

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

EX-107
FEB 2 12 02 PM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Fight PAC	2. FEC IDENTIFICATION NUMBER C00305797
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 6052 Ridge Ford Road	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Burke, VA 22015	

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>07/01/98</u> through <u>09/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 60,149.38
(b) Cash on Hand at Beginning of Reporting Period	\$ 71,505.73	
(c) Total Receipts (from Line 19)	\$ 31,550.00	\$ 112,285.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 103,055.73	\$ 172,434.38
7. Total Disbursements (from Line 30)	\$ 70,342.63	\$ 139,721.28
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 32,713.10	\$ 32,713.10
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 20483 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 Mark Rodgers	Date
Signature of Treasurer 	1/30/99

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Right PAC	REPORT COVERING PERIOD	
	FROM	TO
	07/01/98	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)	22,250.00	100,250.00
ii. Unitemized	1,800.00	2,035.00
iii. Total (add i and ii) >	24,050.00	102,285.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	6,500.00	9,000.00
d. Total Contributions (add a ii, b and c) >	30,550.00	111,285.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	1,000.00	1,000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	31,550.00	112,285.00
20. Total Federal Receipts (subtract line 16 from line 19) >	31,550.00	112,285.00
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	12,842.63	27,408.28
c. Total Operating Expenditures (add a i, a ii, and b) >	12,842.63	27,408.28
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	47,500.00	102,313.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00
29. Other Disbursements	10,000.00	10,000.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	70,342.63	139,721.28
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	70,342.63	139,721.28
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	30,550.00	111,285.00
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans)(subtract line 33 from 32)	30,550.00	111,285.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	12,842.63	27,408.28
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from 35) >	12,842.63	27,408.28

SCHEDULE A

ITEMIZED RECEIPTS

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)
Fight PAC

A. Full Name, Mailing Address and ZIP Code Frank N. Genovese R. 7 Box 447 Kittanning, PA 19032	Name of Employer Self	Date (month, day, year) 09/04/98	Amount of Each Receipt this Period 500.00
	Occupation Investments	Aggregate Year-to-Date > \$ 500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Thomas P. Johnson 1500 Oliver Bldg. Pittsburgh, PA 15222	Name of Employer Kirkpatrick & Lockhart LLP	Date (month, day, year) 09/04/98	Amount of Each Receipt this Period 2,500.00
	Occupation Attorney	Aggregate Year-to-Date > \$ 2,500.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Mary Corazza 520 East Muir Ave. Hazleton, PA 18201	Name of Employer None	Date (month, day, year) 09/04/98	Amount of Each Receipt this Period 250.00
	Occupation Retired	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Peter B. Mullaney 213 Grandview Ave. Pittsburgh, PA 15211	Name of Employer Self	Date (month, day, year) 09/10/98	Amount of Each Receipt this Period 250.00
	Occupation Consultant	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code George J. Magovern 251 Old Mill Rd. Pittsburgh, PA 15238	Name of Employer Info Requested	Date (month, day, year) 09/10/98	Amount of Each Receipt this Period 1,000.00
	Occupation _____	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Jerry E. Dempsey 114 Dominick Court Greenville, SC 29605	Name of Employer Retired	Date (month, day, year) 09/10/98	Amount of Each Receipt this Period 1,000.00
	Occupation _____	Aggregate Year-to-Date > \$ 1,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Thomas Marshall PO Box 2650 Marco Island, PA 34146	Name of Employer Aristech	Date (month, day, year) 09/10/98	Amount of Each Receipt this Period 4,000.00
	Occupation CEO	Aggregate Year-to-Date > \$ 4,000.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	9,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 2 OF 3
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
Fight PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edgar Sanders Lewis 630 E. Dr. Sewickley, PA 15143	None	09/10/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Retired	Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas W. Angerman 830 Washington Ave Oakmont, PA 15139	Angerman & Assoc.	09/10/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Geologist	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles T. Koval 507 Valhalla Ln. Sewickley, PA 15143	Atlas Energy Oil & Gas	09/10/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Chairman	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hussain G. Malik 296 East Brown Street East Stroudsburg, PA 18301	Self	09/28/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Physician	Aggregate Year-to-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David M. Roderick 600 Grant St. STE 6200 Pittsburgh, PA 15219	USX Corp.	09/28/98	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Chairman	Aggregate Year-to-Date > \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas R. Donahue Bigelow Corporate Center Pittsburgh, PA 15219	Federated Investors	09/28/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Executive	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
Elmer Gates 840 Yorkshire Road Bethlehem, PA 18017	The Fuller Company	09/28/98	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Chairman	Aggregate Year-to-Date > \$ 5,000.00	

