

# 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) C00142307 T R WADE	060498	P265
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported WATKINS ASSOCIATED INDUSTRIES INC EMPLOYEES FOR GOOD GOVERNMENT		
CITY, STATE and ZIP CODE P O BOX 1738 ATLANTA GA 30301		

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

Dec 21 11 12 AM '98

2. FEC IDENTIFICATION NUMBER **U 33**  
C00142307

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:

- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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

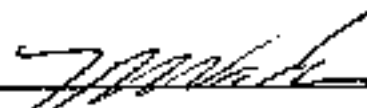
SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>4-1-98</u> through <u>6-30-98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 110,368.55
(b) Cash on Hand at Beginning of Reporting Period	\$ 100,119.08	
(c) Total Receipts (from Line 19)	\$ 6,175.63	\$ 8,218.16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 106,834.71	\$ 118,586.71
7. Total Disbursements (from Line 30)	\$ 3,500.00	\$ 15,252.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ 103,334.71	\$ 103,334.71
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 990 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-7100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

T. R. Wade

Signature of Treasurer



Date

12-14-98

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

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FEC FORM 3X

(revised 9/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE <b>WATKINS ASSOCIATED INDUSTRIES INC, EMPLOYEES FOR GOOD GOVERNMENT COMM. INC. (WATKINS PAC)</b>	REPORT COVERING PERIOD FROM <b>4-1-98</b>	TO: <b>6-30-98 AMENDED</b>	
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) .....	5,300.00	5,600.00	11(a)(i)
ii. Unitemized .....	719.74	1,476.56	11(a)(ii)
iii. Total .....	6,019.74	7,076.56	11(a)(iii)
b. Political Party Committees .....			11(b)
c. Other Political Committees (such as PACs) .....			11(c)
d. Total Contributions .....			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.) .....	695.89	1,141.60	17
18. Transfers from Nonfederal Account for Joint Activity .....			18
19. Total Receipts .....	6,715.63	8,218.16	19
20. Total Federal Receipts .....			20
<b>II. Disbursements</b>			
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 .....		752.00	21(b)
c. Total Operating Expenditures .....		752.00	21(c)
22. Transfers to Affiliated/Other Party Committees .....			22
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	3,500.00	14,500.00	23
24. Independent Expenditures (use Schedule E) .....			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441b(d)) (use Schedule F) .....			25
26. Loan Repayments Made .....			26
27. Loans Made .....			27
28. Refunds of Contributions To:			
a. Individual/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 .....			28(d)
29. Other Disbursements .....			29
30. Total Disbursements .....	3,500.00	15,252.00	30
31. Total Federal Disbursements .....			31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d) .....	6,019.74	7,076.56	32
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from line 32) .....	6,019.74	7,076.56	34
35. Total Federal Operating Expenditures .....	0.00	752.00	35
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00	36
37. Net Operating Expenditures .....	0.00	752.00	37

**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) **WATKINS ASSOCIATED INDUSTRIES, INC., EMPLOYEES FOR GOOD GOVERNMENT COMMITTEE, INC. (WATKINS PAC)**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
S. Greg Slavik 1808 Baltusrol Ct. Lakeland FL 33803	Watkins Motor Lines, Inc.	6-04-98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Exec. V.P. - Sales	Aggregate Year-to-Date > \$ 600.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Watkins P O Box 95002 Lakeland FL 33804	Watkins Motor Lines Inc.	6-22-98	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

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

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

5,300.00

**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) **WATKINS ASSOCIATED INDUSTRIES, INC., EMPLOYEES FOR GOOD GOVERNMENT COMMITTEE, INC. (WATKINS PAC)**

<b>A. Full Name, Mailing Address and ZIP Code</b> NationsBank P O Box 4899 Atlanta GA 30302-4899		Name of Employer Money Market Acct. #838410	Date (month, day, year) 5-29-98	Amount of Each Receipt this Period 695.89
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Interest Earned	Aggregate Year-to-Date > \$ 1,141.60	
<b>B. Full Name, Mailing Address and ZIP Code</b>		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
<b>C. Full Name, Mailing Address and ZIP Code</b>		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
<b>D. Full Name, Mailing Address and ZIP Code</b>		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
<b>E. Full Name, Mailing Address and ZIP Code</b>		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
<b>F. Full Name, Mailing Address and ZIP Code</b>		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	
<b>G. Full Name, Mailing Address and ZIP Code</b>		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$	

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

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

695.89

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
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) **WATKINS ASSOCIATED INDUSTRIES, INC., EMPLOYEES FOR GOOD GOVERNMENT COMMITTEE, INC. (WATKINS PAC)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Warren for Congress P O Box 2833 Norcross GA 30071	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-8-98	1,000.00
B. Full Name, Mailing Address and ZIP Code Callahan for Congress 1317 F ST NW Washington DC 20004	Purpose of Disbursement Contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-8-98	500.00
C. Full Name, Mailing Address and ZIP Code FISHPAC 1901 N Fort Myer Blvd Arlington VA 22209	Purpose of Disbursement Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-18-98	2,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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) .....

3,500.00

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 12-15-98
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
	12-21-98
PREPARER	DATE PREPARED