REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 15 2 14 PM '99

1. NAME OF COMMITTEE (in full)
CELOTEX CORPORATION
POLITICAL ACTION COMMITTEE

ADDRESS (number and street) [ ] Check if different than previously reported
4010 BOY SCOUT BOULEVARD

CITY, STATE and ZIP CODE
TAMPA, FL 33607

2. FEC IDENTIFICATION NUMBER
C00226845

3. [X] This committee qualified as a multicandidate committee DURING THIS Reporting Period on 1/1/98 (date)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[X] 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 _____ in the State of _____.

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

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7/1/98 through 9/30/98		
6. (a) Cash on Hand January 1, 1998		$ 18928.78
(b) Cash on Hand at Beginning of Reporting Period	$ 14195.80	
(c) Total Receipts (from line 19)	$ 4379.08	$ 13646.10
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 18574.88	$ 32574.88
7. Total Disbursements (from Line 30)	$ 4500.00	$ 18500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 14074.88	$ 14074.88
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY 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 20463
Toll Free 800-424-9530
Local 202-376-3120

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
Jonathan W. Dorlog

Signature of Treasurer

Date 12/22/98

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

FEC FORM 3X
(revised 1/1/91)

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

(revised 1/1/91)

NAME OF COMMITTEE: OTEX CORPORATION POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM 7/1/98 TO 9/30/98

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	1950.06	2770.14
ii. Unitemized	2429.02	10875.96
iii. Total (add i and ii) Ó	4379.08	13646.10
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	-0-	-0-
d. Total Contributions (add a iii, b and c) Ó	4379.08	13646.10
12. Transfers From Affiliated/Other Party Committees	-0-	-0-
13. All Loans Received	-0-	-0-
14. Loan Repayments Received	-0-	-0-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-
17. Other Federal Receipts (Dividends, Interest, etc.)	-0-	-0-
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) Ó	4379.08	13646.10
20. Total Federal Receipts (subtract line 18 from line 19) Ó	4379.08	13646.10
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	-0-	-0-
ii. Non-Federal Share	-0-	-0-
b. Other Federal Operating Expenditures	-0-	-0-
c. Total Operating Expenditures (Add a i, a ii, and b) Ó	-0-	-0-
22. Transfers to Affiliated/Other Party Committees	-0-	-0-
23. Contributions to Federal Candidates/Committees and Other Political Committees	4500.00	18500.00
24. Independent Expenditures (use Schedule E)	-0-	-0-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Schedule F)	-0-	-0-
26. Loan Repayments Made	-0-	-0-
27. Loans Made	-0-	-0-
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	-0-	-0-
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	-0-	-0-
d. Total Contribution Refunds (Add a, b and c) Ó	-0-	-0-
29. Other Disbursements	-0-	-0-
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) Ó	4500.00	18500.00
31. Total Federal Disbursements (subtract line 21 a ii from line 30) Ó	4500.00	18500.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	4379.08	13646.10
33. Total Contribution Refunds (from line 28d)	-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32)	4379.08	13646.10
35. Total Federal Operating Expenditures (add 21 a i and 21 b) Ó	-0-	-0-
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-
37. Net Operating Expenditures (subtract line 36 from 35) Ó	-0-	-0-

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 1 OF 3

FORM 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 commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
CELOTEX CORPORATION
POLITICAL ACTION COMMITTEE

FEC ID No. C00226845

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
T.M. PARISO P.O. Box 31602 Tampa, FL 33631-3602	Celotex Corporation Tampa, FL	Twice monthly payroll deduction	250.02 $41.67 per
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Executive VP	Aggregate Year-To-Date $ 750.06	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R.B. Kriever 19 Birdie Lane Palm Harbor, FL 34683	Celotex Corporation Tampa, FL	Twice monthly payroll deduction	195.00 $32.50 per
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Senior V.P.	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
L. M. Hickey, Jr. 1181 Colonial Drive Ft. Dodge, IA 50501	Celotex Corporation Fort Dodge, IA	Twice monthly payroll deduction	125.04 $20.84 per
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Plant Manager	Aggregate Year-To-Date $ 375.12	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J.D. Steddom 10-9 Meadow Lane Highland Heights, KY 41076	Celotex Corporation Tampa, FL	Twice monthly payroll deduction	75.00 $12.50 per
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation: H.R. Representative	Aggregate Year-To-Date $ 225.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
K.L. Clark 2880 Meadow Wood Drive Clearwater, FL 34621	Celotex Corporation Tampa, FL	Twice monthly payroll deduction	180.00 $30.00 per
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation: V.P. Research	Aggregate Year-To-Date $ 540.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
D.C. Lewellen 3924 Oak Hammock Drive Brandon, FL 33511	Celotex Corporation Tampa, FL	Twice monthly payroll deduction	90.00 $15.00 per
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Director Engineering	Aggregate Year-To-Date $ 270.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
F.W. Gallant 4206 Cleveland St. Tampa, FL 33609	Celotex Corporation Tampa, FL	Twice monthly payroll deduction	90.00 $15.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Project Manager	Aggregate Year-To-Date $ 270.00	

