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)
American AIDS Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
1808 Swann Street, N.W.

CITY, STATE and ZIP CODE
Washington, D.C. 20009

RECEIVED
FEDERAL ELECTION
COMMISSION FAX ROOM
JAN 29 5 10 PM '99

2. FEC IDENTIFICATION NUMBER
C00283101

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 11/3/98 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 11/24/98 through 12/31/98		
6. (a) Cash on Hand January 1, 19 98		$ 16,958.83
(b) Cash on Hand at Beginning of Reporting Period	$ 2,754.76	
(c) Total Receipts (from Line 19)	$ 27,760.00	$ 137,952.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 30,514.76	$ 154,911.04
7. Total Disbursements (from Line 30)	$ 18,969.04	$ 143,365.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 11,545.72	$ 11,545.72
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)	$ 33,231.34	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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
Thomas F. Sheridan

Signature of Treasurer

Date 1/29/99

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)

FE6AN121

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

(revised 1/1/91)

NAME OF COMMITTEE: American AIDS Political Action Committee

REPORT COVERING PERIOD FROM 11/24/98 TO: 12/31/98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees	$ 600.00	$ 4,000.00	
i. Itemized (use Schedule A)			11(a)(i)
ii. Unitemized	27,160.00	125,952.21	11(a)(ii)
iii. Total (add i and ii) ➤	27,760.00	129,952.21	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)		8,000.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	27,760.00	137,952.21	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) ➤	27,760.00	137,952.21	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	27,760.00	137,952.21	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	18,469.04	83,495.94	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	18,469.04	83,495.94	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	500.00	59,869.38	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) ➤	18,969.04	143,365.32	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	18,969.04	143,365.32	31
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	27,760.00	134,552.21	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	27,760.00	134,552.21	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	18,469.04	83,495.94	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	18,469.04	83,495.94	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 11(a)i

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)
American AIDS 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. Eileen Daar 200 E 84th Street, #104 New York, NY 10028 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 300.00	12/01/98	$200.00
B. James Dennis 245 East 19th Street, #7L New York, NY 10003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 300.00	12/16/98	$200.00
C. Ms. Mardythe Dipirro P.O. Box 188 West Hampton, NY 11978 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: Dominican Sisters Health Service Occupation: Coordinator/Education Aggregate Year-to-Date $ 200.00	12/16/98	$50.00
D. George Smalley 1801 W. Pershing Street, #520 Appleton, WI 54914 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 200.00	12/1/98	$50.00
E. Joel Williams 220 Shorey Road Silver Spring, MD 20901 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 200.00	12/9/98	$100.00
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $		

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

TOTAL This Period (last page this line number only) $600.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 21B

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NAME OF COMMITTEE (in Full)
American AIDS Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frontier Confertech 12110 N. Pecos Street Westminster, CO 80234-2076	Conference Call Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	12/1/98	$39.44
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Graphiprint 513 Maple Avenue, West Vienna, VA 22180	Stationery Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	12/1/98	$572.38
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Federal Express P.O. Box 1140 Memphis, TN 38101-1140	Postage Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	12/1/98	$88.25
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
United Parcel Service P.O. Box 4980 Hagerstown, MD 21747-4980	Postage Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	12/1/98	$16.25
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bell Atlantic DC P.O. Box 1915 Beltsville, MD 20704	Telephone Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	12/1/98	$47.98
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sprint P.O. Box 530503 Atlanta, GA 30353-0503	Telephone Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	12/1/98	$24.78
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dynamex 1763 Columbia Road Washington, D.C. 20009	Delivery/Messenger Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	12/10/98	$25.15
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
GSI 550 N. Continental Blvd. El Segundo, CA 90245	Telemarketing Fees Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	11/30/98 12/30/98	$13,328.63 4,179.10
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
City National Bank 2029 Century Park East B-Level Los Angeles, CA 90067	Bank Fees Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	11/30/98 12/30/98	$35.00 $55.00

SUBTOTAL of Disbursements This Page (optional) $18,412.06

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 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)
American AIDS 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
Franklin Natl. Bank 1730 Rhode Islant Avenue N.W. Washington, D.C. 20036	Bank Fees	12/31/98	$7.34
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
National Data Payment System 7240 Parkway Drive Hanover, MD 21706	Credit Card Proc.	12/3/98	$49.64
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) $56.98

TOTAL This Period (last page this line number only) $18,469.04

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)
American AIDS Political Action Committee

A. Full Name, Mailing Address and ZIP Code Citizens for Sarbanes Tower 1 Suite 1010 100 South Charles Street Baltimore, MD 21201	Purpose of Disbursement Contribution Disbursement for: ☐ Primary ☐ General ☒ Other (specify) Debt Retirement	Date (month, day, year) 12/10/98	Amount of Each Disbursement This Period $500.00
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)	
TOTAL This Period (last page this line number only)	$500.00

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

Name of Committee (In Full) American AIDS Political Action Comm.	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The Sheridan Group 1808 Swann Street, N.W. Washington, D.C. 20009	$33,231.34	-0-	-0-	$33,231.34
Nature of Debt (Purpose): PAC Management Fees				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Gordon & Schwenkmeyer, Inc. 550 N. Continental Blvd. S-180 El Segundo, CA 90245	$13,328.63	$4,179.10	$17,507.73	-0-
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	$33,231.34
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

FEBAN121

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 1-30-99
☐	First Class Mail	POSTMARKED
☐	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	

JMW
PREPARER

1-30-99
DATE PREPARED

(4/98)