REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ...

Oct 16 12 57 PM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
NORTH CAROLINA PORK COUNCIL POLITICAL ACTION COMMITTEE

ADDRESS (number and street) [ ] Check if different than previously reported

2300 REXWOODS DRIVE, SUITE 340

CITY, STATE and ZIP CODE

RALEIGH NC 27607

2. FEC IDENTIFICATION NUMBER
C00235184

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

[X] 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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 7/01/98 through 9/30/98		
6. (a) Cash on Hand January 1 19		$ 71476.76
(b) Cash on Hand at Beginning of Reporting Period	$ 60909.24	
(c) Total Receipts (from line 19)	$ 3688.53	$ 17359.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 64597.77	$ 88836.36
7. Total Disbursements (from Line 30)	$ 542.77	$ 24781.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(c))	$ 64055.00	$ 64055.00
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-.	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

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

Type or Print Name of Treasurer
JACKIE G WHITLEY

Signature of Treasurer
Jackie G Whitley

Date
10/9/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing the Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3
(revised 9/93)

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

(revised 1/1/91)

NAME OF COMMITTEE: NORTH CAROLINA PORK COUNCIL POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD FROM: 7/01/98 TO: 9/30/98

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	2640.00	14520.00
ii. Uniteminized	-0-.	600.00
iii. Total (add i and ii)	2640.00	15120.00
b. Political Party Committees	-0-.	-0-.
c. Other Political Committees (such as PACs)	-0-.	-0-.
d. Total Contributions (add a iii, b and c)	2640.00	15120.00
12. Transfers From Affiliated/Other Party Committees	-0-.	-0-.
13. All Loans Received	-0-.	-0-.
14. Loan Repayments Received	-0-.	-0-.
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-.	-0-.
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	500.00	500.00
17. Other Federal Receipts (Dividends, Interest, etc.)	548.53	1739.60
18. Transfers from Nonfederal Account for Joint Activity	-0-.	-0-.
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	3688.53	17359.60
20. Total Federal Receipts (subtract line 18 from line 19)	3688.53	17359.60
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	-0-.	-0-.
ii. Non-Federal Share	-0-.	-0-.
b. Other Federal Operating Expenditures	42.77	4356.36
c. Total Operating Expenditures (Add a i, a ii, and b)	42.77	4356.36
22. Transfers to Affiliated/Other Party Committees	-0-.	3275.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	-0-.	500.00
24. Independent Expenditures (use Schedule E)	-0-.	-0-.
25. Coordinated Expenditures Made by Party Committees (2 U.S.C 441a(d)) (use Schedule F)	-0-.	-0-.
26. Loan Repayments Made	-0-.	-0-.
27. Loans Made	-0-.	-0-.
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	-0-.	-0-.
b. Political Party Committees	-0-.	-0-.
c. Other Political Committees (such as PACs)	-0-.	-0-.
d. Total Contribution Refunds (Add a, b and c)	-0-.	-0-.
29. Other Disbursements	500.00	16650.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	542.77	24781.36
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	542.77	24781.36
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	2640.00	15120.00
33. Total Contribution Refunds (from line 28d)	-0-.	-0-.
34. Net Contributions (other than loans)(subtract line 33 from 32)	2640.00	15120.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	42.77	4356.36
36. Offsets to Operating Expenditures (from line 15)	-0-.	-0-.
37. Net Operating Expenditures (subtract line 36 from 35)	42.77	4356.36

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 purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
NORTH CAROLINA PORK COUNCIL POLITICAL ACTION COMMITTEE

