



Independent Campaign Committee

201 N Wells, Suite 708, Chicago IL 60608

312-236-5105 Fax 312-236-5108

RECEIVED
FEDERAL ELECTION
COMMISSION
OCT 25 8 48 PM '98

October 20, 1998

Federal Election Commission
999 E Street NW
Washington DC 20463

To Whom It May Concern:

Enclosed are our campaign disclosure reports for the 1st, 2nd and 3rd quarters of 1998. Please accept our apologies for the late filings and our assurance that future filings will be done on time. We had no expenditures between September 30 and October 14, so our next filing will be the thirtieth day report due on December 3.

I became Treasurer of this committee in February, 1998 and was not familiar with the all of the requirements so I would like to offer explanations for a few items.

Debts and obligations owed to and by the committee from and to our state PAC resulted from my not knowing that all shared expenditures must be paid out of the federal account. Instead, we paid for some expenses from each account. The state PAC's share of expenses paid by the federal committee are listed on line 9 and on Schedule D as "Non-federal share of expenditure" and the federal PAC's share of expenses paid by the state PAC are listed on line 10 and on Schedule D as "Non-reimbursed shared expenses." I anticipate these obligations to be met by the end of the calendar year.

There is also a discrepancy between the cash-on-hand (\$586.87) shown at the end of the last reporting period, December 31, 1997 and the cash-on-hand (\$1052.93) shown at the beginning of the first reporting period of 1998. I have been unsuccessful in my attempt to find the error, but I believe it dates from 1996 or prior. I am enclosing a copy of our bank statement which shows \$1052.93 to be our balance from December 11, 1996 until January 27, 1998.

We also have changed the name of our committee from "1996 Federal Independent Campaign Committee" to "Federal Independent Campaign Committee." Our new officers are Aviva Miriam Patt, Chairperson and Lee Snyder, Treasurer. These changes took effect February 4, 1998.

Finally, I would like to commend your very helpful staff, especially Deborah Manzano, for answering our many questions and explaining these complicated regulations.

Sincerely yours,

Lee Snyder
Treasurer

LaSalle Bank FSB
 1801 South Kadzie Avenue
 Chicago, Illinois 60629-2499
 (312) 804-7100 Member FDIC
 MONTHLY CLIENT UPDATE

0010002790320

001 2
 FEDERAL INDEPENDENT CAMPAIGN
 201 N WELLS ST STE 100
 CHICAGO IL 60606-1104

STATEMENT DATE
 02/11/98
 PAGE 1
 0010002790320

BASIC CHECKING - CORPORATE: 002250520 ENDING BALANCE: 1,042.93
 STATEMENT PERIOD: 12/12/96 - 02/11/98 TOTAL DEPOSITS: .00
 TOTAL CHECKS/DEBITS/DEBIT: 1,005.00
 ENDING BALANCE: 47.93

CHECKS

DATE	CHECK #	AMOUNT	DATE	CHECK #	AMOUNT
01/27/98	148	1,000.00			

* INDICATES PREVIOUS CHECK(S) NOT PROCESSED THIS STATEMENT PERIOD.

OTHER WITHDRAWALS/DEPOSITS

DATE	DESCRIPTION	WITHDRAWALS	DEPOSITS
02/11/98	SERVICE CHARGE MINIMUM BALANCE FEE	5.00	

DAILY SUMMARY

DATE	WITHDRAWALS	DEPOSITS	BALANCE
12/11/96			1,042.93
01/27/98	1,000.00		42.93
02/11/98	5.00		47.93

IMPORTANT INFORMATION

THINKING ABOUT BUYING A NEW CAR? WITH A HOME EQUITY LOAN FROM LASALLE
 YOU CAN BORROW UP TO 75% OF THE EQUITY IN YOUR HOME TO BUY YOUR DREAM CAR!
 TO APPLY CALL 1-888-897-1000.