SUBTOTAL of Receipts This Page (optional)	1005.06
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 2 OF 3

FORM LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
CELOTEX CORPORATION
POLITICAL ACTION COMMITTEE

FEC ID No. C00226845

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year) / Aggregate Year-To-Date	Amount of Each Receipt this Period
A. M.E. Londrigan 3153 Landmark Drive #221 Clearwater, FL 34621 Receipt for: Primary General Other (specify):	Celotex Corporation Tampa, FL Occupation: Manager- Research	Twice monthly payroll deduction $ 270.00	90.00 $15.00 per
B. J.P. Borreca 5901 Hammock Woods Drive Odessa, FL 33556 Receipt for: Primary General Other (specify):	Celotex Corporation Tampa, FL Occupation: President & CEO	Twice monthly payroll deduction $ 270.00	90.00 $15.00 per
C. J.W. Oorlog 205 Locust Drive Brandon, FL 33511 Receipt for: Primary General Other (specify):	Celotex Corporation Tampa, FL Occupation: V.P. & CFO	Twice monthly payroll deduction $ 270.00	90.00 $15.00 per
D. M.M. O'Barr 5305 Ambrose Street Tampa, FL 33647 Receipt for: Primary General Other (specify):	Celotex Corporation Tampa, FL Occupation: V.P. Strategic	Twice monthly payroll deduction $ 225.00	75.00 $12.50 per
E. G.L. Esch 215 Oakcrest Drive Safety Harbor,FL 34695 Receipt for: Primary General Other (specify):	Celotex Corporation Tampa, FL Occupation: Manager-Manufact.	Twice monthly payroll deduction $ 270.00	90.00 $15.00 per
F. R.N. Wells 4905 Shetland Avenue Tampa, FL 33615 Receipt for: Primary General Other (specify):	Celotex Corporation Tampa, FL Occupation: Supervisor - I.T.	Twice monthly payroll deduction $ 225.00	75.00 $12.50 per
G. M. A. DeLillo 1112 Hunt Club Lane Valrico, FL 33594 Receipt for: Primary General Other (specify):	Celotex Corporation Tampa, FL Occupation: V.P.- Risk Mgmt	Twice monthly payroll deduction $ 405.00	135.00 $22.50 per

SUBTOTAL of Receipts This Page (optional)	645.00
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

Use separate schedule for each category of the Detailed Summary Page

PAGE 3 OF 3

FORM LINE NUMBER

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NAME OF COMMITTEE (in Full)
CELOTEX CORPORATION
POLITICAL ACTION COMMITTEE

FEC ID No. C00226845

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. S.M. Hawkins 7705 Lake Cypress Drive Odessa, FL 33556 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Celotex Corporation Tampa, FL Occupation: V.P. Sales Aggregate Year-To-Date $ 360.00	Twice monthly payroll deduction	120.00 $20.00 per
B. J.A. Dick 12026 Nicklas Cr Tampa, FL 33624 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Celotex Corporation Tampa, FL Occupation: Director - Taxes Aggregate Year-To-Date $ 270.00	Twice monthly payroll deduction	90.00 $15.00 per
C. D.L. Richert 880 Mandalay Ave., Apt C1208 Clearwater, FL 33767 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Celotex Corporation Tampa, FL Occupation: Manager - Tax Aggregate Year-To-Date $ 270.00	Twice monthly payroll deduction	90.00 $15.00 per
D. Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Receipt for: ☐ Primary ☐ General ☐ 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)	300.00
TOTAL This Period (last page this line number only)	1,950.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule 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)
CELOTEX CORPORATION
POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month day, year)	Amount of Each Disbursement This Period
SHELBY FOR US SENATE P. O. BOX 1091 TUSCALOOSA, AL 35403	1998 ELECTION-R-AL Disbursement for: [ ] Primary [X] General [ ] Other (specify)	7/9/98	1000.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
JIM DAVIS FOR CONGRESS P. O. BOX 18143 TAMPA, FL 33679	1998 ELECTION-D-FL Disbursement for: [X] Primary [ ] General [ ] Other (specify)	7/28/98	2000.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
JIM DAVIS FOR CONGRESS P. O. BOX 18143 TAMPA, FL 33679	1998-ELECTION-D-FL Disbursement for: [ ] Primary [X] General [ ] Other (specify)	9/30/98	2500.00
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
SHELBY FOR US SENATE P.O. BOX 1091 TUSCALOOSA, AL 35403	CONTRIBUTION REFUND Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/20/98	(1000.00)
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for**	**Date (month day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	4500.00
TOTAL This Period (last page this line number only)	

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.

☑	Hand Delivered	Date of Receipt 1-15-99
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

Sep	1-19-99
PREPARER	DATE PREPARED

(4/98)