REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

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FEDERAL ELECTION
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USE FEC MAILING LABEL OR TYPE OR PRINT

C00291799 030498 N 236
LIZ FIDORUK
MCAAPAC
1910 SOUTH HIGHLAND AVENUE STE
LOMBARD IL 60148

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 1-1-98 through 3-31-98		
6. (a) Cash on Hand January 1, 19 98		$ 3773.97
(b) Cash on Hand at Beginning of Reporting Period	$ 3773.97	
(c) Total Receipts (from Line 19)	$ 13660.00	$ 13660.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 17433.97	$ 17433.97
7. Total Disbursements (from Line 30)	$ 3188.40	$ 3188.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 14245.57	$ 14245.57
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ —	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ —	

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: Liz Fidoruk

Signature of Treasurer: Liz Fidoruk

Date: 4-15-98

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)

FE7A6047

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

(revised 1/1/91)

NAME OF COMMITTEE: MCAA PAC

REPORT COVERING PERIOD FROM 1-1-98 TO: 3-31-98

	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)	7950.00	7950.00	11(a)(i)
ii. Unitemized	5710.00	5710.00	11(a)(ii)
iii. Total (add i and ii) ➤	13660.00	13660.00	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) ➤	13660.00	13660.00	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.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	13660.00	13660.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	13660.00	13660.00	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	2688.40	2688.40	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	2688.40	2688.40	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	500.00	500.00	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) ➤	3188.40	3188.40	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	3188.40	3188.40	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	13660.00	13660.00	32
33. Total Contribution Refunds (from line 28d)	—	—	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	13660.00	13660.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	2688.40	2688.40	35
36. Offsets to Operating Expenditures (from line 15)	—	—	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	2688.40	2688.40	37

FE7AN047

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 9

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)

MAA PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Frank Campitelli 12224 Mt Albert Road Ellicott City MD 21042 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Baltimore Masonry Eldersburg, MD 21784 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 500.00	1-1-98	$500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
George Strunge 6729 Dogwood Rd. Baltimore MD 21207 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Banner Masonry Corp Baltimore, MD 21207 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 500.00	1-5-98	$500
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Paul Clements II 4310 Alton Rd. Louisville KY 40207 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Paul Clements Masonry Louisville, Ky 40219 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 700.00	1-1-98	$700
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mario Antonini 11374 Tuxford St Sun Valley CA 91352 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	GBC Concrete & Masonry Perris, CA 92571 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 500.00	1-15-98	$500
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Spencer Jr. 19217 Brook Hollow Dr Glencoe MO 63038 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Spencer Brickwork Inc St Louis MO 63021 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 750.00	2-7-98	$750
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Smith SR 9200 Green PK Rd St Louis MO 63123-7212 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	John J Smith Masonry St. Louis MO 63121 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 750.00	2-4-98	$750
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Smith JR 4434 Western Pacific Arnold, MO 63010-4320 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Smith Masonry Inc St Louis MO 63123 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 500.00	2-4-98	$500

SUBTOTAL of Receipts This Page (optional) 4200

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

PAGE 1 OF 1

FOR LINE NUMBER 21(b)

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NAME OF COMMITTEE (In Full): MCAAMC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FULL PT VIDEO & FILM PRODUCT 120 Webster Street #217 Louisville, KY 40206	PRODUCE VIDEO PROMOTING LEGISLATIVE PROGRAM Disbursement for: [ ] Primary [X] General [ ] Other (specify)	1-8-98	$1702.15
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
GEO C RICHARDS & CO INC 124 West Main Street Louisville KY 40202	AWARD PINS FOR CONTRIBUTORS TO MCAAMC $250 AND UP GETS A PIN Disbursement for: [ ] Primary [X] General [ ] Other (specify)	1-8-98	911.25
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
OAKBROOK BANK PO BOX 5765 OAK BROOK IL 60522	$75 BANK SERVICE CHARGE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	1-30, 2-28, 3-31	$25/$25/$25 JAN/FEB/MAR
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 2688.40

TOTAL This Period (last page this line number only) 2688.40

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 21

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NAME OF COMMITTEE (In Full): MCAAPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Robert Schuerman 3603 MIRAMONTE DR LIMA OH 45806 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Peterson Construction Co Wapakoneta, OH 45895-2098 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 1000.00		1000
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Terrence Mulligan 1360 W Downer Pl Aurora IL 60506 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Mulligan Masonry Co Inc Aurora, IL 60506 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 1250.00	2-10-98	1250
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Don Larsen 801 W. Thorndale Ave Itasca IL 60143 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Thorlief Larsen & Son Itasca, IL 60143 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 1000.00	2-12-98	1000
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	Date (month, day, year)	Amount of Each Receipt this Period
Shirley J. Bentinger 2625 Tilton Ln Brookfield WI 53045 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Bill Bentinger Inc Waukesha WI 53186 Occupation: MASON CONTRACTOR Aggregate Year-to-Date > $ 500.00	2-20-98	500
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation / Aggregate Year-to-Date	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 / Aggregate Year-to-Date	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 / Aggregate Year-to-Date	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) > 3750

TOTAL This Period (last page this line number only) > 7950

FE7A/047

SCHEDULE B | **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

MCAPAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Myrick 1901 Roxborough Rd #211 Charlotte, NC 28211	9th Congressional Dist North Carolina Disbursement for: [ ] Primary [X] General [ ] Other (specify)	2-21-98	$500
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

FE7AN047

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 4-15-98
☐	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	

[illegible] — PREPARER

4-21-98 — DATE PREPARED

(4/98)