FEC ID No. C00235184

	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code DAVID W HENDERSON 309 CASTLE HAYNE DRIVE APEX NC 27502	Name of Employer: PHARMACIA & UPJOHN	7/31/98	1120.00
Receipt for: [ ] Primary [ ] General [X] Other (specify) N/A	Occupation: SALES PERSON		PC GOLF 10/2
	Aggregate Year-To-Date >> $	1120.00	
B. Full Name, Mailing Address and ZIP Code TJ HADDOCK 2417 RAMS HORN ROAD GREENVILLE NC 27834	Name of Employer: HOECHST-ROUSSEL VET.	9/24/98	400.00
Receipt for: [ ] Primary [ ] General [X] Other (specify) N/A	Occupation: SALES PERSON		PC GOLF 10/2
	Aggregate Year-To-Date >> $	400.00	
C. Full Name, Mailing Address and ZIP Code DR. EDGAR G TUDOR 34500 LEE'S MILL ROAD FRANKLIN VA 23851	Name of Employer: ROCHE VITAMINS INC	8/14/98	560.00
Receipt for: [ ] Primary [ ] General [X] Other (specify) N/A	Occupation: VETERINARIAN		PC GOLF 10/2
	Aggregate Year-To-Date >> $	560.00	
D. Full Name, Mailing Address and ZIP Code RICHARD WALDREP BOEHRINGER INGELHEIM 107 MONTGOMERY CIRCLE MCRAE GA 31055	Name of Employer: BOEHRINGER INGELHEIM	9/11/98	560.00
Receipt for: [ ] Primary [ ] General [X] Other (specify) N/A	Occupation: SALES MANAGER		PC GOLF 10/2
	Aggregate Year-To-Date >> $	560.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify):	Occupation		
	Aggregate Year-To-Date >> $		

SUBTOTAL of Receipts This Page (optional)	2640.00
TOTAL This Period (last page this line number only)	2640.00

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 16

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NAME OF COMMITTEE (In Full)
NORTH CAROLINA PORK COUNCIL POLITICAL ACTION COMMITTEE

FEC ID No. C00235184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
COM.TO ELECT JOHNNY MANNING 623 SACK SWAMP ROAD RICHLANDS NC 28574	MURPHY FAMILY FARMS	9/14/98	500.00
Receipt for: [X] Primary [ ] General [ ] Other (specify) 9/15/98	Occupation: HOG FARM CONTRACTOR Aggregate Year-To-Date >$ 500.00		REFUND OF CONTRIBUTION

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt for: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt for: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt for: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt for: [ ] Primary [ ] General [ ] Other (specify):	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
	Occupation		
Receipt for: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-To-Date >$		

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	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 17

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NAME OF COMMITTEE (In Full)
NORTH CAROLINA PORK COUNCIL POLITICAL ACTION COMMITTEE

FEC ID No. C00235184

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BRANCH BANK & TRUST CO MAIN, 200 EAST CHATHAM STREET CARY NC 27511-0670	(INTEREST RECEIVED IN CHECKING ACCOUNT)	9/30/98	$48.53
Receipt for: [ ] Primary [ ] General [X] Other (specify) N/A	Occupation: N/A	Aggregate Year-To-Date > $ 1739.60	

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: [ ] Primary [ ] General [ ] Other (specify):	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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] 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: [ ] Primary [ ] General [ ] Other (specify):	Occupation	Aggregate Year-To-Date > $	

SUBTOTAL of Receipts This Page (optional)	548.53
TOTAL This Period (last page this line number only)	548.53

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21B

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NAME OF COMMITTEE (In Full)
NORTH CAROLINA PORK COUNCIL POLITICAL ACTION COMMITTEE

FEC ID No. C00235184

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code BRANCH BANK & TRUST CO MAIN, 200 EAST CHATHAM ST CARY NC 27511-0673	BANK ANALYSIS FEES Disbursement for: [ ] Primary [ ] General [X] Other (specify) N/A	9/30/98	42.77
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
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)	42.77
TOTAL This Period (last page this line number only)	42.77

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 29

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
NORTH CAROLINA PORK COUNCIL POLITICAL ACTION COMMITTEE

FEC ID No. C00235184

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code COM.TO ELECT JOHNNY MANNING 623 BACK SWAMP RD RICHLANDS NC 28660	NC HSE REP-R-10 DIST Disbursement for: [X] Primary [ ] General [ ] Other (specify) 5/5/98	7/14/98 REFUND ON	500.00 LINE 16 SCH A
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
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)	500.00
TOTAL This Period (last page this line number only)	500.00

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.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☒	Registered/Certified Mail	POSTMARKED 10-13-98
☐	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	

KRT
PREPARER

10-16-98
DATE PREPARED

(4/98)