**For Other Than An Authorized Committee
(Summary Page)**

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

OCT 25 8 49 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Federal Independent Campaign Committee

ADDRESS (number and street) Check if different than previously reported
201 N Wells St #706

CITY, STATE and ZIP CODE
Chicago IL 60606-1306

2. FEC IDENTIFICATION NUMBER
C00262923

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
- March 20
- April 20
- May 20
- June 20
- July 20
- August 20
- September 20
- October 20
- November 20
- December 20
- January 31

Twelfth day report preceding _____ (Type of Election)

election on _____ in the State of _____

Thirtieth day report following the General Election on _____

_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>1/1/98</u> through <u>3/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 1052.93
(b) Cash on Hand at Beginning of Reporting Period	\$ 1052.93	
(c) Total Receipts (from Line 19)	\$ 4100.00	\$ 4100.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 5152.93	\$ 5152.93
7. Total Disbursements (from Line 30)	\$ 3015.00	\$ 3015.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 2137.93	\$ 2137.93
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 2700.00	For further information contact: Federal Election Commission 660 E Street, NW Washington, DC 20463 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)	\$ 4362.00	

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

Lee Snyder

Signature of Treasurer

Lee Snyder

Date

OCT. 21, 1998

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 <i>Federal Independent Campaign Committee</i>	REPORT COVERING PERIOD	
	FROM <i>1/1/98</i>	TO: <i>3/31/98</i>
	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	0
ii. Unitemized	600	600
iii. Total (add i and ii) >	600	600
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	3500	3500
d. Total Contributions (add a ii, b and c) >	4100	4100
12. Transfers From Affiliated/Other Party Committees	0	0
13. All Loans Received	0	0
14. Loan Repayments Received	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0
18. Transfers from Nonfederal Account for Joint Activity	0	0
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4100	4100
20. Total Federal Receipts (subtract line 18 from line 19) >	4100	4100
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	300	300
ii. Non-Federal Share	2700	2700
b. Other Federal Operating Expenditures	15	15
c. Total Operating Expenditures (add a i, a ii, and b) >	3015	3015
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) ..	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	0	0
b. Political Party Committees	0	0
c. Other Political Committees (such as PACs)	0	0
d. Total Contribution Refunds (add a, b and c) >	0	0
29. Other Disbursements	0	0
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	3015	3015
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	315	315
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	4100	4100
33. Total Contribution Refunds (from line 28d)	0	0
34. Net Contributions (other than loans)(subtract line 33 from 32)	4100	4100
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	315	315
36. Offsets to Operating Expenditures (from line 15)	0	0
37. Net Operating Expenditures (subtract line 36 from 35) >	315	315

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11c

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)

Federal Independent Campaign Committee

<p>A. Full Name, Mailing Address and ZIP Code Schatowsky for Congress 1101 Ridge Ave Evanston IL 60202</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 2500.00</p>	<p>Date (month, day, year) 2/13/98</p>	<p>Amount of Each Receipt this Period 2500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Davis for Congress 5730 W Division St Chicago IL 60651</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 2/23/98</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>3500-</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>3500-</p>

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)
Federal Independent Campaign Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Don Washington 2423 N Albany Chicago IL 60647</i>	<i>Contractual Services</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>1/27/98</i>	<i>1000.00</i>
<i>US Postmaster</i>	<i>Postage</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>2/12/98</i>	<i>1000.00</i>
<i>US Postmaster</i>	<i>Postage</i> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>3/10/98</i>	<i>1000.00</i>
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)	<i>3000.00</i>
TOTAL This Period (last page this line number only)	<i>3000.00</i>

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<i>Federal Independent Campaign Comm</i> A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor <i>Independent Campaign Committee</i> <i>201 N Wells #706</i> <i>Chicago IL 60606</i>	- 0 -	2700.00	- 0 -	2700.00
Nature of Debt (Purpose):	Non-Federal Share of Expenditure			
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)				2700-
2) TOTALS This Period (last page in this line only)				2700-
3) TOTAL OUTSTANDING LOANS from Schedule G (last page only)				- 0 -
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				2700-

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Federal Independent Campaign Committee A. Full Name, Mailing Address and ZIP Code of Debtor or <u>Creditor</u> Independent Campaign Committee 201 N Wells #706 Chicago IL 60606	- 0 -	4362.00	- 0 -	4362.00
Nature of Debt (Purpose):	Non reimbursed shared expenditure			
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)				4362.00
2) TOTALS This Period (last page in this line only)				4362.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				- 0 -
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				4362.00

ALLOCATION RATIOS

NAME OF COMMITTEE
Federal Independent Campaign Committee

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	FEDERAL %	NON-FEDERAL %
ACTIVITY IS: <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT <input checked="" type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: <input type="checkbox"/> NEW <input type="checkbox"/> REVISED <input checked="" type="checkbox"/> SAME AS PREVIOUSLY REPORTED	10	90
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 %
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 %

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 type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input checked="" 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 checked="" type="checkbox"/> Other (Specify): <i>EXPRESS MAIL</i>	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>JEH</i> PREPARER	<i>10-25-98</i> DATE PREPARED