

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

C00091561 101998 P 264
 NR FRANK S. STANLEY **CHARLES L. FALLIS**
 NATIONAL ASSOCIATION OF RETIRE
 D FEDERAL EMPLOYEES POLITICAL
 606 NORTH WASHINGTON STREET
 ALEXANDRIA VA 22314

RECEIVED
FEDERAL ELECTION
COMMISSION

DEC 3 12 56 PM '98

2. FEC IDENTIFICATION NUMBER
C00091561

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 Several

(b) Is this Report an Amendment? YES NO

| SUMMARY | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|---|
| 5. Covering Period <u>10-15-98</u> through <u>11-23-98</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>98</u> | | \$ 952,978.17 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 1,214,837.79 | |
| (c) Total Receipts (from Line 1B) | \$ 13,064.62 | \$1,151,701.69 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$1,227,902.41 | \$2,104,679.86 |
| 7. Total Disbursements (from Line 3D) | \$ 128,974.32 | \$1,005,751.77 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$1,098,928.09 | \$1,098,928.09 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | \$ -0- | For further information contact: Federal Election Commission 800 E Street, NW Washington, DC 20488 Toll Free 800-424-9530 Local 202-219-3420 |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$ -0- | |

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
Charles L. Fallis

Signature of Treasurer *Charles L. Fallis* Date 12-01-98

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

| | | | | | | | |
|--|--|--|--|--|--|--|--|
| | | | | | | | |
|--|--|--|--|--|--|--|--|

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 National Association of Retired Federal Employees Political Action Committee (NARFE-PAC) | | REPORT COVERING PERIOD FROM 10-15-98 TO 11-23-98 | |
|---|--|---|---------------------------|
| | | 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) | | -0- | 4,301.00 |
| ii. Unitemized | | 10,907.89 | 1,124,528.32 |
| iii. Total (add i and ii) > | | 10,907.89 | 1,128,829.32 |
| b. Political Party Committees | | | |
| c. Other Political Committees (such as PACs) | | | |
| d. Total Contributions (add a ii, b and c) > | | 10,907.89 | 1,128,829.32 |
| 12. Transfers From Affiliated/Other Party Committees | | | |
| 13. All Loans Received | | | |
| 14. Loan Repayments Received | | | |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | | | |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | | |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | | 2,156.73 | 22,872.37 |
| 18. Transfers from Nonfederal Account for Joint Activity | | 2,156.73 | 22,872.37 |
| 19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) > | | 13,064.62 | 1,151,701.69 |
| 20. Total Federal Receipts (subtract line 18 from line 19) > | | 13,064.62 | 1,151,701.69 |
| II Disbursements | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | | | |
| ii. Non-Federal Share | | | |
| b. Other Federal Operating Expenditures | | 2,368.32 | 374,413.77 |
| c. Total Operating Expenditures (add a i, a ii, and b) > | | 2,368.32 | 374,413.77 |
| 22. Transfers to Affiliated/Other Party Committees | | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | 126,500.00 | 631,000.00 |
| 24. Independent Expenditures (use Schedule E) | | | |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | | | |
| 26. Loan Repayments Made | | | |
| 27. Loans Made | | | |
| 28. Refunds of Contributions To: | | | |
| a. Individual/Persons Other Than Political Committees | | 106.00 | 338.00 |
| b. Political Party Committees | | | |
| c. Other Political Committees (such as PACs) | | | |
| d. Total Contribution Refunds (add a, b and c) > | | 106.00 | 338.00 |
| 29. Other Disbursements | | | |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) > | | 128,974.32 | 1,005,751.77 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) > | | 128,974.32 | 1,005,751.77 |
| III Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | | 10,907.89 | 1,128,829.32 |
| 33. Total Contribution Refunds (from line 28d) | | 106.00 | 338.00 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | | 10,801.89 | 1,128,491.32 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) > | | 2,368.32 | 374,413.77 |
| 36. Offsets to Operating Expenditures (from line 15) | | | |
| 37. Net Operating Expenditures (subtract line 36 from 35) > | | 2,368.32 | 374,413.77 |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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) (NARFE-PAC)
National Association of Retired Federal Employees Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|------------------|---------------------------------------|------------------------------------|
| First Union Bank 1350 Connecticut Avenue NW Washington, DC 20036 | Interest Income | 10-15-98 | \$ 1,072.83 |
| | | 10-30-98 | 1,083.90 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date > \$ 11,716.61 | |
| B. 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 > \$ | |
| 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) \$ 2,156.73

