

RECEIVED  
FEDERAL ELECTION  
COMMISSION

October 14, 1998

OCT 16 10 26 AM '98

Ms. Kelly Huff  
Federal Election Commission  
999 E. Street, NW  
Washington, DC 20463

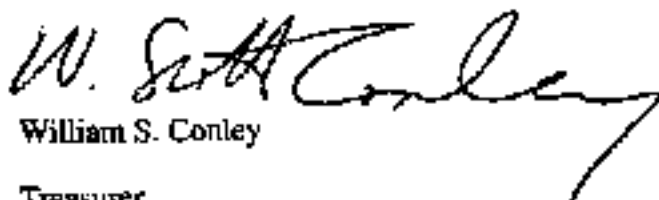
**RE: South Carolina Credit Union League  
Political Action Committee  
FEC 00059907**

Dear Ms. Huff:

Enclosed is FEC Form 3X, Page Two (detailed Summary Page), Schedule A (Itemized Receipts) and Schedule B (Itemized Disbursements) for the Period Covering July 1, 1998 through September 30, 1998.

If you have any question, or need additional information, please do not hesitate to contact me.

Sincerely,

  
William S. Conley  
Treasurer

cc: State Election Commission  
Mr. Thomas H. Carlee, Attorney  
CUNA Political Action Committee

Enclosures

October 14, 1998

Ms. Kelly Huff  
Federal Election Commission  
999 E. Street, NW  
Washington, DC 20463

**RE: South Carolina Credit Union League  
Political Action Committee  
FEC 00059907**

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Enclosed is FEC Form 3X, Page Two (detailed Summary Page), Schedule A (Itemized Receipts) and Schedule B (Itemized Disbursements) for the period covering July 1, 1998 through September 30, 1998.

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Sincerely,

William S. Conley

Treasurer

cc: State Election Commission

Mr. Thomas H. Curlee, Attorney

CUNA Political Action Committee

Enclosures

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED  
FEDERAL ELECTION  
COMMISSION

Oct 10 10 20 AM '98

1. NAME OF COMMITTEE (in full)  
South Carolina Credit Union League, Inc.  
Credit Union Defense Fund

ADDRESS (number and street)  Check if different than previously reported  
P.O. Box 1787

CITY, STATE and ZIP CODE  
Columbia, S.C. 29202

2. FEC IDENTIFICATION NUMBER  
C00059907

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	July 1, 1998 through Sept. 30, 1998		
6. (a)	Cash on Hand January 1, 1998		\$ 38,728.07
(b)	Cash on Hand at Beginning of Reporting Period	\$ 38,522.70	
(c)	Total Receipts (from Line 10)	\$ 17,513.60	\$ 48,677.23
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 56,036.30	\$ 87,405.30
7.	Total Disbursements (from Line 30)	\$ 191.96	\$ 31,560.96
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 55,844.34	\$ 55,844.34
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-6530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

W. Scott Conley

Signature of Treasurer

*W. Scott Conley*

Date

10/14/98

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 8/98)

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO:	
	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)	2,264.46	8,219.46	11(a)(i)
ii. Unitemized	14,931.54	39,624.33	11(a)(ii)
iii. Total (add i and ii) >	17,196.00	47,843.79	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a ii, b and c) >	17,196.00	47,843.79	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	17.60	833.44	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	17,513.60	48,677.23	19
20. Total Federal Receipts (subtract line 18 from line 19) >	17,513.60	48,677.23	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	0	0	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	30,900.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) >	0	0	28(d)
29. Other Disbursements	191.96	660.96	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	191.96	31,560.96	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	191.96	31,560.96	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	17,196.00	47,843.79	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	17,196.00	47,843.79	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) >	17,196.00	47,843.79	37

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NAME OF COMMITTEE (in Full)

