Aggregate Year-to-Date > \$ 230.76	
D. Full Name, Mailing Address and ZIP Code Saverio Giarrusso 18 Prospect Street Babylon, NY 11702		Name of Employer M&T Bank	Date (month, day, year) payroll deduct	Amount of Each Receipt this Period \$300.00 (\$50 biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation SVP	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code Catherine M. Johnson 31 Willow Ridge Lane Lancaster, NY 14086		Name of Employer M&T Bank	Date (month, day, year) payroll deduct	Amount of Each Receipt this Period \$232.15 (\$46.43 biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP	Aggregate Year-to-Date > \$ 232.15	
F. Full Name, Mailing Address and ZIP Code William Kuffner 6 Lakeridge Drive Orchard Park, NY 14127		Name of Employer M&T Bank	Date (month, day, year) 1/8/99	Amount of Each Receipt this Period \$325.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Admin VP	Aggregate Year-to-Date > \$ 325.00	
G. Full Name, Mailing Address and ZIP Code William M. LeBeau 5005 Derringer Drive Jamesville, NY 13078		Name of Employer M&T Bank	Date (month, day, year) 1/20/99	Amount of Each Receipt this Period \$400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP	Aggregate Year-to-Date > \$ 400.00	

SUBTOTAL of Receipts This Page (optional) \$2812.91

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 2
FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (In Full)

Manufacturers & Traders Trust Company Political Action Committee

A. Full Name, Mailing Address and ZIP Code Jeffrey M. Levy 701 Waldens Pond Road Albany, NY 12203 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer M&T Bank Occupation Admin VP Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) pyroll deduct	Amount of Each Receipt this Period \$300.00 (\$50 biwkly)
B. Full Name, Mailing Address and ZIP Code John F. Moore 9627 Cobblestone Drive Clarence, NY 14031 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer M&T Bank Occupation SVP Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 1/13/99	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Howard W. Sharp 4662 Post Road Manlius, NY 13104 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer M&T Bank Occupation Division Pres. Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 1/13/99	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Philip P. Struzzi 209 Jamaica Boulevard Endicott, NY 13760 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer M&T Bank Occupation VP Aggregate Year-to-Date > \$ 325.00	Date (month, day, year) 3/3/99	Amount of Each Receipt this Period \$325.00
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$1625.00

TOTAL This Period (last page this line number only)

\$4437.91

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **23**

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NAME OF COMMITTEE (In Full)

Manufacturers & Traders Trust Company Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement US Congressman Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/19/99	Amount of Each Disbursement This Period \$100.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$100.00

TOTAL This Period (last page this line number only)

\$100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

Manufacturers & Traders Trust Company Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Justice Calvaruso for Surrogate Court Judge 301 Exchange Boulevard Rochester, NY 14608	Fund raiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/12/99	\$250.00
B. Full Name, Mailing Address and ZIP Code Friends of Jack Doyle 301 Exchange Boulevard Rochester, NY 14608	Purpose of Disbursement Monroe Co. Exec. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/20/99	Amount of Each Disbursement This Period \$2500.00
C. Full Name, Mailing Address and ZIP Code NYS Senate Republican Campaign Committee PO Box 7229 Albany, NY 12224	Purpose of Disbursement Senators Joseph Bruno & Guy Velella Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/4/99	Amount of Each Disbursement This Period \$1000.00
D. Full Name, Mailing Address and ZIP Code Friends of Supervisor John T. Auberger 83 Forest Meadow Trail Rochester, NY 14624	Purpose of Disbursement Fund raiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/9/99	Amount of Each Disbursement This Period \$500.00
E. Full Name, Mailing Address and ZIP Code Committee to Elect Irene Elia 2749 Lockport Road Niagara Falls, NY 14305	Purpose of Disbursement Candidate, Niagara Falls Mayor Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/19/99	Amount of Each Disbursement This Period \$250.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$4500.00

TOTAL This Period (last page this line number only)

\$4500.00

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 4-9-99
<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>JMIS</i> PREPARER	 <i>4-15-99</i> DATE PREPARED