# COLUMBIA GOOD GOVERNMENT FUND
## REPORT FILING INSTRUCTIONS

FEDERAL ELECTION COMMISSION
Dec 4 11 42 AM '98

November 23, 1998

TO: Ms. Debi Tucker
HCA Political Action Committee
P.O. Box 550
Nashville, TN 37202

FROM: Kraft Bros., Estmen, Patton & Harrell
Mike Ingram or Jeana Sorrells or Terry Anderson
615-242-7351

REPORT: Amended FEC Pre Election Report

PERIOD: 10/01/98 to 10/14/98

DUE DATE: 10/14/98

INSTRUCTIONS:

1.) Keep copy of report attached to this instruction sheet for your records.

2.) Form should be signed by Treasurer, Mr. Anderson, and mailed by certified mail or guaranteed service (UPS, Federal Express, etc.) to the following addresses:

Public Records Office
Federal Election Commission
999 E. Street, N.W.
Washington, DC 20463

Theodore Lee
Executive Secretary
State Ethics Commission
2052 East Exchange Place, Suite 235
Tucker, Georgia 30084

Peggy Nance Williams
Executive Director
Registry of Election Finance
404 James Robertson Parkway, Suite 1614
Nashville, Tennessee 37243

George Russell
Executive Director
Kentucky Registry of Election Finance
140 Walnut Street
Frankfort, KY 40601-3240

Jeanette Heinbockel
Director of Elections
Office of the Secretary of the State
State Capitol Rm 026
Little Rock, AK 72201

Laurie P. Christie
Indiana Election Commission
Indiana Government Center South E204
302 West Washington Street
Indianapolis, ID 46204-2767

3.) This report was amended due to the fact that we received information after the report was originally prepared.

THIS REPORT WAS PREPARED SOLELY FROM INFORMATION PROVIDED TO US BY YOUR COMPANY WITHOUT AUDIT OR REVIEW. WE ARE NOT RESPONSIBLE FOR ANY ERRORS OR OMISSIONS IN THIS REPORT AS A RESULT OF INCOMPLETE OR INACCURATE INFORMATION PROVIDED TO US.

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION

DEC 4 11 42 AM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Columbia/HCA Healthcare Good Government Fund

ADDRESS (number and street) ☐ Check if different than previously reported
P.O. Box 550, One Park Plaza

CITY, STATE and ZIP CODE
Nashville, TN 37202

2. FEC IDENTIFICATION NUMBER
C-00-67231

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)
☒ Pre-General Election Rpt
☐ 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 10/01/98 through 10/14/98 | | |
| 6. (a) Cash on Hand January 1, 19 98 | | $ 10,898.56 |
| (b) Cash on Hand at Beginning of Reporting Period | $ 122,198.04 | |
| (c) Total Receipts (from Line 19) | $ 4,096.00 | $ 169,183.60 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 126,291.04 | $ 179,082.16 |
| 7. Total Disbursements (from Line 30) | $ 12,156.81 | $ 64,947.93 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 114,134.23 | $ 114,134.23 |
| 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 800-424-9530
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
David G. Anderson

Signature of Treasurer

Date 12/3/98

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)

4-08175

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

(revised 1/1/97)

NAME OF COMMITTEE Columbia/HCA Healthcare Good Government Fund

REPORT COVERING PERIOD FROM 10/01/98 TO: 10/14/98

| | COLUMN A Total This Period | COLUMN B Calendar Year | |
|---|---|---|---|
| **I. Receipts** | | | |
| 11. Contributions (other than loans) From: | | | |
| a. Individual/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | 2,900.00 | 90,750.00 | 11(a)(i) |
| ii. Unitemized | 1,195.00 | 77,423.60 | 11(a)(ii) |
| iii. Total (add i and ii) | 4,095.00 | 168,183.60 | 11(a)(iii) |
| b. Political Party Committees | 0.00 | 0.00 | 11(b) |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 11(c) |
| d. Total Contributions (add a ii, b and c) | 4,095.00 | 168,183.60 | 11(d) |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 | 12 |
| 13. All Loans Received | 0.00 | 0.00 | 13 |
| 14. Loan Repayments Received | 0.00 | 0.00 | 14 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | 0.00 | 0.00 | 15 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | 0.00 | 0.00 | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 0.00 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | 0.00 | 0.00 | 18 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) | 4,095.00 | 168,183.60 | 19 |
| 20. Total Federal Receipts (subtract line 18 from line 19) | 4,095.00 | 168,183.60 | 20 |
| **II. Disbursements** | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | 0.00 | 0.00 | 21(a)(i) |
| ii. Non-Federal Share | 0.00 | 0.00 | 21(a)(ii) |
| b. Other Federal Operating Expenditures | 0.00 | 0.00 | 21(b) |
| c. Total Operating Expenditures (add a i, a ii, and b) | 0.00 | 0.00 | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 7,250.00 | 45,250.00 | 23 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 | 24 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | 0.00 | 0.00 | 25 |
| 26. Loan Repayments Made | 0.00 | 0.00 | 26 |
| 27. Loans Made | 0.00 | 0.00 | 27 |
| 28. Refunds of Contributions To: | | | |
| a. Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | 28(a) |
| b. Political Party Committees | 0.00 | 0.00 | 28(b) |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 28(c) |
| d. Total Contribution Refunds (add a, b and c) | 0.00 | 0.00 | 28(d) |
| 29. Other Disbursements | 4,906.61 | 18,697.93 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) | 12,156.61 | 64,947.93 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) | 12,156.61 | 64,947.93 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans) (from line 11d) | 4,095.00 | 168,183.60 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0.00 | 0.00 | 33 |
| 34. Net Contributions (other than loans) (subtract line 33 from 32) | 4,095.00 | 168,183.60 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) | 0.00 | 0.00 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | 0.00 | 0.00 | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) | 0.00 | 0.00 | 37 |