TOTAL This Period (last page this line number only) \$ 2,156.73

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full) (NARFE-PAC)
National Association of Retired Federal Employees Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| First Union Bank 1350 Connecticut Ave, NW Washington, DC 20036 | Service Charge | 10-15-98 | \$ 24.17 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 46.97 |
| B. Full Name, Mailing Address and ZIP Code Nations Bank, NA 3 Dupont Circle, NW Washington, DC 20036 | Service Charges | 10-28-98 | \$ 429.27 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-31-98 | 109.46 |
| C. Full Name, Mailing Address and ZIP Code Integram 2730 - G Prosperity Avenue Fairfax, VA 22031 | Postage and Fulfillment Services | 10-29-98 | \$ 1,176.30 |
| | Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-31-98 | 582.15 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |

| | |
|---|-------------|
| SUBTOTAL of Disbursements This Page (optional) | \$ 2,368.32 |
| TOTAL This Period (last page this line number only) | \$ 2,368.32 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 8
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full) (NARFE-PAC)
National Association of Retired Federal Employees Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Abercrombie For Congress PO Box 2884 Washington, DC 20013 | Contribution (HI-D) Rep. Neil Abercrombie Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | \$ 5,000.00 |
| B. Full Name, Mailing Address and ZIP Code Andrews For Congress 523 Richie Ave. Collingswood, NJ 08108 | Contribution Rep. Rob Andrews (N-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| C. Full Name, Mailing Address and ZIP Code Barrett For Congress 2711 N Avondale Milwaukee, WI 53210 | Contribution Rep. Tom Barrett (WI-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| D. Full Name, Mailing Address and ZIP Code Boswell For Congress 422 C Street, NE Lower Level Washington, DC 20002 | Contribution (IA-D) Rep. Leonard Boswell Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 3,000.00 |
| E. Full Name, Mailing Address and ZIP Code People For Berryman 38 Ivy Street, SE Washington, DC 20003 | Contribution (MI-D) Cand. Jim Berryman Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| F. Full Name, Mailing Address and ZIP Code Friends of Sherrod Brown 111 Edgefield Dr. Elyria, OH 44035 | Contribution (OH-D) Rep. Sherrod Brown Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 4,000.00 |
| G. Full Name, Mailing Address and ZIP Code Jim Clark For Congress 701 Jackson, Suite 220 Topeka, KS 66603 | Contribution Cand. Jim Clark (KS-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| H. Full Name, Mailing Address and ZIP Code Clay Campaign Committee 5011 N. Kingshighway Blvd. St. Louis, MO 63115 | Contribution Rep. Bill Clay (MO-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| I. Full Name, Mailing Address and ZIP Code Cooper For Congress 38 Ivy Street, SE Washington, DC 20003 | Contribution (TN-D) Cand. Jerry Cooper Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |

SUBTOTAL of Disbursements This Page (optional) \$22,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 8
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement Contribution (PA-D) | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Coyne For Congress 307 Halket Street Pittsburgh, PA 15213 | Rep. William Coyne Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 3,000.00 |
| B. Full Name, Mailing Address and ZIP Code Dooley For Congress Committee 7176 N. Prospect Ave. Fresno, CA 93711 | Rep. Cal Dooley (CA-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 3,000.00 |
| C. Full Name, Mailing Address and ZIP Code Friends Of Farr PO Box 122 Monterey, CA 93942 | Rep. Sam Farr (CA-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| D. Full Name, Mailing Address and ZIP Code Friends of Congressman Tim Holden PO Box 8492 Reading, PA 19603 | Rep. Tim Holden (PA-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| E. Full Name, Mailing Address and ZIP Code Rush Holt For Congress PO Box 782 Pennington, NJ 08534 | Cand. Rush Holt (NJ-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| F. Full Name, Mailing Address and ZIP Code Hoyer For Congress Committee 7905 Malcom Rd., Suite 102 Clinton, MD 20735 | Rep. Steny Hoyer (MD-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| G. Full Name, Mailing Address and ZIP Code Comm. To Re-Elect Congressman Duncan Hunter 9340 Fuerte Dr. #302 La Mesa, CA 91941 | Rep. Duncan Hunter (CA-R) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| H. Full Name, Mailing Address and ZIP Code Lampson For Congress '98 38 Ivy Street, SE Washington, DC 20003 | Rep. Nick Lampson (TX-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| I. Full Name, Mailing Address and ZIP Code Levin For Congress PO Box 1092 30636 Dequindre Warren, MI 48090 | Rep. Sander Levin (MI-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |

SUBTOTAL of Disbursements This Page (optional) \$ 17,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 8
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Friends of Jim McDermott PO Box 21786 Seattle, WA 98111-3786 | Contribution (WA-D) Rep. Jim McDermott Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| Friends of George Miller PO Box 5864 Concord, CA 94524 | Contribution (CA-D) Rep. George Miller Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| Friends of Jack Metcalf 3105 Hoyt Ave., Suite C Everett, WA 98201 | Contribution (WA_R) Rep. Jack Metcalf Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| David Minge For Congress 212 South Minnesota Ave. St. Peter, MN 56082 | Contribution (MN-D) Rep. David Minge Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| Steve Owens For Congress PO Box 5915 Scottsdale, AZ 85261 | Contribution (AZ-D) Cand. Steve Owens Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 2,000.00 |
| Payne For Congress 1061 Bergen Street Newark, NJ 07112 | Contribution (NJ-D) Rep. Donald Payne Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| Plowman For Congress 4615 East 60th Street Tulsa, OK 74135 | Contribution (OK-D) Cand. Howard Plowman Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| Rush For Congress PO Box 5875 Cedar Rapids, IA 52406-5875 | Contribution Cand. Bob Rush (IA-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| Max Sandlin For Congress PO Box 1281 Marshall, TX 75761 | Contribution (TX-D) Rep. Max Sandlin Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |

SUBTOTAL of Disbursements This Page (optional)

\$ 11,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 4 OF 8
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement (OK-D) Contribution Cand. M.C. Smotherman | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------------------|---|
| Friends of M.C. Smotherman PO Box 7258 Edmond, OK 73083-7258 | Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | 1,000.00 |
| B. Full Name, Mailing Address and ZIP Code Stabenow For Congress PO Box 4945 East Lansing, MI 48826 | Purpose of Disbursement (MI-D) Contribution Rep. Debbie Stabenow | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 1,000.00 |
| C. Full Name, Mailing Address and ZIP Code The Pete Stark Re-Election Comm. 39300 Civic Center Dr., Suite 230 Freemont, CA 94538 | Purpose of Disbursement Contribution Rep. Pete Stark (CA-D) | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 2,000.00 |
| D. Full Name, Mailing Address and ZIP Code Strickland For Congress PO Box 580 Lucasville, OH 45648 | Purpose of Disbursement (OH-D) Contribution Rep. Ted Strickland | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 5,000.00 |
| E. Full Name, Mailing Address and ZIP Code Mike Taylor For Congress 38 Ivy Street, SE Washington, DC 20003 | Purpose of Disbursement (NC-D) Contribution Cand. Mike Taylor | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 3,000.00 |
| F. Full Name, Mailing Address and ZIP Code Rob Tully For Congress PO Box 691 Dubuque, IA 52004 | Purpose of Disbursement Contribution Cand. Rob Tully (IA-D) | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 1,000.00 |
| G. Full Name, Mailing Address and ZIP Code Mark Udall For Congress 6255 Simmons Dr. Boulder, CO 80303 | Purpose of Disbursement Contribution Cand. Mark Udall (CO-D) | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 3,000.00 |
| H. Full Name, Mailing Address and ZIP Code Your Vogt In Congress 1413-B Joann Columbia, MO 65203 | Purpose of Disbursement Contribution Cand. Linda Vogt (MO-D) | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 1,000.00 |
| I. Full Name, Mailing Address and ZIP Code Waxman For Congress 8665 Wilshire Blvd., Suite 200 Beverly Hills, CA 90211 | Purpose of Disbursement (CA-D) Contribution Rep. Henry Waxman | Date (month, day, year) 10-20-98 | Amount of Each Disbursement This Period 3,000.00 |