SUBTOTAL of Receipts This Page (optional) 10,750.00

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 3
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)
Fight PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gino Gaspari 1664 Dauphin ave Wyomissing, PA 19610	Self	09/28/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John F. Donahue 1054 Beechwood Blvd. Pittsburgh, PA 15206	Federated Investors	09/28/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 1,000.00	
C. 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 > \$	
D. 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 > \$	
E. 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 > \$	
F. 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 > \$	
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 > \$	

SUBTOTAL of Receipts This Page (optional) 2,000.00

TOTAL This Period (last page this line number only) 22,250.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (in Full)
Fight PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Blue Cross/Blue Shield PAC 1310 G Street, N.W. 12th Floor Washington, DC 20005		08/10/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brown and Williamson Tobacco PAC 1500 Brown and Williamson Tower Louisville, KY 40402		09/10/98	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Maritime Officers PAC 490 L'Enfant Plaza East S Washington, DC 20024		09/28/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Career College Association PAC 750 First St., NE Washington, DC 20002		09/28/98	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PNCBANK PAC Two PNC Plaza Pittsburgh, PA 15222		09/30/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
F. 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 > \$	
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 > \$	

SUBTOTAL of Receipts This Page (optional) 6,500.00

TOTAL This Period (last page this line number only) 6,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 16

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)
Fight PAC

A. Full Name, Mailing Address and ZIP Code Campbell Victory Fund P.O. Box 480166 Denver, CO 80248	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period																												
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): 1998		08/10/98	1,000.00																												
Occupation		Aggregate Year-to-Date > \$ 1,000.00																													
<table border="1"> <thead> <tr> <th data-bbox="169 670 864 858">B. Full Name, Mailing Address and ZIP Code</th> <th data-bbox="864 670 1283 858">Name of Employer</th> <th data-bbox="1283 670 1483 858">Date (month, day, year)</th> <th data-bbox="1483 670 1759 858">Amount of Each Receipt this Period</th> </tr> </thead> <tbody> <tr> <td colspan="2" data-bbox="169 858 864 929">Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</td> <td data-bbox="1283 882 1483 929">Aggregate Year-to-Date > \$</td> <td data-bbox="1483 882 1759 929"></td> </tr> <tr> <td colspan="2" data-bbox="169 929 864 1117">C. Full Name, Mailing Address and ZIP Code</td> <td data-bbox="1283 929 1483 1117">Aggregate Year-to-Date > \$</td> <td data-bbox="1483 929 1759 1117"></td> </tr> <tr> <td colspan="2" data-bbox="169 1117 864 1305">D. Full Name, Mailing Address and ZIP Code</td> <td data-bbox="1283 1117 1483 1305">Aggregate Year-to-Date > \$</td> <td data-bbox="1483 1117 1759 1305"></td> </tr> <tr> <td colspan="2" data-bbox="169 1305 864 1493">E. Full Name, Mailing Address and ZIP Code</td> <td data-bbox="1283 1305 1483 1493">Aggregate Year-to-Date > \$</td> <td data-bbox="1483 1305 1759 1493"></td> </tr> <tr> <td colspan="2" data-bbox="169 1493 864 1681">F. Full Name, Mailing Address and ZIP Code</td> <td data-bbox="1283 1493 1483 1681">Aggregate Year-to-Date > \$</td> <td data-bbox="1483 1493 1759 1681"></td> </tr> <tr> <td colspan="2" data-bbox="169 1681 864 1869">G. Full Name, Mailing Address and ZIP Code</td> <td data-bbox="1283 1681 1483 1869">Aggregate Year-to-Date > \$</td> <td data-bbox="1483 1681 1759 1869"></td> </tr> </tbody> </table>				B. 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):		Aggregate Year-to-Date > \$		C. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$		D. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$		E. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$		F. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$		G. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$	
B. 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):		Aggregate Year-to-Date > \$																													
C. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$																													
D. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$																													
E. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$																													
F. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$																													
G. Full Name, Mailing Address and ZIP Code		Aggregate Year-to-Date > \$																													

SUBTOTAL of Receipts This Page (optional) 1,000.00

TOTAL This Period (last page this line number only) 1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE	OF
1	2
FOR LINE NUMBER	
21B	

