# 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)
Physical Therapy Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
1111 North Fairfax Street

CITY, STATE and ZIP CODE
Alexandria, VA 22314

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUN 26 12 01 PM '98

2. FEC IDENTIFICATION NUMBER
C00012880

3. [X] 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 | [X] 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 [X] NO

| SUMMARY | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|
| 5. Covering Period May 1, 1998 through May 31, 1998 | | |
| 6. (a) Cash on Hand January 1, 19 98 | | $ 289,873.88 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 212,135.72 | |
| (c) Total Receipts (from Line 19) | $ 44,890.04 | $ 102,114.69 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 257,025.76 | $ 391,988.57 |
| 7. Total Disbursements (from Line 30) | $ 43,638.22 | $ 178,601.03 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 213,387.54 | $ 213,387.54 |
| 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) | $ -0- | |

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

*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
Nancy J Garland

Signature of Treasurer
Nancy J Garland

Date
6/20/98

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)

FE6AN136

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

(revised 1/1/91)

NAME OF COMMITTEE Physical Therapy Political Action Committee

REPORT COVERING PERIOD FROM 5/1/98 TO: 5/31/98

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year | |
|---|---|---|---|
| 11. Contributions (other than loans) From: | | | |
| a. Individual/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | $3,570.00 | $12,170.00 | 11(a)(i) |
| ii. Unitemized | $40,650.66 | $86,398.68 | 11(a)(ii) |
| iii. Total (add i and ii) ➤ | $44,220.66 | $98,568.68 | 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) ➤ | $44,220.66 | $98,568.68 | 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.) | | | 15 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | $669.38 | $3,546.01 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | | | 18 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤ | $44,890.04 | $102,114.69 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) ➤ | $44,890.04 | $102,114.69 | 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 | | $61,283.82 | 21(b) |
| c. Total Operating Expenditures (add a i, a ii, and b) ➤ | | $61,283.82 | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | | | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | $43,638.22 | $116,067.21 | 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 | | $1,250.00 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | $43,638.22 | $178,601.03 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤ | $43,638.22 | $178,601.03 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans)(from line 11d) | $44,220.66 | $98,568.68 | 32 |
| 33. Total Contribution Refunds (from line 28d) | | | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | $44,220.66 | $98,568.68 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤ | | $61,283.82 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | | | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) ➤ | | $61,283.82 | 37 |

FE6AN108

**SCHEDULE A** **ITEMIZED RECEIPTS**

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



FOR LINE NUMBER 11(a)

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)**

Physical Therapy Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| David Apts<br>140 Cheshire Lane<br>Ashland, KY 41102<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Occupation: Physical Therapist<br>Aggregate Year-to-Date > $ 200.00 | 5/4/98 | $200.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Samuel Brown<br>311 Oak Tree Lane<br>Monticello, KY 42633<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Occupation: Physical Therapist<br>Aggregate Year-to-Date > $ 500.00 | 5/5/98 | $500.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Mark DeCarlo<br>11040 Brentwood Avenue<br>Zionsville, IN 46077<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Occupation: Physical Therapist<br>Aggregate Year-to-Date > $ 200.00 | 5/11/98 | $100.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Patricia Domser<br>731 Baltimore Blvd<br>Westminister, MD 21157<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Westmininster Physical Therapy<br>Occupation: Physical Therapist<br>Aggregate Year-to-Date > $ 1,000.00 | 5/22/98 | $1,000.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Jay Goodfarb<br>110 East San Miguel<br>Phoenix, AZ 85012<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Occupation: Physical Therapist<br>Aggregate Year-to-Date > $ 500.00 | 5/18/98 | $500.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Irvin Miller<br>12205 F Little Patuxent Parkway<br>Columbia, MD 21044<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Occupation: Physical Therapist<br>Aggregate Year-to-Date > $ 200.00 | 5/4/98 | $200.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| John Nixon<br>P.O. Box 782<br>Castroville, TX 78009<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Occupation: Physical Therapist<br>Aggregate Year-to-Date > $ 200.00 | 5/5/98<br>5/11/98 | $100.00<br>$100.00 |

