

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

JUN 18 2 53 PM '99

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT


1. NAME OF COMMITTEE (in full) <b>Fund for a Responsible Future</b>		2. FEC IDENTIFICATION NUMBER <b>C00301887</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>P.O. Box 629</b>		
CITY, STATE and ZIP CODE <b>Washington, DC 20044-0529</b>		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report
- Monthly Report Due On:  
 February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31
- 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>05/01/99</u> through <u>05/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>			\$ 48,129.71
(b) Cash on Hand at Beginning of Reporting Period		\$ 112,379.52	
(c) Total Receipts (from Line 19)		\$ 35,826.78	\$ 119,689.02
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 148,206.30	\$ 167,828.73
7. Total Disbursements (from Line 30)		\$ 5,251.91	\$ 24,874.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 142,954.39	\$ 142,954.39
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 663 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 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 <b>Janet Bain</b>	Date <b>6-15-99</b>
Signature of Treasurer 	

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 9/98)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE <b>Fund for a Responsible Future</b>	REPORT COVERING PERIOD		
	FROM	TO	
	05/01/99	05/31/99	
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	4,500.00	14,500.00	11(a)(i)
ii. Unitemized	200.00	260.80	11(a)(ii)
iii. Total (add i and ii) >	4,700.00	14,760.80	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	31,000.00	104,500.00	11(c)
d. Total Contributions (add a ii, b and c) >	35,700.00	119,260.80	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.)	126.78	438.22	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) >	35,826.78	119,699.02	19
20. Total Federal Receipts (subtract line 18 from line 19) >	35,826.78	119,699.02	20
<b>II. Disbursements</b>			
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	5,251.91	22,874.34	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	5,251.91	22,874.34	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	2,000.00	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. Individual/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	5,251.91	24,874.34	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	6,251.91	24,874.34	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	6,251.91	24,874.34	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) (from line 11d)	35,700.00	119,260.80	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans) (subtract line 33 from 32)	35,700.00	119,260.80	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	5,251.91	22,874.34	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	5,251.91	22,874.34	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 3  
FOR LINE NUMBER 11c

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)  
Fund for a Responsible Future

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Arthur Andersen PAC</b> <b>1666 K Street, NW</b> <b>Washington, DC 20006</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/06/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500.00		2,500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>American Oncology Resources PAC</b> <b>16825 Northchase Drive Ste 130</b> <b>Houston, TX 77060</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/06/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Mass. Mutual Political Action Committee</b> <b>1295 State Street</b> <b>Springfield, MA 01111</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/11/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000.00		2,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>New York Mercantile Exchange PAC</b> <b>1 North End Ave</b> <b>World Financial Ctr</b> <b>New York, NY 10282</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/11/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>American Insurance Association PAC</b> <b>1130 Connecticut Ave NW</b> <b>Suite 1000</b> <b>Washington, DC 20036</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/11/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>American Ambulance Association PAC</b> <b>1301 Connecticut Ave NW</b> <b>Washington, DC 20036</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/11/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Integrated Waste Services Assoc REPAC</b> <b>1401 H Street, NW #220</b> <b>Washington, DC 20005</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/11/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		500.00

**SUBTOTAL of Receipts This Page (optional)** ..... **9,000.00**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 3  
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (in Full)  
Fund for a Responsible Future

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Concerned Associates Employees PAC</b> <b>250 Carpenter Freeway</b> <b>Irving, TX 75062</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Arnold &amp; Porter Partners Political Action</b> <b>555 12th St NW</b> <b>Washington, DC 20004</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Chase Manhattan Corp. Fund for Good</b> <b>270 Park Ave</b> <b>New York, NY 10017</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Independent Insurance Agents PAC</b> <b>412 First St. SE</b> <b>Suite 300</b> <b>Washington, DC 20003</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>PP&amp;L People for Good Gov't-Federal PAC</b> <b>Two North Ninth Street</b> <b>Allentown, PA 18101</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Goldman Sachs PAC</b> <b>1101 Pennsylvania Ave NW</b> <b>Suite 800</b> <b>Washington, DC 20004</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>The Bond Market Assoc. PAC</b> <b>1445 New York Ave NW</b> <b>Washington, DC 20005</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		1,000.00

