REPORT OF RECEIPTS AND DISBURSEMENTS

For Other than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 31 8 50 AM '99

1. NAME OF COMMITTEE (in full)
THE CAPITOL COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported.
257 EAST 200 SOUTH

CITY, STATE and ZIP CODE
SALT LAKE CITY, UT 84111

2. FEC IDENTIFICATION NUMBER
C00235752

3. ☐ This committee 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

☐ 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 11/24/98 through 12/31/98		
6. (a) Cash on Hand January 1, 19 98		$88818.44
(b) Cash on Hand at Beginning of Reporting Period	$36509.50	
(c) Total Receipts (from Line 19)	$2000.00	$90850.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$38509.50	$179668.44
7. Total Disbursements (from Line 30)	$8557.31	$149716.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$29952.19	$29952.19
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)	$243.12	

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
STANLEY R. DE WAAL ASSISTANT TREASURER

Signature of Treasurer
Stanley DeWaal

Date 1/31/99

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

FEC FORM 3X
(Revised 9/99)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE
THE CAPITOL COMMITTEE

REPORT COVERING PERIOD
FROM: 11/24/98 TO: 12/31/98

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (Use Schedule A)	$1000.00	$40650.00	11(a)(i)
ii. Unitemized	$0.00	$200.00	11(a)(ii)
iii. Total (add i and ii)	$1000.00	$40850.00	11(a)(iii)
b. Political Party Committees	$0.00	$0.00	11(b)
c. Other Political Committees (such as PACs)	$1000.00	$50000.00	11(c)
d. Total Contributions (add a iii, b and c)	$2000.00	$90850.00	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.)	$0.00	$0.00	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)	$2000.00	$90850.00	19
20. Total Federal Receipts (subtract line 18 from line 19)	$2000.00	$90850.00	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	$8557.31	$50263.25	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)	$8557.31	$50263.25	21(c)
22. Transfers to Affiliated/Other Party Committees	$0.00	$0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	$0.00	$99453.00	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. Individuals/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	$0.00	$1000.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	$8557.31	$149716.25	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	$8557.31	$149716.25	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	$2000.00	$90850.00	32
33. Total Contribution Refunds (from line 28d)	$0.00	$0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	$2000.00	$90850.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	$8557.31	$50263.25	35
36. Offsets to Operating Expenditures (from line 15)	$0.00	$0.00	36
37. Net Operating Expenditures (subtract line 36 from 35)	$8557.31	$50263.25	37

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)

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 CAPITOL COMMITTEE

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD L. PLESSER 3736 CUMBERLAND ST. 5005 LINNEAN AVENUE N.W. WASHINGTON, DC 20008-	PIPER & MAYBURY Occupation: LAWYER	12/14/98	$1000.00
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->	$1000.00	
B. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
C. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
D. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
E. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
F. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		
G. Full Name, Mailing Address and Zip Code	Name of Employer Occupation	/ /	
Receipt For: [ ] Primary [ ] General [ ] Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	$1000.00
TOTAL This Period (last page this line number only)	$1000.00

SCHEDULE A ITEMIZED RECEIPTS

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

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)
THE CAPITOL COMMITTEE

A. Full Name, Mailing Address and Zip Code TACO PAC TACO BELL FRANCHISES 6405 METCALF AVE SUITE 503 SHAWNEE MISSION, KS 66202- Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> $1000.00	Date (month, day, year) 11/24/98	Amount of Each Receipt this Period $1000.00
B. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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)	$1000.00
TOTAL This Period (last page this line number only)	$1000.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 21b

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 CAPITOL COMMITTEE

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. BECKY HAMMILL & COMPANY 1433 FONHALL ROAD, N.W. WASHINGTON, DC 20007-	Catering for fundraiser Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/21/98	$1704.16
B. CHARLES CANFIELD 1950 SOUTH 200 WEST #26 BOUNTIFUL, UT 84010-	Net salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/98	$461.75
C. CHARLES CANFIELD 1950 SOUTH 200 WEST #26 BOUNTIFUL, UT 84010-	Net salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/21/98	$461.75
D. DE WAAL, KEELER & CO. PC 257 EAST 200 SOUTH #950 SALT LAKE CITY, UT 84111-	Accounting fees & office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/98	$1196.86
E. DE WAAL, KEELER & CO. PC 257 EAST 200 SOUTH #950 SALT LAKE CITY, UT 84111-	Accounting fees & office expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/21/98	$709.21
F. CANDACE DIBBLEE 9115 WESTERHOLME WAY VIENNA, VA 22182-	Net salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/98	$1031.01
G. CANDACE DIBBLEE 9115 WESTERHOLME WAY VIENNA, VA 22182-	Net salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/21/98	$1031.01

SUBTOTAL of Disbursements This Page (optional)	$6595.75
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

FOR LINE NUMBER 21b

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 CAPITOL COMMITTEE

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WENDY HIGGINBOTHAM 2022 WILLOW BRANCH COURT VIENNA, VA 22181-	Net salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/98	$535.47
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WENDY HIGGINBOTHAM 2022 WILLOW BRANCH COURT VIENNA, VA 22181-	Net salary Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/21/98	$535.47
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WELLS FARGO BANK 300 EAST 200 SOUTH SALT LAKE CITY, UT 84111-	941 tax deposit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	11/24/98	$445.32
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WELLS FARGO BANK 300 EAST 200 SOUTH SALT LAKE CITY, UT 84111-	941 tax deposit Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	12/21/98	$445.30
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	/ /	

SUBTOTAL of Disbursements This Page (optional)	$1961.56
TOTAL This Period (last page this line number only)	$8557.31

LINE NUMBER 10

(Use separate schedules for each numbered line)

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full) THE CAPITOL COMMITTEE	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Full Name, Mailing Address and Zip Code WELLS FARGO BANK 300 EAST 200 SOUTH SALT LAKE CITY, UT 84111-		$26.40		$26.40
Nature of Debt (Purpose) 940 taxes				
Full Name, Mailing Address and Zip Code UTAH U.C. FUND JOB SERVICE 140 EAST 300 SOUTH SALT LAKE CITY, UT 84145-0233		$3.00		$3.00
Nature of Debt (Purpose) Unemployement insurance				
Full Name, Mailing Address and Zip Code VIRGINIA DEPT. OF TAXATION P.O. BOX 27264 RICHMOND, VA 23261-7264		$168.72		$168.72
Nature of Debt (Purpose) State payroll taxes				
Full Name, Mailing Address and Zip Code VIRGINIA EMPLOYMENT COMMISSION PO BOX 27483 RICHMOND, VA 23261-7483		$45.00		$45.00
Nature of Debt (Purpose) Unemployement insurance				

1) SUBTOTAL This Period This Page (optional)	
2) TOTAL This Period (last page this line number only)	$243.12
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)	$243.12

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.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 1/28/99
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

KRS
PREPARER

1/31/99
DATE PREPARED

(4/98)