South Carolina Credit Union League Inc, CU Defense Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Beam 3521 Bowdbrook Ln. Cola, SC 29206	Cola (SC) Teachers FCU		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Credit Unions	Aggregate Year-to-Date > \$ 375.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Costin P.O. Box 62229 Charleston SC 29419	CPM FCU	9/30/98	90.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Credit Unions	Aggregate Year-to-Date > \$ 300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Curlee Jr. P.O. Box 12383 Irmo, SC 29063	Louise, Curlee Barrett and Safran		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Curran 312 Brentland Ct Cola, SC 29212	Cuna Mutual Group	7/2/98	15.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Insurance	Aggregate Year-to-Date > \$ 530.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bob Dargan 210 Turkey Pt. Circle Cola, SC 29223	SC FCU	7/1/98 8/25/98	75.00 75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Credit Unions	Aggregate Year-to-Date > \$ 225.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Russell Easterling P.O. Box 6229 Charleston, SC 29419	CPM FCU	7/1/98 9/30/98	105.00 105.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Credit Unions	Aggregate Year-to-Date > \$ 350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Steve Fowler Sandhurst Rd Cola, SC 29210	SCCU	7/30 8/1 8/15 8/30	30.00 15.00 15.00 30.00 30.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Credit Unions	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	825.00
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

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NAME OF COMMITTEE (in Full)			
<b>South Carolina Credit Union League Inc, CU Defense Fund</b>			
<p>A. Full Name, Mailing Address and ZIP Code</p> <p>John Franklin 212 Oak St St. Matthews, SC 29135</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>SCCUL</p> <p>Occupation</p> <p>Credit Unions</p> <p>Aggregate Year-to-Date &gt; \$ 936.00</p>	<p>Date (month, day, year)</p> <p>7/30/15 8/30/15 9/30 -</p>	<p>Amount of Each Receipt this Period</p> <p>90.00 45.00 90.00 45.00 90</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Coleman Gary 707 W. Greer St Honea Path, SC 29654</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Retired</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$ 300.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Todd Harms 4707 Cobblestone Dr G-2 Myrtle Beach, SC 29577</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Carolina Trust FCU</p> <p>Occupation</p> <p>Credit Unions</p> <p>Aggregate Year-to-Date &gt; \$ 265.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Allen K. Justice 211 Lakewood Dr Greenwood, SC 29649</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Greenwood Municipal FCU</p> <p>Occupation</p> <p>Credit Unions</p> <p>Aggregate Year-to-Date &gt; \$ 390.00</p>	<p>Date (month, day, year)</p> <p>7/1 7/30</p>	<p>Amount of Each Receipt this Period</p> <p>40.00 50.00</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Lynda Krawcheck 249 Cork Rd Charleston, SC 29407</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Charleston Area FCU</p> <p>Occupation</p> <p>Credit Unions</p> <p>Aggregate Year-to-Date &gt; \$ 300.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Tim Lyda 106 Hillcrest Ave Clover, SC 29710</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Celriver FCU</p> <p>Occupation</p> <p>Credit Unions</p> <p>Aggregate Year-to-Date &gt; \$ 300.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>James McDaniel 131 Pinefeather Trail Myrtle Beach, SC 29579</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Carolina Trust FCU</p> <p>Occupation</p> <p>Credit Unions</p> <p>Aggregate Year-to-Date &gt; \$ 325.00</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>SUBTOTAL of Receipts This Page (optional) .....</p>			450.00
<p>TOTAL This Period (last page this line number only) .....</p>			

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NAME OF COMMITTEE (in Full)

South Carolina Credit Union League Inc, CU Defense Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Morganelli 1825 Taylor Rd G. Gilbert, SC 29054	CU MS, Inc		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager		
	Aggregate Year-to-Date > \$ 315.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gene Norris Rt. 1, Box 226 Mountville, SC 29370	Torco Emps CU		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions		
	Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jennifer Parker 6345 Briarwood Rd Cola, SC 29206	FOUNDERS FCU	7/29 8/25 9/28	18.00 18.00 18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions		
	Aggregate Year-to-Date > \$ 228.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Isacilleen Rankin 513 Lakewinds Blvd Inman, SC 29349	Haync FCU	8/1/98	75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:		
	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
C.F. Rushing 1006 Sherwood Cir. Lancaster, SC 29720	FOUNDERS FCU		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions		
	Aggregate Year-to-Date > \$ 300.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sarah Sherbert 117 Wilson Circle Simpsonville, SC 29681	N-P Emps CU	7/7/98 9/3/98	75.00 75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions		
	Aggregate Year-to-Date > \$ 225.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Templeton 4219 Rhoney Rd Hephzibah, Ga 30815	SRP FCU	8/5/98	265.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions		
	Aggregate Year-to-Date > \$ 465.00		