SUBTOTAL of Disbursements This Page (optional) \$ 20,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 8
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|--|-------------------------|---|
| Schumer '98 c/o Jefferey Stewart 333 West 52nd Street, 6th Floor New York, NY 10019 | Contribution (NY-D) Cand. Charles Schumer Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-20-98 | -5,000.00 |
| B. Full Name, Mailing Address and ZIP Code Ken Bentsen For Congress Committee 5616 Morningside #301 Houston, TX 77005 | Contribution (TX-D) Rep. Ken Bentsen Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 3,000.00 |
| C. Full Name, Mailing Address and ZIP Code Friends Of Don Bevil 700 19th St. Jasper, AL 35501 | Contribution Cand. Don Bevil (AL-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| D. Full Name, Mailing Address and ZIP Code Sanford D. Bishop, Jr. For Congress Committee PO Box 2884 Washington, DC 20013 | Contribution (GA-D) Rep. Sanford Bishop Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| E. Full Name, Mailing Address and ZIP Code Tom Campbell For Congress 1875 S. Bascom Ave. Suite 116-167 Campbell, CA 95008 | Contribution (CA-R) Rep. Tom Campbell Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| F. Full Name, Mailing Address and ZIP Code Eva Clayton Committee For Congress 59 River Road Littleton, NC 27850 | Contribution Rep. Eva Clayton (NC-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 1,000.00 |
| G. Full Name, Mailing Address and ZIP Code Deschamps For Congress 1211 Mount Ave. Missoula, MT 59801 | Contribution (MT-D) Cand. Dusty Deschamps Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| H. Full Name, Mailing Address and ZIP Code Gorman For Congress PO Box 36608 Louisville, KY 40233 | Contribution (KY-D) Cand. Chris Gorman Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 3,000.00 |
| I. Full Name, Mailing Address and ZIP Code Friends of Susan Kirkpatrick PO Box 9628 Ft. Collins, CO 80525 | Contribution (CO-D) Cand. Susan Kirkpatrick Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |

SUBTOTAL of Disbursements This Page (optional)

\$ 22,000.00

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 6 OF 8
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)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| Friends of John LaFalce PO Box 383 Niagara Falls, NY 14302 | Contribution (NY-D) Rep. John LaFalce Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 1,000.00 |
| Hoeffel For Congress 700 East Johnson Highway Norristown, PA 19401 | Contribution Cand. Joe Hoeffel (PA-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 3,000.00 |
| Menendez For Congress 517 15th Street Union City, NJ 07087 | Contribution Rep. Bob Menendez (NJ-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| Earl Pomeroy For Congress PO Box 75214 Washington, DC 20013-5214 | Contribution Rep. Earl Pomeroy (ND-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 1,000.00 |
| Gail Riecken For Congress PO Box 3897 Evansville, IN 47737-3897 | Contribution Cand. Gail Riecken (IN-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 1,000.00 |
| Lynn Rivers For Congress Committee PO Box 28293 Ann Arbor, MI 48107 | Contribution Rep Lynn Rivers (MI-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 3,000.00 |
| Sanders For Congress PO Box 391 Burlington, VT 05402 | Contribution (VT-I) Rep. Bernie Sanders Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| Ron Santa For Congress 277 Turner Road, PO Box 4625 Middletown, RI 02842 | Contribution Cand. Ron Santa (RI-R) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 1,000.00 |
| Schakowsky For Congress 990 Grove Street, Suite 203 Evanston, IL 60201 | Contribution (IL-D) Cand. Jan Schakowsky Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |

| | |
|---|--------------|
| SUBTOTAL of Disbursements This Page (optional) | \$ 16,000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 8
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) (NARFE-PAC)
National Association of Retired Federal Employees Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Scorsone For Congress 167 West Main Street, Suite #1010 Lexington, KY 40507 | Contribution (KY-D) Cand. Ernesto Scorsone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| Verticchio For Congress PO Box 98 Gillespie, IL 62033 | Contribution (IL-D) Cand. Rick Verticchio Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 1,000.00 |
| Friends of J.C. Watts '98 PO Box 720445 Norman, OK 73070 | Contribution (OK-R) Rep. J.C. Watts Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 2,000.00 |
| Woolsey For Congress PO Box 750176 Petaluma, CA 94975 | Contribution (CA-D) Rep. Lynn Woolsey Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-28-98 | 500.00 |
| Friends of Roy Blunt PO Box 278 Strafford, MO 65757 | Contribution (MO-R) Rep. Roy Blunt Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 2,000.00 |
| Gejdenson Re-Election Committee PO Box 1818 Bozeman, CT 06334 | Contribution (CT-D) Rep. Sam Gejdenson Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | -2,000.00 |
| Committee to Elect Tony Heckemeyer 510 N Main Sikeston, MO 63801 | Contribution (MO-D) Cand. Tony Heckemeyer Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 3,000.00 |
| Bobby Scott For Congress PO Box 251 Newport News, VA 23607 | Contribution (VA-D) Rep. Bobby Scott Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 1,000.00 |
| Ike Skelton For Congress Committee PO Box A Harrisonville, MO 64701 | Contribution (MO-D) Rep. Ike Skelton Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 2,000.00 |

