

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 19 12 32 PM '99

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Fund for a Responsible Future		2. FEC IDENTIFICATION NUMBER C00301887
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported P.O. Box 529	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)	
CITY, STATE and ZIP CODE Washington, DC 20044-0629		

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:

- | | | |
|--|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input checked="" type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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 _____

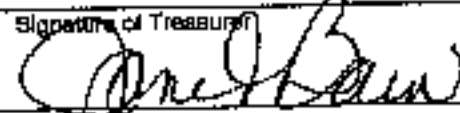
(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>03/01/99</u> through <u>03/31/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>			\$ 48,129.71
(b) Cash on Hand at Beginning of Reporting Period		\$ 81,530.82	
(c) Total Receipts (from Line 19)		\$ 30,085.25	\$ 73,205.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(e) and 6(c) for Column B)		\$ 111,626.07	\$ 121,334.71
7. Total Disbursements (from Line 30)		\$ 5,988.23	\$ 16,694.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 105,639.84	\$ 105,639.84
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 889 E Street, NW Washington, DC 20463 Toll Free 800-424-6630 Local 202-219-9430
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
Janel Bain

Signature of Treasurer



Date

4-15-99

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

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FEC FORM 3X

(revised 8/90)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE Fund for a Responsible Future	REPORT COVERING PERIOD		
	FROM	TO	
	03/01/89	03/31/99	
I. 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)	2,500.00	9,000.00	11(a)(i)
ii. Unitemized	0.00	0.00	11(a)(ii)
iii. Total (add i and ii) >	2,500.00	9,000.00	11(a)(iii)
b. Political Party Committees			
.....	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)			
.....	27,500.00	84,000.00	11(c)
d. Total Contributions (add a iii, b and c) >	30,000.00	73,000.00	11(d)
12. Transfers From Affiliated/Other Party Committees			
.....	0.00	0.00	12
13. All Loans Received			
.....	0.00	0.00	13
14. Loan Repayments Received			
.....	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
.....	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
.....	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)			
.....	96.25	205.00	17
18. Transfers from Nonfederal Account for Joint Activity			
.....	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >			
.....	30,096.25	73,205.00	19
20. Total Federal Receipts (subtract line 18 from line 19) >			
.....	30,096.25	73,205.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	6,986.23	14,694.87	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	6,986.23	14,694.87	21(c)
22. Transfers to Affiliated/Other Party Committees			
.....	0.00	1,000.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees			
.....	0.00	0.00	23
24. Independent Expenditures (use Schedule E)			
.....	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
.....	0.00	0.00	25
26. Loan Repayments Made			
.....	0.00	0.00	26
27. Loans Made			
.....	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
.....	0.00	0.00	28(a)
b. Political Party Committees			
.....	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)			
.....	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements			
.....	5,986.23	15,694.87	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
.....	5,986.23	15,694.87	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >			
.....	5,986.23	15,694.87	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			
.....	30,000.00	73,000.00	32
33. Total Contribution Refunds (from line 28d)			
.....	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)			
.....	30,000.00	73,000.00	34
35. Total Federal Operating Expenditures (add 21-a i and 21 b) >			
.....	5,986.23	14,694.87	35
36. Offsets to Operating Expenditures (from line 15)			
.....	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >			
.....	5,986.23	14,694.87	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **2**
FOR LINE NUMBER **11 c**

