REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): House Majority Fund

ADDRESS (number and street) ☐ Check if different than previously reported: 12329 Needlepine Terrace

CITY, STATE and ZIP CODE: Silver Spring, MD 20904

RECEIVED FEDERAL ELECTION COMMISSION 1998 JUL 12 PM 1:38

2. FEC IDENTIFICATION NUMBER: C00321596

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 _____ 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 6-1-98 through 6-30-98		
6. (a) Cash on Hand January 1, 1998		$ 662.38
(b) Cash on Hand at Beginning of Reporting Period	$ 1593.34	
(c) Total Receipts (from Line 19)	$ —	$ 1000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 1593.34	$ 1662.38
7. Total Disbursements (from Line 30)	$ 10.00	$ 79.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 1583.34	$ 1583.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ —	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ —	

For further information contact: Federal Election Commission, 999 E Street, NW, Washington, DC 20463, Toll Free 800-424-9530, Local 202-219-3420

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: Butler Derrick

Signature of Treasurer: [signature] Date: 7-8-98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X (revised 9/98)