

# REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

For Other Than An Authorized Committee  
(Summary Page)

APR 20 9 16 AM '98

1. NAME OF COMMITTEE (in full)  
FIRST UNION CORPORATION EMPLOYEES GOOD GOVERNMENT "F" FUND II

ADDRESS (number and street)  Check if different than previously reported  
ONE FIRST UNION CENTER  
ATTN: LYNN L LEANDER

CITY, STATE and ZIP CODE  
CHARLOTTE, NC 282880630

2. FEC IDENTIFICATION NUMBER  
C00300178

3.  This committee has qualified as a multicandidate committee. (see FEC FORM 116)

## 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 \_\_\_\_\_

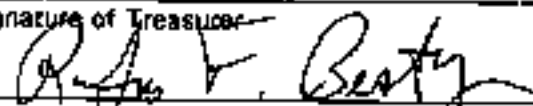
(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>03/01/98</u> through <u>03/31/98</u>		
6. (a) Cash on Hand January 1, 1998		\$ 8,036.89
(b) Cash on Hand at Beginning of Reporting Period	\$ 8,523.89	
(c) Total Receipts (from Line 19)	\$ 100,979.18	\$ 101,466.18
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 109,503.07	\$ 109,503.07
7. Total Disbursements (from Line 30)	\$ 61.25	\$ 61.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 109,441.82	\$ 109,441.82
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY 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 20463  
Toll Free 800-424-9630  
Local 202-218-3420

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  
RUFUS F. BEATY, TREASURER

Signature of Treasurer  


Date  
4-17-98

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 9/93)

FBA4101

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE FIRST UNION CORPORATION EMPLOYEES GOOD GOVERNMENT "F" FUND II	REPORT COVERING PERIOD FROM 03/01/98 TO 03/31/98	
	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) .....	90.00	90.00
ii. Unitemized .....	138.50	625.50
iii. Total .....	228.50	715.50
b. Political Party Committees .....	0.00	0.00
c. Other Political Committees (such as PACs) .....	0.00	0.00
d. Total Contributions .....	228.50	715.50
12. Transfers From Affiliated/Other Party Committees .....	100,750.68	100,750.68
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 & Other Political Committees .....	0.00	0.00
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 .....	100,979.18	101,466.18
20. Total Federal Receipts .....	100,979.18	101,466.18
<b>II. Disbursements</b>		
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 .....	61.25	61.25
c. Total Operating Expenditures .....	61.25	61.25
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(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. Individuals/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 .....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Total Disbursements .....	61.25	61.25
31. Total Federal Disbursements .....	61.25	61.25
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d) .....	228.50	715.50
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	228.50	715.50
35. Total Federal Operating Expenditures .....	61.25	61.25
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00
37. Net Operating Expenditures .....	61.25	61.25

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11A1

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)

FIRST UNION CORPORATION EMPLOYEES GOOD GOVERNMENT "F" FUND II

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVEN W KOHLHAGER 6415 GAYWIND DR. CHARLOTTE, NC 28226	FIRST UNION NATIONAL BANK	03/13/98 03/31/98	45.00 45.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CHRG MNGNG DIR HEAD OF DEPT	Aggregate Year-to-Date > \$ 270.00	
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:	Occupation	Aggregate Year-to-Date > \$	
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:	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:	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:	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:	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:	Occupation	Aggregate Year-to-Date > \$	
SUBTOTAL of Receipts This Page (optional) .....			90.00
TOTAL This Period (last page this line number only) .....			90.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 12

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)

FIRST UNION CORPORATION EMPLOYEES GUD GOVERNMENT "F" FUND II

<b>A. Full Name, Mailing Address and ZIP Code</b> WHEAT FIRST BUTCHER SINGER PAC P.O. BOX 1357 RICHMOND, VA 23211		<b>Name of Employer</b>  	<b>Date (month, day, year)</b> 03/25/98	<b>Amount of Each Receipt this Period</b> 100,750.68
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: TRANSFER FROM AFFILIATED PAC		<b>Occupation</b>  	<b>Aggregate Year-to-Date &gt; \$</b> 100,750.68	
<b>B. Full Name, Mailing Address and ZIP Code</b>  		<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Each Receipt this Period</b>  
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		<b>Occupation</b>  	<b>Aggregate Year-to-Date &gt; \$</b>	
<b>C. Full Name, Mailing Address and ZIP Code</b>  		<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Each Receipt this Period</b>  
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		<b>Occupation</b>  	<b>Aggregate Year-to-Date &gt; \$</b>	
<b>D. Full Name, Mailing Address and ZIP Code</b>  		<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Each Receipt this Period</b>  
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		<b>Occupation</b>  	<b>Aggregate Year-to-Date &gt; \$</b>	
<b>E. Full Name, Mailing Address and ZIP Code</b>  		<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Each Receipt this Period</b>  
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		<b>Occupation</b>  	<b>Aggregate Year-to-Date &gt; \$</b>	
<b>F. Full Name, Mailing Address and ZIP Code</b>  		<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Each Receipt this Period</b>  
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		<b>Occupation</b>  	<b>Aggregate Year-to-Date &gt; \$</b>	
<b>G. Full Name, Mailing Address and ZIP Code</b>  		<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Each Receipt this Period</b>  
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		<b>Occupation</b>  	<b>Aggregate Year-to-Date &gt; \$</b>	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....				100,750.68
<b>TOTAL This Period (last page this line number only)</b> .....				100,750.68

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21B

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)

FIRST UNION CORPORATION EMPLOYEES GOOD GOVERNMENT "E" FUND II

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FIRST UNION NATIONAL BANK ONE FIRST UNION CENTER CHARLOTTE, NC 28288	CHECK PRINTING CHARGES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/12/98	45.25
FIRST UNION NATIONAL BANK ONE FIRST UNION CENTER CHARLOTTE, NC 28288	CHECK PRINTING CHARGES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/19/98	16.00
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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional) .....			61.25
TOTAL This Period (last page this line number only) .....			61.25

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 4/20/98
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<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	
  D.A.W.	  4/20/98
PREPARER	DATE PREPARED