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)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code Council of Insurance Agents & Brokers 701 Pennsylvania Ave NW No 750 Washington, DC 20004-2608	Name of Employer Occupation	Date (month, day, year) 03/02/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Edison International Companies Federal 2244 Walnut Grove Ave Rosemead, CA 91770	Name of Employer Occupation	Date (month, day, year) 03/02/99	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,500.00	
C. Full Name, Mailing Address and ZIP Code Akin, Gump, Strauss, Hauer & Feld LLP 1333 New Hampshire Ave NW Suite 400 Washington, DC 20036	Name of Employer Occupation	Date (month, day, year) 03/12/99	Amount of Each Receipt this Period 1,000.00 (In-Kind)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Interstate Natural Gas Assn. of America 555 13th Street, NW No 300-W Washington, DC 20004	Name of Employer Occupation	Date (month, day, year) 03/16/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code Warner-Lambert Co. PAC 201 Tabor Road Morris Plains, NJ 07850	Name of Employer Occupation	Date (month, day, year) 03/16/99	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,500.00	
F. Full Name, Mailing Address and ZIP Code Worldcom, Inc. Federal PAC 515 E. Amite Street Jackson, MS 39201-2702	Name of Employer Occupation	Date (month, day, year) 03/16/99	Amount of Each Receipt this Period 2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 2,500.00	
G. Full Name, Mailing Address and ZIP Code First Health Group Corp. PAC (FHGPAC) 3200 Highland Ave Downers Grove, IL 60515	Name of Employer Occupation	Date (month, day, year) 03/16/99	Amount of Each Receipt this Period 1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,500.00	

SUBTOTAL of Receipts This Page (optional)

11,500.00

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 2
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code Microsoft Corporation Political Action 16011 NE 36th Way Box 97017 Redmond, WA 98073-9717	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		03/16/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 2,500.00	
B. Full Name, Mailing Address and ZIP Code New York Stock Exchange, Inc. PAC 801 Pennsylvania Ave NW Suite 630 Washington, DC 20004	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		03/16/99	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 1,500.00	
C. Full Name, Mailing Address and ZIP Code Morgan Stanley Dean Witter & Co PAC 2 World Trade Center 45th Floor New York, NY 10048	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		03/16/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 2,500.00	
D. Full Name, Mailing Address and ZIP Code Columbia Energy Group PAC 13880 Dulles Corner Lane Herndon, VA 20171	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		03/16/99	3,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 3,500.00	
E. Full Name, Mailing Address and ZIP Code Brown & Williamson Tobacco Corp. P.O. Box 35090 Louisville, KY 40232	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		03/16/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 2,500.00	
F. Full Name, Mailing Address and ZIP Code Holland & Knight Committee for 2100 Pennsylvania Ave NW Ste 400 Washington, DC 20037	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		03/16/99	2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code MCN Energy Group Inc. Federal PAC 500 Griswold Street Detroit, MI 48226-3701	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		03/30/99	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date > \$ 1,500.00	

SUBTOTAL of Receipts This Page (optional)	16,000.00
TOTAL This Period (last page this line number only)	27,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in Full)
Fund for a Responsible Future

<p>A. Full Name, Mailing Address and ZIP Code Patrick Williams 4213 Everett Street Kensington, MD 20895</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Williams and Associates</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 2,500.00</p>	<p>Date (month, day, year) 03/16/99</p>	<p>Amount of Each Receipt this Period 2,500.00</p>
<p>B. 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>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>2,500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>2,500.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
Fund for a Responsible Future

<p>A. Full Name, Mailing Address and ZIP Code Citibank, F.S.B. P.O. Box 18967 Washington, DC 20036-097</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 > \$ 205.00</p>	<p>Date (month, day, year) 03/31/89</p>	<p>Amount of Each Receipt this Period 95.25</p>
<p>B. 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>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>95.25</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>95.25</p>

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)
Fund for a Responsible Future

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Internal Revenue Service Ogden, UT 84201	1120-POL, 1998 taxes due Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	705.00
The Levy Restaurants At MCI Center 601 F Street NW Washington, DC 20001	Catering for MCI Center Event 2/2/99 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/08/99	724.34
Janet Bain Company 3001 Park Center Drive Alexandria, VA 22302	Monthly retainer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/08/99	2,000.00
David's White House Restaurant 3560 Courthouse Road Providence Forge, VA 23140	Payment for reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/12/99	1,603.75
Akin, Gump, Strauss, Hauer & Feld Civic Action Com 1333 New Hampshire Ave, NW Suite 400 Washington, DC 20038	In-Kind payment to Jefferson Hotel for 2/25 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	03/12/99	1,000.00
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)	5,933.09
TOTAL This Period (last page this line number only)	5,933.09

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 <i>4-15-99</i>
<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>[Signature]</i> PREPARER	<i>4-19-99</i> DATE PREPARED