SUBTOTAL of Receipts This Page (optional)

544.00

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

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NAME OF COMMITTEE (in Full)

South Carolina CU League Inc, CU Defense Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Varn P.O. Box 2726 Hartsville, SC 29550	SPC Cooperatives CU	7/6/98	20.46
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions	Aggregate Year-to-Date: \$ 320.46	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Wilson <del>4805 Hwy 81</del> Anderson, SC 29622	Anderson FCU	8/11/98 9/3/98	10.00 10.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions	Aggregate Year-to-Date: \$ 345.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nick Wodogaza 2309 Quail Hollow Ln West Columbia, SC 29169	Cola (SC) Teachers FCU		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions	Aggregate Year-to-Date: \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William S. Conlay 9 Crane Branch Ct Cola, SC 29212	SCCUL	7/30 8/30 9/30	25.00 25.00 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions	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
Herbert W. Shuler 1705 Belmont Cola, SC 29206	SCCUL	7/30 8/30 9/30	25.00 25.00 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions	Aggregate Year-to-Date: \$ 225.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thomas J. Strange 6500 E. Shore Dr Cola, SC 29206	CUMS, Inc	7/30 8/30 9/30	25.00 25.00 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date: \$ 225.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Karen B. Deas 128 Normandy Rd Cola, SC 29210	Cums, Inc	7/30 8/30 9/30	25.00 25.00 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Credit Unions	Aggregate Year-to-Date: \$ 225.00	

SUBTOTAL of Receipts This Page (optional)	340.46
TOTAL This Period (last page this line number only)	



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NAME OF COMMITTEE (In Full)

South Carolina CU League Inc, CU Defense Fund

A. Full Name, Mailing Address and ZIP Code

Tammy Farmer  
505 Blyton Terrace  
Columbia, SC 29210

Receipt For:  Primary  General  Other (specify):

Name of Employer

CUMS, Inc

Occupation

Auditing

Aggregate Year-to-Date > \$286.00

Date (month, day, year)

7/30

8/30

9/30

Amount of Each Receipt this Period

35.00

35.00

35.00

B. Full Name, Mailing Address and ZIP Code

Receipt For:  Primary  General  Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > 3

Date (month, day, year)

Amount of Each Receipt this Period

C. Full Name, Mailing Address and ZIP Code

Receipt For:  Primary  General  Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > 6

Date (month, day, year)

Amount of Each Receipt this Period

D. Full Name, Mailing Address and ZIP Code

Receipt For:  Primary  General  Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > 8

Date (month, day, year)

Amount of Each Receipt this Period

E. Full Name, Mailing Address and ZIP Code

Receipt For:  Primary  General  Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > 11

Date (month, day, year)

Amount of Each Receipt this Period

F. Full Name, Mailing Address and ZIP Code

Receipt For:  Primary  General  Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > 3

Date (month, day, year)

Amount of Each Receipt this Period

G. Full Name, Mailing Address and ZIP Code

Receipt For:  Primary  General  Other (specify):

Name of Employer

Occupation

Aggregate Year-to-Date > 3

Date (month, day, year)

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

105.00

TOTAL This Period (last page this line number only)

2,264.46

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

South Carolina CU League Inc. CU Defense Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wolf Camera 100 Columbia Cir Cata, SC 29202	Film Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/7/98	31.96
B. Full Name, Mailing Address and ZIP Code Carswell, Cantey, Burch CPAs P.O. Box 862 Camden, SC 29020	Audit, Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/12/98	160.00
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) .....

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

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
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