REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

C00356297 120793 P 266
MARK VALENTE III
FUND FOR AMERICAN OPPORTUNITY
1900 L ST NW #610
WASHINGTON DC 20036

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER

3. ☑ 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

☐ 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 1-1-99 through 6-30-99		
6.	(a) Cash on Hand January 1, 1999		$ 378.70
	(b) Cash on Hand at Beginning of Reporting Period	$ 378.70	
	(c) Total Receipts (from Line 19)	$ 23505.12	$ 23505.12
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 23883.82	$ 23883.82
7.	Total Disbursements (from Line 30)	$ 21213.07	$ 21213.07
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2670.75	$ 2670.75
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)	$ 9800.00	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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 VALENTE III

Signature of Treasurer: [signature]

Date: 7-28-99

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)

=EBAN064

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

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 1-1-99 TO: 6-30-99

	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)	23500	23500	11(a)(i)
ii. Unitemized			11(a)(ii)
iii. Total (add i and ii) ➤	23500	23500	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤			11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	5.12	5.12	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	23505.12	23505.12	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	23505.12	23505.12	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	213.07	213.07	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	213.07	213.07	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	21000.-	21000.-	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	21213.07	21213.07	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	21213.07	21213.07	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	23500	23500	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	23500	23500	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	213.07	213.07	35
36. Offsets to Operating Expenditures (from line 15)	5.12	5.12	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	207.96	207.96	37

FE8AN064

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

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)
Fund For American Opportunity

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. John R. Boyd 4433 Cranbrook Trail Orchard Lake, MI 48323 Receipt For: Primary General Other (specify):	Name of Employer: info requested Occupation: Aggregate Year-to-Date > $ 1,000.00	6-30-99	$1,000.00
B. A. Huda Farouki 9005 Old Dominion Road McLean, VA 22102 Receipt For: Primary General Other (specify):	Name of Employer: Financial Instrument & Investment Corp Occupation: CEO Aggregate Year-to-Date > $2,500.00	4-22-99	$2,500.00
C. James Bronce Henderson 6780 - 18 1/2 Mile Road Sterling Heights, MI 48314 Receipt For: Primary General Other (specify):	Name of Employer: info requested Occupation: Aggregate Year-to-Date > $5,000.00	6-30-99	$5,000.00
D. Ernest C. Fackler 800 S. Wells Apt 1208 Chicago, IL 60607 Receipt For: Primary General Other (specify):	Name of Employer: info requested Occupation: Aggregate Year-to-Date > $5,000.00	6-30-99	$5000.00
E. Kellie S. Ferrantino 48000 Ann Arbor Road Plymouth, MI 48170 Receipt For: Primary General Other (specify):	Name of Employer: homemaker Occupation: Aggregate Year-to-Date > $5,000.00	6-30-99	$5000.00
F. Michael J. Ferrantino 36255 Michigan Avenue Wayne, MI 48184 Receipt For: Primary General Other (specify):	Name of Employer: EQ-The Environmental Qualtiy Company Occupation: Executive Aggregate Year-to-Date > $ 5,000.00	6-30-99	$5000.00
G. Full Name, Mailing Address and ZIP Code Receipt For: Primary General Other (specify):	Name of Employer: Occupation: Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) > $23,500.00

TOTAL This Period (last page this line number only) > $23,500.00

FEBAN121

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 15

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 American Opportunity

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
National City Bank Card Services - Processing Service Dept., K-A-12-E4 Kalamazo, MI 49009	refund	3-30-99	$5.12
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 5.12		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts This Page (optional) 5.12

TOTAL This Period (last page this line number only) $5.12

FESAN12

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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 American Opportunity

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National City Bank 4653 E Main Street Columbus, OH 43251	master card Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1-24-99	125.07
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National City Bank P. O. Box 8043 Royal Oak, MI 48068	bank charge Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6-30-99	$88.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	213.07
TOTAL This Period (last page this line number only)	213.07

FE8AN064

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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 American Opportunity

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary, General, Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. John Ashcroft Ashcroft 2000 8229 Clayton Road, Ste 200 St. Louis, MO 63117	Senate - MO	6-30-99	$10,000.00
B. Bill Frist Frist 2000 4205 Hillsboro Road, Ste 306 Nashville, TN 37215	Senate - TN	6-30-99	$1,000.00
C. Rick Santorum Santorum 2000 436 South Main Street Pittsburgh, PA 15220	Senate - PA	6-30-99	$10,000.00
D.			
E.			
F.			
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional) $21,000.00

TOTAL This Period (last page this line number only) $21,000.00

FEBAN121

SCHEDULE C
(Revised 3/80)

LOANS

Page ___ of ___ for
LINE NUMBER ____
(Use separate schedules for each numbered line)

Name of Committee (in Full)
Fund For American Opportunity

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Claudia Barker Valente 7055 Leestone Street Springfield, VA 22151 Election: ☐ Primary ☐ General ☐ Other (specify):	$4,900.00	-0-	$4,900.00

Terms: Date Incurred 10-29-98 Date Due NONE Interest Rate 0 %(per) ☐ Secured

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Mark Valente III 7055 Leestone Street Springfield, VA 22151 Election: ☐ Primary ☐ General ☐ Other (specify):	$4,900.00	-0-	$4,900.00

Terms: Date Incurred 10-29-98 Date Due NONE Interest Rate 0 %(per) ☐ Secured

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: $

SUBTOTALS This Period This Page (optional)	$9,800.00
TOTALS This Period (last page in this line only)	$9,800.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

FEBANI'21

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 7-30-99
☐	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	
	PREPARER	DATE PREPARED 7-30-99

(4/98)