**SUBTOTAL** of Receipts This Page (optional) .....

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

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SCHEDULE A

# ITEMIZED RECEIPTS

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



FOR LINE NUMBER 11(a)

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)
Physical Therapy Political Action Committee

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Mary Ann Uznis<br>18101 East Warren Avenue<br>Detroit, MI 48224<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Physical Therapist<br>Aggregate Year-to-Date $ 200.00 | 5/5/98 | $200.00 |
| B. Michael Verdon<br>36 Glen Eagles Road<br>Washington, Township, NJ 07882<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Physical Therapist<br>Aggregate Year-to-Date $ 200.00 | 5/15/98 | $100.00 |
| C. John Willmore<br>1112 Arizona Avenue<br>Trinidad, CO 81802<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Physical Therapist<br>Aggregate Year-to-Date $ 370.00 | 5/5/98 | $370.00 |
| D. Jeanette Winfree<br>1810 Tremont<br>Galveston, TX 77550<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Self<br>Physical Therapist<br>Aggregate Year-to-Date $ 200.00 | 5/5/98 | $200.00 |
| E. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation Physical Therapist<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |
| F. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation Physical Therapist<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |
| G. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer<br>Occupation Physical Therapist<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) ..... $3,570.00

FE6AN136

**SCHEDULE A** **ITEMIZED RECEIPTS**

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



FOR LINE NUMBER 17

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**NAME OF COMMITTEE (In Full)**

Physical Therapy Political Action Committee

| Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Crestar Investment Bank<br>P.O. Box 498<br>Richmond, VA<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Interest Accrued from Account<br>Aggregate Year-to-Date $ 3,546.01 | 5/31/98 | $669.38 |
| B. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer / Occupation<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |
| C. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer / Occupation<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |
| D. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer / Occupation<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |
| E. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer / Occupation<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |
| F. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer / Occupation<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |
| G. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer / Occupation<br>Aggregate Year-to-Date $ | Date (month, day, year) | Amount of Each Receipt this Period |

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) ..... $669.38

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**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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



FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

| A. 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 |
|---|---|---|---|
| LaBrasserie<br>239 Massachussets Avenue, NE<br>Washington, DC 20002 | In-Kind Judd Cregg | 5/5/98 | $247.50 |
| B. 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 |
| Democratic National Committee<br>430 South Capitol Street<br>Washington, DC 20003 | Annual Contribution $10,000.00 | 5/11/98 | $5,000.00 |
| 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 |
| Stenholm for Congress<br>3610 38th Street, NW #F270<br>Washington, DC 20016 | Charlie Stenholm (H-TX-17 | 5/11/98 | $500.00 |
| 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 |
| Committee to Re-Elect Ed Towns<br>P.O. Box 2884<br>Washington, DC 20013 | Ed Towns (H-NY-10) | 5/11/98 | $500.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement / Disbursement for: Primary XX General Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| Citizens for Arlen Specter<br>300 I Street, NE<br>Washington, DC 20002 | Arlen Specter (S-PA) | 5/11/98<br>5/11/98 | $500.00<br>$1,000.00 |
| 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 |
| Judd Gregg Campaign Committee<br>P.O. Box 1812<br>Concord, NH 03302 | Judd Gregg (S-NH) | 5/11/98 | $1,000.00 |
| 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 |
| Lowey for Congress<br>P.O. Box 271<br>White Plains, NY 10625 | Nita Lowey (H-NY-18) | 5/11/98 | $500.00 |
| 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 |
| Stupak for Congress<br>P.O. Box 143<br>Menominee, MI 49858 | Bart Stupak (H-MI-1) | 5/11/98 | $500.00 |
| 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 |
| Ken Stribling for Congress<br>P.O. Box 24133<br>Jackson, MS 39225 | Ken Stribling (H-MS-4) | 5/11/98 | $500.00 |