SUBTOTAL of Disbursements This Page (optional)

\$ 15,500.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 8 OF 8
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
National Association of Retired Federal Employees Political Action Committee (NARFE-PAC)

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|-------------------------|---|
| Committee To Elect Henry L. Strauss 4060 S. Cherry Street Englewood, CO 80110 | Contribution (CO-D) Cand. Henry Strauss Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 2,000.00 |
| B. Full Name, Mailing Address and ZIP Code Wyden For Senate PO Box 3498 Portland, OR 97208 | Contribution Sen. Ron Wyden (OR-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 2,000.00 |
| C. Full Name, Mailing Address and ZIP Code Pennsylvanians For Kanjorski 126 South Franklin Street Wilkes-Barre, PA 18702 | Contribution (PA-D) Rep. Paul Kanjorski Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-30-98 | 2,000.00 |
| D. Full Name, Mailing Address and ZIP Code Stallings For Congress PO Box 205 Pocatello, ID 83204 | Contribution Returned Cand. Richard Stallings (CA-D) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 10-23-98 | (3,000.00) |
| 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)

\$ 3,000.00

TOTAL This Period (last page this line number only)

\$ 126,500.00

LOANS

Name of Committee (in Full) (NARFE-PAC)
National Association of Retired Federal Employees Political Action Committee

| | | | |
|---|----------------------------|-------------------------------|--|
| A. Full Name, Mailing Address and ZIP Code of Loan Source N/A | Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured | | | |

| | | | |
|---|--------------------------------------|--|--|
| List All Endorsers or Guarantors (if any) to Item A | | | |
| 1. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 2. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 3. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |

| | | | |
|---|----------------------------|-------------------------------|--|
| B. Full Name, Mailing Address and ZIP Code of Loan Source | Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | | | |
| Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured | | | |

| | | | |
|---|--------------------------------------|--|--|
| List All Endorsers or Guarantors (if any) to Item B | | | |
| 1. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 2. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |
| 3. Full Name, Mailing Address and ZIP Code | Name of Employer | | |
| | Occupation | | |
| | Amount Guaranteed Outstanding: \$ | | |

SUBTOTALS This Period This Page (optional) _____

TOTALS This Period (last page in this line only) _____

Carry outstanding balances only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

| | | | |
|--|--|------------------------------|---------------------|
| NAME OF COMMITTEE (IN FULL) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC) | | FEC IDENTIFICATION NUMBER | |
| FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER) N/A | | AMOUNT OF LOAN | INTEREST RATE (APR) |
| | | DATE INCURRED OR ESTABLISHED | DATE DUE |

A. Has loan been restructured? No Yes If yes, date originally incurred: _____

B. If line of credit, amount of this draw: _____; total outstanding balance: _____

C. Are other parties secondarily liable for the debt incurred?
 No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
 No Yes If yes, specify: _____

What is the value of this collateral? _____

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?

No Yes If yes, specify: _____ What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account established: _____ Location of account: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

| | | |
|------------------------|-----------|------|
| G. COMMITTEE TREASURER | | DATE |
| TYPED NAME | SIGNATURE | |

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

| | | | |
|---------------------------|-----------|-------|------|
| AUTHORIZED REPRESENTATIVE | | TITLE | DATE |
| TYPED NAME | SIGNATURE | | |

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

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

| Name of Committee (in Full) National Association of Retired Federal Employees Political Action (NARFE-PAC) | 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 N/A | | | | |
| Nature of Debt (Purpose): | | | | |
| B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor | | | | |
| 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) | | | | |
| 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) | | | | |

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

| Name of Committee (In Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC) | | | | |
|--|---------------------------|----------------------------|----------|---|
| Fur Name, Mailing Address & ZIP Code of Each Payee | Purpose of Expenditure | Date (month, day, year) | Amount | Name of Federal Candidate supported or opposed by the expenditure & office sought |
| N/A | | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| | | | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose |
| (a) SUBTOTAL of Itemized Independent Expenditures | | | \$ _____ | |
| (b) SUBTOTAL of Unitemized Independent Expenditures | | | \$ _____ | |
| (c) TOTAL Independent Expenditures | | | \$ _____ | |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, concert with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Subscribed and sworn to before me this _____ day of _____, 19 _____

