

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

FEDERAL ELECTION COMMISSION  
COMMUNICATIONS MAIL ROOM

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Minnesota Bankers Political Action Committee</b>		FEB 2 1 42 PM '99
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>P.O. Box 390101</b>	2. FEC IDENTIFICATION NUMBER <b>C00011627</b>	
CITY, STATE and ZIP CODE <b>Minneapolis, MN 55439</b>	3. <input checked="" type="checkbox"/> 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 <u>11/24/98</u> through <u>12/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 8,441.66
(b) Cash on Hand at Beginning of Reporting Period	\$ 7,700.73	
(c) Total Receipts (from Line 19)	\$ 2,450.00	\$ 20,785.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 10,150.73	\$ 29,226.66
7. Total Disbursements (from Line 30)	\$ 153.76	\$ 19,229.69
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 9,996.97	\$ 9,996.97
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

**Jennifer L. Engh**

Signature of Treasurer

*Jennifer L. Engh, Deputy Treasurer*

Date

**1/27/99**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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FEC FORM 3X

(revised 9/83)

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

(revised 1/1/91)

NAME OF COMMITTEE <b>Minnesota Bankers Political Action Committee</b>		REPORT COVERING PERIOD		
		FROM <b>11/24/98</b>	TO <b>12/31/98</b>	
		COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>				
11. Contributions (other than loans) From:				
a. Individual/Persons Other Than Political Committees				11(a)(i)
i. Itemized (use Schedule A)				11(a)(ii)
ii. Unitemized		2450.00	20,785.00	11(a)(b)
iii. Total (add i and ii) >		2450.00	20,785.00	11(b)
b. Political Party Committees				11(c)
c. Other Political Committees (such as PACs)				11(d)
d. Total Contributions (add a ii, b and c) >		2450.00	20,785.00	12
12. Transfers From Affiliated/Other Party Committees				13
13. All Loans Received				14
14. Loan Repayments Received				15
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)				16
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees				17
17. Other Federal Receipts (Dividends, Interest, etc.)				18
18. Transfers from Nonfederal Account for Joint Activity			20,785.00	19
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		2450.00	20,785.00	20
20. Total Federal Receipts (subtract line 16 from line 19) >		2450.00	20,785.00	
<b>II. Disbursements</b>				
21. Operating Expenditures:				
a. Shared Federal/Non-Federal Activity (from Schedule H4)				21(a)(i)
i. Federal Share				21(a)(ii)
ii. Non-Federal Share		153.76	629.69	21(c)
b. Other Federal Operating Expenditures				21(d)
c. Total Operating Expenditures (add a i, a ii and b) >		153.76	629.69	22
22. Transfers to Affiliated/Other Party Committees			18,100.00	23
23. Contributions to Federal Candidates/Committees and Other Political Committees			500.00	24
24. Independent Expenditures (use Schedule E)				25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)				26
26. Loan Repayments Made				27
27. Loans Made				
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 (add a, b and c) >				29
29. Other Disbursements				30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		153.76	19,229.69	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		153.76	19,229.69	
<b>III. Net Contributions/Operating Expenditures</b>				
32. Total Contributions (other than loans) (from line 11d)		2,450.00	20,785.00	32
33. Total Contribution Refunds (from line 28d)				33
34. Net Contributions (other than loans) (subtract line 33 from 32)		2,450.00	20,785.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		153.76	629.69	35
36. Offsets to Operating Expenditures (from line 15)				36
37. Net Operating Expenditures (subtract line 36 from 35) >		153.76	629.69	37

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)  
**Minnesota Bankers Political Action Committee**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Conference Plus, Inc. 999 Plaza Drive, 4th Floor Schaumburg, IL 60173	Teleconference meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/9/99	109.50
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Minnesota Bankers Association 7601 France Ave South Minneapolis, MN 55435	Postage- Reimbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) PAC mailing	12/30/99	30.51
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) .....	140.01
TOTAL This Period (last page this line number only) .....	140.01