**SUBTOTAL** of Disbursements This Page (optional) .....

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

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**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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



FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

| Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| A. Building Our Bases PAC<br>P.O. Box 15377<br>New Orleans, LA 70175 | Bob Livingston's PAC<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $1,000.00 |
| B. Ed Bryant for Congress<br>P.O. Box 1961<br>Cordova, TN 38088 | Ed Bryant (H-TN-7)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |
| C. John Ensign for U.S. Senate<br>P.O. Box 98407<br>Las Vegas NV 89193 | John Ensign (S-NV)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $1,000.00 |
| D. Pallone for Congress<br>P.O. Box 3176<br>Long Branch, NJ 07740 | Frank Pallone (H-NJ-6)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $1,000.00 |
| E. Kay Granger Campaign Fund<br>910 Houston Street, Suite 105C<br>Fort Worth, TX 76102 | Kay Granger (H-TX-12)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |
| F. Cubin for Congress<br>P.O. Box 4657<br>Casper, WY 82604 | Barbara Cubin (R-WY-AL)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |
| G. New Republican Majority Fund<br>900 Second Street, NE, Suite 114<br>Washington, DC 20002 | Trent Lott's PAC<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $5,000.00 |
| H. People for English<br>26 West 8th Street<br>Erie, PA 16501 | Phil English (H-PA-21)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |
| I. Afflerbach for Congress<br>442 New Jersey Avenue, SE<br>Washington, DC 20003 | Roy Afflerbach (H-PA-15)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |

SUBTOTAL of Disbursements This Page (optional) .....

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

FE5AN135

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**

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



FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
Physical Therapy Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| Pelosi for Congress<br>44 Canal Center Plaza, SUite 400<br>Alexandria, VA 22314 | Nancy Pelosi (H-CA-8)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Talent for Congress<br>P.O. Box 2776<br>Arlington, VA 22202 | Jim Talent (H-MO-2)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $1,000.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Thurman for Congress<br>3610 38th Street, NW F270<br>Washington, DC 20016 | Karen Thurman (H-FL-5)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Hall for Congress<br>P.O. Box 711<br>Rockwall, TX 75087 | Ralph Hall (H-TX-4)<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $500.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Sam and Harry's<br>1200 19th Street, NW<br>Washington, DC | In-Kind Sherrod Brown (H-OH-13)<br>Disbursement for: Primary General Other (specify) | 5/17/98 | $1,390.72 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| National Republican Congressional Committee<br>310 First Street, SE<br>Washington, DC 20003 | Annual Contribution<br>Disbursement for: Primary General Other (specify) | 5/11/98 | $7,500.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| National Republican Senatorial Committee<br>425 Second Street, NE<br>Washington, DC 2002 | Annual Contribution<br>Disbursement for: Primary General Other (specify) | 5/21/98 | $5,000.00 |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Democratic Senatorial Congressional Committee<br>430 South Capitol Street<br>Washington, DC 20003 | Annual Contribution<br>Disbursement for: Primary General Other (specify) | 5/22/98 | $5,000.00 |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Friends of Blanche Lincoln<br>P.O. Box 3197<br>Little Rock, AR 72203 | Blanche Lincoln (S-AR)<br>Disbursement for: Primary General Other (specify) | 5/29/98 | $1,000.00 |

| | |
|---|---|
| **SUBTOTAL** of Disbursements This Page (optional) | |
| **TOTAL** This Period (last page this line number only) | $43,638.22 |

FERAN135

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 |
| ☐ | First Class Mail | POSTMARKED |
| ☑ | Registered/Certified Mail | POSTMARKED 6-23-98 |
| ☐ | 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 | |

dmu
PREPARER

6-26-98
DATE PREPARED

(4/98)