My Commission expires: _____

NOTARY PUBLIC

Signature _____ Date _____

SCHEDULE F

**ITEMIZED COORDINATED EXPENDITURES MADE BY
POLITICAL PARTY COMMITTEES OR DESIGNATED AGENTS(S)
ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE
(2 U.S.C. §441a(d))**

Page 1 of 1 for
LINE NUMBER _____

(To be used only by Political Committees in the General Election)

| | | | | |
|--|--|------------------------|-------------------------|--------|
| Name of Political Committee (in Full) National Association of Retired Federal Employees Political Action Committee (NARFE-PAC) | | | | |
| Has your Committee been designated to make coordinated expenditures by a political party committee? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO If YES, name the designating committee: | | | | |
| Full Name, Mailing Address and ZIP Code of Subordinate Committee N/A | | | | |
| Full Name, Mailing Address and ZIP Code of Each Payee | Name of Federal Candidate Supported, State, District & Office Sought | Purpose of Expenditure | Date (month, day, year) | Amount |
| | | | | |
| | Aggregate General Election Expenditure for this Candidate—\$ | | | |
| Full Name, Mailing Address and ZIP Code of Each Payee | Name of Federal Candidate Supported, State, District & Office Sought | Purpose of Expenditure | Date (month, day, year) | Amount |
| | | | | |
| | Aggregate General Election Expenditure for this Candidate—\$ | | | |
| Full Name, Mailing Address and ZIP Code of Each Payee | Name of Federal Candidate Supported, State, District & Office Sought | Purpose of Expenditure | Date (month, day, year) | Amount |
| | | | | |
| | Aggregate General Election Expenditure for this Candidate—\$ | | | |
| Full Name, Mailing Address and ZIP Code of Each Payee | Name of Federal Candidate Supported, State, District & Office Sought | Purpose of Expenditure | Date (month, day, year) | Amount |
| | | | | |
| | Aggregate General Election Expenditure for this Candidate—\$ | | | |
| SUBTOTAL of Expenditures This Page (optional) | | | | |
| TOTAL This Period (last page this line number only) | | | | |

**METHOD OF ALLOCATION FOR SHARED FEDERAL
AND NON-FEDERAL ADMINISTRATIVE EXPENSES
AND GENERIC VOTER DRIVE COSTS**

NAME OF COMMITTEE
National Association of Retired Federal Employees Political Action
Committee (NARFE-PAC)

NATIONAL PARTY COMMITTEES N/A

FIXED FEDERAL PERCENTAGE (CHECK THE APPROPRIATE LINE AND ENTER % IN BOX TO RIGHT) %
 PRESIDENTIAL YEAR (85%)
 ALL OTHER YEARS (60%)

HOUSE AND SENATE PARTY CAMPAIGN COMMITTEES

MINIMUM FEDERAL PERCENTAGE (85%) (IF CHECKED, ENTER 85% IN BOX TO RIGHT) %
 OR
 FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

NOTE: FUNDS EXPENDED MUST BE USED IF THE FEDERAL PROPORTION IS GREATER THAN 85% IN ANY YEAR.

SEPARATE SEGREGATED FUNDS AND NON-CONNECTED COMMITTEES

FUNDS EXPENDED:
 • ESTIMATED DIRECT CANDIDATE SUPPORT — FEDERAL %
 • ESTIMATED DIRECT CANDIDATE SUPPORT — NON-FEDERAL %
 ADJUSTMENTS TO FUNDS EXPENDED:
 ACTUAL DIRECT CANDIDATE SUPPORT — FEDERAL \$ %
 ACTUAL DIRECT CANDIDATE SUPPORT — NON-FEDERAL \$