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NAME OF COMMITTEE (In Full)
Fight PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Staples P.O. Box 30292 Salt Lake City, UT 84130	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/10/98	246.91
B. Full Name, Mailing Address and ZIP Code Mark Rodgers 7052 Ridgeford Drive Burke, VA 22015	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/14/98	156.25
C. Full Name, Mailing Address and ZIP Code Heather Pine 6011 Colby College Waterville, ME 04901	Temporary Staff Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	07/23/98	227.99
D. Full Name, Mailing Address and ZIP Code Linda Daniel 128 N. Columbus Alexandria, VA 11314	Fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/07/98	500.00
E. Full Name, Mailing Address and ZIP Code Nadine Maenza 1113 Whitner Road Reading, PA 19605	Fundraising Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/10/98	2,000.00
F. Full Name, Mailing Address and ZIP Code Amy Petraglia 8623 Lexington Place Wexford, PA 15090	Fundraising Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/10/98	1,000.00
G. Full Name, Mailing Address and ZIP Code Amy Petraglia 8623 Lexington Place Wexford, PA 15090	Fundraising Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/11/98	1,000.00
H. Full Name, Mailing Address and ZIP Code Craig Lauranson 2420 Wedgewood Drive Wexford, PA 15090	Temporary Staff Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/14/98	436.94
I. Full Name, Mailing Address and ZIP Code Linda Daniel 128 N. Columbus Alexandria, VA 11314	Fundraising Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/04/98	2,000.00

SUBTOTAL of Disbursements (This Page optional)

7,570.09

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)

Fight PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Amy Petraglia 8623 Lexington Place Waxford, PA 15090	Fundraising Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/08/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Mark Rodgers 7052 Ridgeford Drive Burke, VA 22015	Travel Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/13/98	503.97
C. Full Name, Mailing Address and ZIP Code Ben Franklin Press 6218 Rolling Road Springfield, VA 22152	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/14/98	346.42
D. Full Name, Mailing Address and ZIP Code La Brasserie 236 Mass Ave., N.W. Washington, DC 20002	Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/16/98	1,758.40
E. Full Name, Mailing Address and ZIP Code Huckaby and Associates 228 S. Washington Street Suite 200 Alexandria, VA 22314	Accounting/Compliance Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/24/98	663.75
F. Full Name, Mailing Address and ZIP Code Nadine Maenza 1113 Whitner Road Reading, PA 19605	Fundraising Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	09/24/98	1,000.00
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)

5,272.54

TOTAL This Period (last page this line number only)

12,842.63

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)
Fight PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Matt Fong For Congress 888 S. Figueroa Street Suite 1130 Los Angeles, CA 90017	Matt Fong, U.S. HOUSE 41st CA, Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	07/14/98	5,000.00
B. Full Name, Mailing Address and ZIP Code Sherwood For Congress 326 S. State Street Clarks Summit, PA 19411	Sherwood, U.S. HOUSE 10th PA, Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Primary Debt	07/21/98	5,000.00
C. Full Name, Mailing Address and ZIP Code Toomey For Congress 1005 Union Blvd. Allentown, PA 18103	Toomey, U.S. HOUSE 15th PA, Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 1998 Primary Debt	07/28/98	5,000.00
D. Full Name, Mailing Address and ZIP Code Gary Franks For Senate P.O. Box 2782 Waterbury, CT 06723	Gary Franks, U.S. SENATE CT, Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/16/98	5,000.00
E. Full Name, Mailing Address and ZIP Code Matt Fong For Congress 888 S. Figueroa Street Suite 1130 Los Angeles, CA 90017	Matt Fong, U.S. HOUSE 41st CA, Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/17/98	5,000.00
F. Full Name, Mailing Address and ZIP Code National Republican Senatorial 425 Second Street, N.E Washington, DC 20002	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/23/98	15,000.00
G. Full Name, Mailing Address and ZIP Code Turzila For Congress P.O. Box 1811 Cranberry, PA 15046	Turzila, U.S. HOUSE PA, Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/23/98	2,500.00
H. Full Name, Mailing Address and ZIP Code Hosemann For Congress P.O. Box 13632 Jackson, MS 39236	Hosemann, U.S. HOUSE 4th MS, Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	09/24/98	5,000.00
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)

47,500.00

TOTAL This Period (last page this line number only)

47,500.00

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)
Fight PAC

A. Full Name, Mailing Address and ZIP Code National Republican Senatorial 425 Second Street, N.E Washington, DC 20002	Purpose of Disbursement Non-Federal Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	Date (month, day, year) 09/23/98	Amount of Each Disbursement This Period 10,000.00
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)

10,000.00

TOTAL This Period (last page this line number only)

10,000.00

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"/> 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	
J. A. D.	2/2/99
PREPARER	DATE PREPARED