4-00175

**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)
Columbia/HCA Healthcare Good Government Fund

| Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Fred M Degrandis<br>3675 Brandfords Gate<br>Rocky River, OH 44116<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: St John West Shore Hospital<br>Occupation: President/CEO<br>Aggregate Year-to-Date: $ 500.00 | 10/13/98 | 500.00 |
| B. Full Name, Mailing Address and ZIP Code<br>Juliane Gates<br>2351 E 22nd St<br>Cleveland, OH 44115<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer:<br>Occupation:<br>Aggregate Year-to-Date: $ 300.00 | 10/13/98 | 300.00 |
| C. Full Name, Mailing Address and ZIP Code<br>Michael Rutherford<br>2131 Longfellow St NE<br>N. Canton, OH 44721<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: Timken Mercy Medical Center<br>Occupation: Sr VP<br>Aggregate Year-to-Date: $ 500.00 | 10/13/98 | 500.00 |
| D. Full Name, Mailing Address and ZIP Code<br>Jeffrey S. Janey<br>2351 E 22nd St<br>Cleveland, OH 44115<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer:<br>Occupation:<br>Aggregate Year-to-Date: $ 300.00 | 10/13/98 | 300.00 |
| E. Full Name, Mailing Address and ZIP Code<br>Stephen L. Royal<br>14819 Tumbling Falls Ct<br>Houston, TX 77066<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer: Central Group Office<br>Occupation: VP<br>Aggregate Year-to-Date: $ 1,000.00 | 10/13/98 | 1,000.00 |
| F. Full Name, Mailing Address and ZIP Code<br>Fran H. Hoermann<br>2351 E 22nd St<br>Cleveland, OH<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer:<br>Occupation:<br>Aggregate Year-to-Date: $ 300.00 | 10/13/98 | 300.00 |
| G. Full Name, Mailing Address and ZIP Code<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Name of Employer:<br>Occupation:<br>Aggregate Year-to-Date: $ | | |

| | |
|---|---|
| SUBTOTAL of Receipts This Page (optional) | 2,900.00 |
| TOTAL This Period (last page this line number only) | 2,900.00 |

4-00179

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

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

PAGE 1 OF 2

FOR LINE NUMBER 23

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)
Columbia/HCA Healthcare Good Government Fund

| | | | |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Frank Murkowski for Senate Committee<br>322 Senate Hart Office Building<br>Washington, DC 20510 | Purpose of Disbursement<br>Frank H. Murkowski, U.S. SENATE AK<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/05/98 | Amount of Each Disbursement This Period<br>1,000.00 |
| B. Full Name, Mailing Address and ZIP Code<br>RON LEWIS FOR CONGRESS (1994)<br>PO BOX 307<br>ELIZABETHTOWN, KY 42702 | Purpose of Disbursement<br>Ron Lewis, U.S. HOUSE 2nd KY<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/05/98 | Amount of Each Disbursement This Period<br>500.00 |
| C. Full Name, Mailing Address and ZIP Code<br>John Tanner for Congress Committee<br>1127 Longworth House Office Building<br>Washington, DC 20515 | Purpose of Disbursement<br>Tanner, REPRESENTATIVE 8th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/05/98 | Amount of Each Disbursement This Period<br>1,000.00 |
| D. Full Name, Mailing Address and ZIP Code<br>Clement for Congress Committee<br>2229 Rayburn House Office Building<br>Washington, DC 20515 | Purpose of Disbursement<br>Clement, REPRESENTATIVE 5th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/05/98 | Amount of Each Disbursement This Period<br>500.00 |
| E. Full Name, Mailing Address and ZIP Code<br>Jenkins for Congress<br>107 E Main St<br>Suite 321<br>Rogersville, TN 37857 | Purpose of Disbursement<br>Jenkins, REPRESENTATIVE 1th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/05/98 | Amount of Each Disbursement This Period<br>500.00 |
| F. Full Name, Mailing Address and ZIP Code<br>HAROLD FORD JR - NEW VISION COMMITTEE<br>58 RIVERMIST LANE<br>MEMPHIS, TN 38103 | Purpose of Disbursement<br>Harold E. Ford, U.S. HOUSE 9th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/05/98 | Amount of Each Disbursement This Period<br>500.00 |
| G. Full Name, Mailing Address and ZIP Code<br>John Duncan for Congress Committee<br>12227 BRIGHTON COURT<br>KNOXVILLE, TN 37922 | Purpose of Disbursement<br>John J. "Jimmy" Duncan, U.S. HOUSE 2nd TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/05/98 | Amount of Each Disbursement This Period<br>500.00 |
| H. Full Name, Mailing Address and ZIP Code<br>Norwood for Congress Committee<br>1707 Longworth House Office Building<br>Washington, DC 20515 | Purpose of Disbursement<br>Norwood, REPRESENTATIVE 10th GA<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/06/98 | Amount of Each Disbursement This Period<br>250.00 |
| I. Full Name, Mailing Address and ZIP Code<br>Lewis for Congress Committee<br>229 Cannon House Office Building<br>Washington, DC 20515 | Purpose of Disbursement<br>Lewis, REPRESENTATIVE 5th GA<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/06/98 | Amount of Each Disbursement This Period<br>500.00 |