STATE AND LOCAL PARTY COMMITTEES

BALLOT COMPOSITION

CHECK ALL OFFICES APPEARING ON THE NEXT GENERAL ELECTION BALLOT:

| | NUMBER OF POINTS |
|---|----------------------|
| 1. PRESIDENT <input type="checkbox"/> (1 POINT) | <input type="text"/> |
| 2. U.S. SENATE <input type="checkbox"/> (1 POINT) | <input type="text"/> |
| 3. U.S. CONGRESS <input type="checkbox"/> (1 POINT) | <input type="text"/> |
| 4. SUBTOTAL — FEDERAL (ADD 1, 2, AND 3) | <input type="text"/> |
| 5. GOVERNOR <input type="checkbox"/> (1 POINT) | <input type="text"/> |
| 6. OTHER STATEWIDE OFFICE(S) <input type="checkbox"/> (1 OR 2 POINTS) | <input type="text"/> |
| 7. STATE SENATE <input type="checkbox"/> (1 POINT) | <input type="text"/> |
| 8. STATE REPRESENTATIVE <input type="checkbox"/> (1 POINT) | <input type="text"/> |
| 9. LOCAL CANDIDATES <input type="checkbox"/> (1 OR 2 POINTS) | <input type="text"/> |
| 10. EXTRA NON-FEDERAL POINT <input type="checkbox"/> (1 POINT) | <input type="text"/> |
| 11. SUBTOTAL — NON-FEDERAL (ADD 5, 6, 7, 8, 9, AND 10) | <input type="text"/> |
| 12. TOTAL POINTS (LINE 4 PLUS LINE 11) | <input type="text"/> |

FEDERAL ALLOCATION = LINE 4 DIVIDED BY LINE 12 %

ALLOCATION RATIOS

NAME OF COMMITTEE
National Association of Retired Federal Employees Political Action
Committee (NARFE-PAC)

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

- I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.
- III. Shared **DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

| | | |
|--|-----------|---------------|
| NAME OF ACTIVITY OR EVENT <p style="text-align: center;">N/A</p> ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED | FEDERAL % | NON-FEDERAL % |
| NAME OF ACTIVITY OR EVENT ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED | FEDERAL % | NON-FEDERAL % |
| NAME OF ACTIVITY OR EVENT ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED | FEDERAL % | NON-FEDERAL % |
| NAME OF ACTIVITY OR EVENT ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED | FEDERAL % | NON-FEDERAL % |
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**TRANSFERS FROM
NON-FEDERAL ACCOUNTS**

| | | | |
|--|---|---|---|
| NAME OF COMMITTEE National Association of Retired Federal Employees Political Action Committee (NARFE-PAC) | | | TOTAL AMOUNT TRANSFERRED |
| NAME OF ACCOUNT | | DATE OF RECEIPT | \$ |
| N/A | | BREAKDOWN OF TRANSFER RECEIVED | |
| | | ADMIN./VOTER DRIVE AMOUNT | DIRECT FUND- RAISING AMOUNT |
| | | | EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT |
| i) | Total Administrative/Voter Drive | | |
| ii) | Direct Fundraising (List Events-Amount for Each) | | |
| | a) _____ | | |
| | b) _____ | | |
| | c) _____ | | |
| | d) _____ | | |
| | e) Total Amount Transferred For Direct Fundraising | | |
| iii) | Exempt Activity/Direct Candidate Support (List Events-Amount For Each) | | |
| | a) _____ | | |
| | b) _____ | | |
| | c) _____ | | |
| | d) _____ | | |
| | e) Total Amount Transferred For Exempt Activity/Direct Candidate Support | | |
| NAME OF ACCOUNT | | DATE OF RECEIPT | \$ |
| | | BREAKDOWN OF TRANSFER RECEIVED | |
| | | ADMIN./VOTER DRIVE AMOUNT | DIRECT FUND- RAISING AMOUNT |
| | | | EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT |
| i) | Total Administrative/Voter Drive | | |
| ii) | Direct Fundraising (List Events-Amount for Each) | | |
| | a) _____ | | |
| | b) _____ | | |
| | c) _____ | | |
| | d) _____ | | |
| | e) Total Amount Transferred For Direct Fundraising | | |
| iii) | Exempt Activity/Direct Candidate Support (List Events-Amount For Each) | | |
| | a) _____ | | |
| | b) _____ | | |
| | c) _____ | | |
| | d) _____ | | |
| | e) Total Amount Transferred For Exempt Activity/Direct Candidate Support | | |
| | | TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED | |
| | | ADMIN./VOTER DRIVE AMOUNT | DIRECT FUND- RAISING AMOUNT |
| | | | EXEMPT ACTIVITY/DIR |
| SUBTOTAL THIS PAGE | | | |
| TOTAL THIS PERIOD | | | |

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 12/1/98 |
| <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 | |
|  PREPARER | 12/3/98 DATE PREPARED |