REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

C00332296 060499 P 268
STEFFANI MEARS
SUSAN B ANTHONY LIST CANDIDATE FUND
228 S WASHINGTON STREET #105
ALEXANDRIA VA 22314

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM
JUL 20 3 32 PM '99

2. FEC IDENTIFICATION NUMBER

3. [X] 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
[X] 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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1-1-99 through 6-30-99		
6. (a) Cash on Hand January 1, 19 99		$ 8146.90
(b) Cash on Hand at Beginning of Reporting Period	$ 8146.90	
(c) Total Receipts (from Line 19)	$ 21033.38	$ 21033.38
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 29180.28	$ 29180.28
7. Total Disbursements (from Line 30)	$ 9638.19	$ 9638.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 19542.09	$ 19542.09
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 202-694-1100

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: STEFFANI MEARS

Signature of Treasurer: Steffani Mears

Date: 7/28/99

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 8/99)

FE8AN121

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

(revised 1/1/91)

NAME OF COMMITTEE: Susan B. Anthony List Candidate Fund

REPORT COVERING PERIOD FROM 1-1-99 TO: 6-30-99

	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)	2500.00	2500.00	11(a)(i)
ii. Unitemized	1290.00	1290.00	11(a)(ii)
iii. Total (add i and ii) ➤	3790.00	3790.00	11(a)(iii)
b. Political Party Committees	—	—	11(b)
c. Other Political Committees (such as PACs)	12000.00	12000.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	15790.00	15790.00	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.)	4059.91	4059.91	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	999.91	999.91	16
17. Other Federal Receipts (Dividends, Interest, etc.)	183.56	183.56	17
18. Transfers from Nonfederal Account for Joint Activity	—	—	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	21033.38	21033.38	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	21033.38	21033.38	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	4138.19	4138.19	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	—	—	21(c)
22. Transfers to Affiliated/Other Party Committees	5500.00	5500.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	—	—	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) ➤	9638.19	9638.19	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	9638.19	9638.19	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	15790.00	15790.00	32
33. Total Contribution Refunds (from line 28d)	—	—	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	15790.00	15790.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	4138.19	4138.19	35
36. Offsets to Operating Expenditures (from line 15)	4059.91	4059.91	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	78.28	78.28	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)

CONTRIBUTIONS FROM INDIVIDUALS

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)

SUSAN B. ANTHONY LIST CANDIDATE FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
STEPHANIE LATAIF 11050 STRATHMORE DR, #407 LOS ANGELES, CA 90024 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	REQUESTED Occupation Aggregate Year-to-Date > $1,000 –	1/8/99	$1,000 –
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL MEYER 2306 BUXBORY PL. ALEXANDRIA, VA 22308 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	THE BURSTEIN GROUP, INC. Occupation: VICE PRESIDENT Aggregate Year-to-Date > $1,000 –	5/17/99	$1,000 –
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
GERARD MITCHELL 7116 FAIRFAX ROAD BETHESDA, MD 20814 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	STEIN, MITCHELL & MESINES Occupation: LAWYER Aggregate Year-to-Date > $ 500	1/4/99	$500 –
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	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	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	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)	$2,500 –
TOTAL This Period (last page this line number only)	$2,500 –

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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(c)

CONTRIBUTIONS FROM OTHER POLITICAL COMMITTEES

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NAME OF COMMITTEE (In Full)

SUSAN B. ANTHONY LIST CANDIDATE FUND

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. NATIONAL RIGHT TO LIFE PAC, 419 7TH ST. NW #300, WASHINGTON, DC 20004 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 5,000 —	4/14/99	$5,000 —
B. FAITH, FAMILY AND FREEDOM PAC, 321 EAST WESTFIELD BLVD., INDIANAPOLIS, IN 46240 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,000 —	3/24/99	$1,000 —
C. REPUBLICAN MAJORITY FUND, 1155 21ST ST. NW, STE. 300, WASHINGTON, DC 20036 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 5,000 —	3/24/99	$5,000 —
D. FRIENDS OF JOE PITTS, P.O. BOX 275, UNIONVILLE, PA 19375 — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,000 —	4/19/99	$1,000 —
E. Full Name, Mailing Address and ZIP Code — Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
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) > $12,000 —

TOTAL This Period (last page this line number only) > $12,000 —

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SCHEDULE A **ITEMIZED RECEIPTS**

OFFSETS TO EXPENDITURES

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

PAGE 1 OF 1

FOR LINE NUMBER 15

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NAME OF COMMITTEE (In Full)

SUSAN B. ANTHONY LIST CANDIDATE FUND

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. MURPHY PINTAK GAUTHIER HUDOME AGENCY, INC. 6331 LEESBURG PIKE, STE. 100 FALLS CHURCH, VA 22044		2/3/99	$4,059.91
Receipt For: ☐ Primary ☐ General ☒ Other (specify): MEDIA REFUND	Aggregate Year-to-Date > $ 4,059.91		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	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	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	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)	$4,049.91
TOTAL This Period (last page this line number only)	4,049.91

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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 16

REFUNDS OF CONTRIBUTIONS MADE TO FEDERAL CANDIDATES

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)

SUSAN B. ANTHONY LIST CANDIDATE FUND

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
JEAN LEISING FOR CONGRESS 1998 P.O. BOX 53 BATESVILLE, IN 47006 Receipt For: ☐ Primary ☐ General ☒ Other (specify): REFUND OVER CONT. LIMIT	Aggregate Year-to-Date > $	2/8/99	$999.91
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
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)	$999.91
TOTAL This Period (last page this line number only)	$999.91

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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 21b

other federal operating Expenditures

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)

Susan B. Anthony List Candidate Fund

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
A. ohio Right to life 8 East Broad street Columbus OH 43215	List Rental	1-22-99	$642.60
B. Right to life of Idaho 1154 N. orchard Street #19 Boise ID 83701	List Rental	1-22-99	$834.26
C. Oregon Right to life 4335 River Road North Salem OR 97303	List Rental	2-8-99	$2600.33
D.			
E.			
F.			
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional) $4077.19

TOTAL This Period (last page this line number only) $4077.19

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SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
Contributions to Federal Candidates			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)

SUSAN B. ANTHONY LIST CANDIDATE FUND

A. Full Name, Mailing Address and ZIP Code Monica Monica for Congress PO Box 56136 Metairie, LA 70005	Purpose of Disbursement Contribution Disbursement for: [ ] Primary [ ] General [X] Other (specify) Special	Date (month, day, year) 4-29-99	Amount of Each Disbursement This Period $ 5000.00
B. Full Name, Mailing Address and ZIP Code Team Emerson PO Box Cape Girardeau MO 63701	Purpose of Disbursement contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 6-28-99	Amount of Each Disbursement This Period $500
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)	$5500.00
TOTAL This Period (last page this line number only)	$5500.00

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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)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Susan B. Anthony List Candidate Fund				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Ohio Right to Life 8 East Broad Street Columbus OH 43215	$642.60	—	$642.60	$0
Nature of Debt (Purpose): List Rental				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Right to Life of Idaho 1134 N. Orchard Street Suite 19 Boise ID 83701	$834.26	—	$834.26	$0
Nature of Debt (Purpose): List Rental				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Oregon Right to Life 4335 River Road North Salem OR 97303	$2600.33	—	$2600.33	$0
Nature of Debt (Purpose): List Rental				
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)	$0
2) TOTALS This Period (last page in this line only)	$0
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)	$0

FEAAN121

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 7/30/99
☐	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	

PREPARER

7/30/99
DATE PREPARED

(4/96)