

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

FEDERAL ELECTION
COMMISSION FILE #008

JAN 23 11 23 AM '99

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) The Cassidy Companies, Inc. Political Action Committee (CASCO PAC)		2. FEC IDENTIFICATION NUMBER C00327593
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 700 13th Street, NW, Suite 400		
CITY, STATE and ZIP CODE Washington, DC 20005		
3. <input type="checkbox"/> This committee has qualified as a multi-candidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____
- (b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <u>11/24/98</u> through <u>12/31/98</u>			
8. (a)	Cash on Hand January 1, 19 <u>98</u>		\$ 339.76
(b)	Cash on Hand at Beginning of Reporting Period	\$ 168.37	
(c)	Total Receipts (from Line 19)	\$ 1,380.00	\$ 7,250.00
(d)	Subtotal (add Lines 6(b) and 8(c) for Column A and Lines 6(a) and 8(c) for Column B)	\$ 1,548.37	\$ 7,589.76
7.	Total Disbursements (from Line 30)	\$ 816.57	\$ 6,857.96
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ 731.80	\$ 731.80
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 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)	\$ 0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.			

Type or Print Name of Treasurer Catherine S. Simpson	Date 1/29/99
Signature of Treasurer <i>Catherine S. Simpson</i>	

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 The Cassidy Companies, Inc. PAC (CASCO PAC)	REPORT COVERING PERIOD FROM 11/24/98 TO 12/31/98	
Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	985.00	3,510.00
ii. Unitemized	395.00	3,740.00
iii. Total (add i and ii) >	1,380.00	7,250.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions (add a ii, b and c) >	1,380.00	7,250.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,380.00	7,250.00
20. Total Federal Receipts (subtract line 16 from line 19) >	1,380.00	7,250.00
Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	0.00	0.00
ii. Non-Federal Share	0.00	0.00
b. Other Federal Operating Expenditures	18.00	137.03
c. Total Operating Expenditures (add a i, a ii, and b) >	18.00	137.03
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	798.57	6,720.93
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees	0.00	0.00
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	816.57	6,857.96
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	816.57	6,857.96
Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	1,380.00	7,250.00
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from line 32)	1,380.00	7,250.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	18.00	137.03
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures (subtract line 36 from line 35) >	18.00	137.03

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11a(1)

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)

The Cassidy Companies, Inc. Political Action Committee (CASCO PAC)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harry Barsh 200 N. Brandywine Street Arlington, VA 22207	Cassidy & Associates	11/30/98 payroll deduction	\$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 310.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harry Barsh (same as above)	(same as above)	12/31/98 payroll deduction	\$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 340.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Doug Bobbitt 24480 S. Walter Reed Drive Arlington, VA 22206	Cassidy & Associates	12/2/98	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carl F. Godfrey 9386 Mount Vernon Court Alexandria, VA 22309	Cassidy & Associates	11/30/98 payroll deduction	\$ 25.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 375.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carl F. Godfrey (same as above)	(same as above)	12/31/98 payroll deduction	\$ 25.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 400.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lawrence Grossman 700 13th Street, NW, #400 Washington, DC 20005	Cassidy & Associates	11/30/98 payroll deduction	\$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 210.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lawrence Grossman (same as above)	(same as above)	12/31/98 payroll deduction	\$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 240.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4
FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

The Cassidy Companies, Inc. Political Action Committee (CASCO PAC)

A. Full Name, Mailing Address and ZIP Code Jeffrey Lawrence 700 13th Street, NW, #400 Washington, DC 20005	Name of Employer Cassidy & Associates Occupation Consultant	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 35.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00		
B. Full Name, Mailing Address and ZIP Code Dale Leibach 700 13th Street, NW, #1000 Washington, DC 20005	Name of Employer Powell Tate Occupation Managing Director	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00		
C. Full Name, Mailing Address and ZIP Code Daniel J. McNamara 811 Milestone Drive Silver Spring, MD 20904	Name of Employer Cassidy & Associates Occupation Consultant	Date (month, day, year) 11/30/98 payroll deduction	Amount of Each Receipt this Period \$ 25.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 425.00		
D. Full Name, Mailing Address and ZIP Code Daniel J. McNamara (same as above)	Name of Employer (same as above) Occupation	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 25.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 450.00		
E. Full Name, Mailing Address and ZIP Code Cliff Northup 700 13th Street, NW, #350 Washington, DC 20005	Name of Employer Boland & Madigan Occupation Consultant	Date (month, day, year) 11/30/98 payroll deduction	Amount of Each Receipt this Period \$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 210.00		
F. Full Name, Mailing Address and ZIP Code Cliff Northup (same as above)	Name of Employer (same as above) Occupation	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		
G. Full Name, Mailing Address and ZIP Code Gabor Rozsa 700 13th Street, NW, #400 Washington, DC 20005	Name of Employer Cassidy & Associates Occupation Consultant	Date (month, day, year) 12/4/98	Amount of Each Receipt this Period \$ 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4

FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

The Cassidy Companies, Inc. Political Action Committee (CASCO PAC)

A. Full Name, Mailing Address and ZIP Code Barbara Sutton 4689 Lawton Way, #202 Alexandria, VA 22311		Name of Employer Cassidy & Associates	Date (month, day, year) 11/30/98 payroll deduction	Amount of Each Receipt this Period \$ 50.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant	Aggregate Year-to-Date > \$ 450.00	
B. Full Name, Mailing Address and ZIP Code Barbara Sutton (same as above)		Name of Employer (same as above)	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 50.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 500.00	
C. Full Name, Mailing Address and ZIP Code Daniel Tate, Jr. 12761 North Wayne Street, #1225 Arlington, VA 22205		Name of Employer Cassidy & Associates	Date (month, day, year) 11/30/98 payroll deduction	Amount of Each Receipt this Period \$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant	Aggregate Year-to-Date > \$ 310.00	
D. Full Name, Mailing Address and ZIP Code Daniel Tate, Jr. (same as above)		Name of Employer (same as above)	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 30.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 340.00	
E. Full Name, Mailing Address and ZIP Code Daniel Tate, Sr. 700 13th Street, NW, #400 Washington, DC 20005		Name of Employer Cassidy & Associates	Date (month, day, year) 11/30/98 payroll deduction	Amount of Each Receipt this Period \$ 50.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant	Aggregate Year-to-Date > \$ 350.00	
F. Full Name, Mailing Address and ZIP Code Daniel Tate, Sr. (same as above)		Name of Employer Cassidy & Associates	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 50.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-to-Date > \$ 400.00	
G. Full Name, Mailing Address and ZIP Code Gerald Warburg 700 13th Street, NW, #400 Washington, DC 20005		Name of Employer Cassidy & Associates	Date (month, day, year) 11/30/98 payroll deduction	Amount of Each Receipt this Period \$ 40.00 (monthly)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Consultant	Aggregate Year-to-Date > \$ 280.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4

FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

The Cassidy Companies, Inc. Political Action Committee (CASCO PAC)

A. Full Name, Mailing Address and ZIP Code Gerald Warburg (same as previous page) Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer (same as previous page) Occupation Aggregate Year-to-Date > \$ 320.00	Date (month, day, year) 12/31/98 payroll deduction	Amount of Each Receipt this Period \$ 40.00 (monthly)
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$0985.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

The Cassidy Companies, Inc. Political Action Committee (CASCO PAC)

A. Full Name, Mailing Address and ZIP Code First Union National Bank P.O. Box 13327 Roanoke, VA 24040	Purpose of Disbursement bank service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 11/30/98	Amount of Each Disbursement This Period \$ 9.00
B. Full Name, Mailing Address and ZIP Code First Union National Bank (same as above)	Purpose of Disbursement bank service fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/31/98	Amount of Each Disbursement This Period \$ 9.00
C. 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
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$ 18.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

The Cassidy Companies, Inc. Political Action Committee (CASCO PAC)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Cassidy Companies, Inc. 700 13th Street, NW, #400 Washington, DC 20005	catering costs (CT) Sam Gejdenson (House) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/21/98	\$ 195.58 (in-kind)
The Cassidy Companies, Inc. (same as above)	catering costs (TX) Martin Frost (House) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/21/98	\$ 195.29 (in-kind)
The Cassidy Companies, Inc. (same as above)	catering costs (WI) Tom Petri (House) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/21/98	\$ 194.70 (in-kind)
The Cassidy Companies, Inc. (same as above)	catering costs (MD): Steny Hoyer (House) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/98	\$ 213.00 (in-kind)
	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
	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
	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
	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
	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$ 798.57

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 1/29/99
<input type="checkbox"/> First Class Mail	POSTMARKED
<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	
 <i>Am</i> PREPARER	 1/29/99 DATE PREPARED