**SUBTOTAL** of Receipts This Page (optional) ..... **7,000.00**

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 3 OF 3  
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)  
Fund for a Responsible Future

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Independent Insurance Agents PAC</b> <b>412 First St. SE</b> <b>Suite 300</b> <b>Washington, DC 20003</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/18/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 3,000.00	2,000.00
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>AICPA Effective Legislation Committee</b> <b>1455 Pennsylvania Ave NW</b> <b>Washington, DC 20004</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/26/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 5,000.00	5,000.00
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Peat Marwick/KPMG PAC</b> <b>PO Box 18254</b> <b>Washington, DC 20036</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/26/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 2,500.00	2,500.00
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>RJR Political Action Committee</b> <b>P.O. Box 718</b> <b>Winston-Salem, NC 27102</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/28/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 1,000.00	1,000.00
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>National Association of Beverage</b> <b>5101 River Rd.</b> <b>Suite 108</b> <b>Bethesda, MD 20815</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/26/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 1,000.00	1,000.00
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Philip Morris Companies, Inc. PAC</b> <b>120 Park Ave.</b> <b>New York, NY 10017</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/28/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 2,000.00	2,000.00
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>News America-FOX PAC</b> <b>444 N Capitol St NW</b> <b>Suite 722</b> <b>Washington, DC 20001</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/28/99	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date >	\$ 1,500.00	1,500.00

**SUBTOTAL** of Receipts This Page (optional) ..... **15,000.00**

**TOTAL** This Period (last page this line number only) ..... **31,000.00**

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11 & 1

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NAME OF COMMITTEE (in Full)  
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Kutler 6405 Treatop Circle Columbia, MD 21045	Clark & Wainstock	05/03/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Managing Director	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code Peter Madigan 903 Vicar Lane Alexandria, VA 22302	Name of Employer Boland & Madigan, Inc.	Date (month, day, year) 05/18/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation COO	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Michael Boland 700 13th St, NW Suite 350 Washington, DC 20005	Name of Employer Boland & Madigan, Inc.	Date (month, day, year) 05/18/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Kathleen Holcombe 2016 Sandstone Court Silver Springs, MD 20904	Name of Employer Policy Directions Inc.	Date (month, day, year) 05/28/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code John Jarvis 20446 Woodtrail Rd. Round Hill, VA 20141	Name of Employer McGlotten & Jarvis	Date (month, day, year) 05/28/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code Aaron Fleischman 6 Kalorama Circle, NW Washington, DC 20008	Name of Employer Fleischman & Walsh, LLP	Date (month, day, year) 05/28/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Partner	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

GUSTOTAL of Receipts This Page (optional) ..... 4,500.00

TOTAL This Period (last page this line number only) ..... 4,500.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)  
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code Citibank, F.S.B. P.O. Box 18967 Washington, DC 20036-097	Name of Employer  Occupation	Date (month, day, year)  05/28/99	Amount of Each Receipt this Period  126.78
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 438.22	
B. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 0	
C. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 0	
D. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 0	
E. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 0	
F. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 0	
G. Full Name, Mailing Address and ZIP Code			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > 0	

SUBTOTAL of Receipts This Page (optional) .....	126.78
TOTAL This Period (last page this line number only) .....	126.78

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Phoenix Park Hotel 520 N Capitol St NW Washington, DC	Payment for 5/5 event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/05/99	1,546.74
B. Full Name, Mailing Address and ZIP Code Lourdes Carmen Miranda 6805 Meteor Place Apt. #104 Springfield, VA 22150	April lock box fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/17/99	40.00
C. Full Name, Mailing Address and ZIP Code David's White House Restaurant 3560 Courthouse Road Providence Forge, VA 23140	Payment for lunch event 4/28/98 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/99	768.08
D. Full Name, Mailing Address and ZIP Code Janet Bain Company 3001 Park Center Drive Alexandria, VA 22302	Monthly retainer and expenses for events Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/99	2,205.65
E. Full Name, Mailing Address and ZIP Code Deloitte & Touche LLP P.O. Box 277694 Atlanta, GA 30384-7694	Professional services 3/99 and 4/99 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/28/98	655.00
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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5,214.47
<b>TOTAL</b> This Period (last page this line number only) .....	5,214.47



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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 6-18-99
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<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
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 <i>[Signature]</i> PREPARER	6-18-99 DATE PREPARED