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) | 3,250.00 |
| TOTAL This Period (last page this line number only) | |

4-00473

| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 2 OF 2 |
|---|---|
| | FOR LINE NUMBER 23 |

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

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)**
Columbia/HCA Healthcare Good Government Fund

| | | | |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Crapo for Congress Committee<br>437 Cannon House Office Building<br>Washington, DC 20515 | Purpose of Disbursement<br>Crapo, REPRESENTATIVE 2nd ID<br>Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1998 | Date (month, day, year)<br>10/07/98 | Amount of Each Disbursement This Period<br>1,000.00 |
| B. Full Name, Mailing Address and ZIP Code<br>Bob Rochelle<br>105 Castle Heights Ave. North<br>Lebanon, TN 37087 | Purpose of Disbursement<br>Bob Rochelle, SENATOR 17th TN<br>Disbursement for: ☐ Primary ☒ General ☐ Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>1,000.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement<br>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<br>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<br>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<br>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<br>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<br>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<br>Disbursement for: ☐ Primary ☐ General ☐ Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) | 2,000.00 |
| TOTAL This Period (last page this line number only) | 7,250.00 |

6-80173

| Use separate schedule(s) for each category of the Detailed Summary Page | PAGE 1 OF 1 |
|---|---|
| | FOR LINE NUMBER 28 |

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

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)
Columbia/HCA Healthcare Good Government Fund

| | | | |
|---|---|---|---|
| A. Full Name, Mailing Address and ZIP Code<br>Kraft Bros., Eastman Patton & Harrell<br>404 James Robertson Pkwy<br>Nashville, TN | Purpose of Disbursement<br>accounting services<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | Date (month, day, year)<br>10/08/98 | Amount of Each Disbursement This Period<br>406.81 |
| B. Full Name, Mailing Address and ZIP Code<br>Brenda Turner Committee<br>26 Legislature Plaza<br>Nashville, TN 37243-0129 | Purpose of Disbursement<br>Brenda Turner,<br>REPRESENTATIVE 29th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>500.00 |
| C. Full Name, Mailing Address and ZIP Code<br>Mike Williams<br>17 Legislature Plaza<br>Nashville, TN 37243-0163 | Purpose of Disbursement<br>Mike Williams,<br>REPRESENTATIVE 63rd TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>250.00 |
| D. Full Name, Mailing Address and ZIP Code<br>Pete Springer<br>2 Legislative Plaza<br>Nashville, TN 37243-0026 | Purpose of Disbursement<br>Pete Springer, STATE SENATE TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>1,000.00 |
| E. Full Name, Mailing Address and ZIP Code<br>Doug Jackson Committee<br>32Legislative Plaza<br>Nashville, TN 37243-0198 | Purpose of Disbursement<br>Doug Jackson,<br>REPRESENTATIVE 89th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>500.00 |
| F. Full Name, Mailing Address and ZIP Code<br>Gene Davidson for Representative Committee<br>38 Legislative Plaza<br>Nashville, TN 37243-0188 | Purpose of Disbursement<br>Gene Davidson,<br>REPRESENTATIVE 96th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>250.00 |
| G. Full Name, Mailing Address and ZIP Code<br>Dennis Ferguson Committee<br>23 Legislative Plaza<br>Nashville, TN 37243-0132 | Purpose of Disbursement<br>Dennis Ferguson,<br>REPRESENTATIVE 32nd TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>500.00 |
| H. Full Name, Mailing Address and ZIP Code<br>Tommy Head Committee<br>33 Legislative Plaza<br>Nashville, TN 37243-0158 | Purpose of Disbursement<br>Tommy Head,<br>REPRESENTATIVE 69th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>500.00 |
| I. Full Name, Mailing Address and ZIP Code<br>Friends of Shelby Rhinehart<br>34 Legislative Plaza<br>Nashville, TN 37243-0137 | Purpose of Disbursement<br>Shelby Rhinehart,<br>REPRESENTATIVE 37th TN<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998 | Date (month, day, year)<br>10/12/98 | Amount of Each Disbursement This Period<br>1,000.00 |

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) | 4,906.81 |
| TOTAL This Period (last page this line number only) | 4,906.81 |

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 12/4/98 |
| ☐ | 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 | |

PREPARER

12/4/98
DATE PREPARED

(4/98)