

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION

1. NAME OF COMMITTEE (In full) Sabo For Congress Volunteer Committee		2. FEC IDENTIFICATION NUMBER JG
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 2425 E. Franklin #301		074306
CITY, STATE and ZIP CODE Minneapolis MN 55406	STATE/DISTRICT MN/05	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding election on _____ in the State of _____
<input checked="" type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	<input type="checkbox"/> Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period <u>4/01/98</u> through <u>6/30/98</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	\$126,758.00	\$149,415.00
(b) Total Contribution Refunds (from Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6b from 6a).	\$126,758.00	\$149,415.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$64,125.24	\$111,594.96
(b) Total Offsets to Operating Expenditures (from Line 14)	\$7.12	\$7.12
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$64,118.12	\$111,587.84
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$270,386.38	
9. Debts and Obligations Owed to the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
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

Doris Caranicas

Signature of Treasurer

Doris Caranicas

Date

7-15-98

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

**DETAILED SUMMARY PAGE
of Receipts and Disbursements**

(Page 2, FEC FORM 3)

Name of Committee (in full) Sabo For Congress Volunteer Committee 074306	Report Covering the Period: From: 4/01/98 To: 6/30/98	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	28,619.91	
(ii) Unitemized	30,443.50	
(iii) Total of contributions from individuals	59,063.41	77,220.41
(b) Political Party Committee	371.23	371.23
(c) Other Political Committees (such as PACs)	67,323.36	71,823.36
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (add 11(a)(iii), (b), (c) and (d)).	126,758.00	149,415.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	7.12	7.12
15. OTHER RECEIPTS (Dividends, Interest, etc.)	2,672.03	4,497.57
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	129,437.15	153,919.69
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	64,125.24	111,594.96
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a), (b) and (c)).	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/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 CONTRIBUTIONS REFUNDS (add 20(a), (b) and (c)).	0.00	0.00
21. OTHER DISBURSEMENTS.	1,000.00	2,000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	65,125.24	113,594.96
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.		\$206,074.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16).		\$129,437.15
25. SUBTOTAL (add Line 23 and Line 24)		\$335,511.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$65,125.24
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 and 25).		\$270,386.38

SCHEDULE A

ITEMIZED RECEIPTS

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

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

Contributions from Individuals

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)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Thelma M Albay 7105 NE Riverview Terr Fridley MN 55432	Metro Anes. Network	5/25/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Anesthesiologist	Aggregate Year-to-Date > \$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael S Allen 605 Middle Ln Saint Paul MN 55123	SGL/Cray Research	5/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wendell R Anderson 720 Baker Building Minneapolis MN 55402	Larkin Hoffman Daly	6/18/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wendell R Anderson 720 Baker Building Minneapolis MN 55402	Larkin Hoffman Daly	6/18/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry P Barnett 6123 Lundy Pl Burke VA 22015	Aviation Management Ass	5/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$250.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William N Bartolone 2811 F So. Woodrow St Arlington VA 22206	Silicon Graphics/Cray Research	6/18/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director Gov't Rel	Aggregate Year-to-Date > \$500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kjell Bergh 1153 Harbor Dr Delray Beach FL 33483	Bergh International Holdings	5/09/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business Executive	Aggregate Year-to-Date > \$250.00	

SUBTOTAL of Receipts This Page (optional) \$2,500.00

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 11
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Brimsek 2508 Fallmere Ct Falls Church VA 22043 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Millenholz Brimsek & Beir Occupation: Attorney Aggregate Year-to-Date > \$500.00	5/26/98	\$500.00
Frank W Campbell 3413 Chantarene Dr Pensacola FL 32507 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	ICI Occupation: Consultant Aggregate Year-to-Date > \$500.00	5/26/98	\$500.00
Loretta P Cassidy 700 NW 13th St Apt #400 Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Housewife Occupation: Housewife Aggregate Year-to-Date > \$500.00	6/29/98	\$500.00
Michael Ciresi 1247 Culligan Ln Mendota Heights MN 55118 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Robins Kaplan Miller & Resi Occupation: Attorney Aggregate Year-to-Date > \$500.00	5/06/98	\$500.00
William M Cloherty 1 Harvest Rd Wakefield MA 01880 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Consultant Aggregate Year-to-Date > \$500.00	6/29/98	\$500.00
John Cowles Jr 247 S 10th Ave Minneapolis MN 55415 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	retired Occupation: retired Aggregate Year-to-Date > \$500.00	5/09/98	\$500.00
Edwin L Crosby 2428 W 24th St Minneapolis MN 55405 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Jefferson Center Occupation: Political Scientist Aggregate Year-to-Date > \$550.00	5/08/98 6/29/98	\$250.00 \$300.00

SUBTOTAL of Receipts This Page (optional)	\$3,550.00
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 3 OF 11
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce B Dayton 900 Old Long Lake Rd Wayzata MN 55391- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Occupation Aggregate Year-to-Date > \$500.00	5/26/98	\$500.00
Julia W Dayton 1719 W Franklin Ave Minneapolis MN 55405 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Occupation Aggregate Year-to-Date > \$1,000.00	5/09/98	\$1000.00
Kenneth N Dayton 730 S 2ND Ave Minneapolis MN 55402 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Oakleaf Associates Retired Occupation Aggregate Year-to-Date > \$250.00	5/09/98	\$250.00
Jon K Dickerson 19 S First St Apt B2102 Minneapolis MN 55401 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Diversified Equities Co Developer Occupation Aggregate Year-to-Date > \$250.00	5/26/98	\$250.00
John F Eisberg 2542 Burnham Rd Minneapolis MN 55415 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Robins Kaplan Miller & resi Occupation Aggregate Year-to-Date > \$250.00	6/18/98	\$250.00
John H Faricy Jr. 505 Selby Ave Apt 7 Saint Paul MN 55102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-employed Lawyer Occupation Aggregate Year-to-Date > \$250.00	6/18/98	\$250.00
Richard Feerick 13995 St Andrew Dr Eden Prairie MN 55346 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	R.M. Feerick And Assoc. Consultant Occupation Aggregate Year-to-Date > \$250.00	5/26/98	\$250.00

SUBTOTAL of Receipts This Page (optional) \$2,750.00

TOTAL THIS PERIOD (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce A Finzen 242 Edgewood Ln West Saint Paul MN 55118	Robins Kaplan Miller & Resi Occupation Attorney	6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
Peter Franchot 700 NW 13Th St Suite 950 Washington DC 20005	Cassidy & Associates Occupation Attorney	6/29/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
Sara G Garland 137 NE 13Th St Washington DC 20002	Garland Associates Occupation Consultant	5/09/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
Robert L Gauthier 2526 S Thomas Ave Minneapolis MN 55405	Self Occupation M.D.	6/18/98	\$204.36
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$204.36		in-kind
Marilyn Gorlin 4600 Chatelain Ter Golden Valley MN 55422	Self Occupation Fundraiser	6/18/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
Albert J Hofstede 2220 St. Anthony Pky Minneapolis MN 55418	North State Advisors Occupation Consultant	5/06/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
John H.F. Hoving 1762 NW Church St Washington DC 20036	John H.F. Hoving Associates Occupation Consultant	5/26/98	\$500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		

SUBTOTAL of Receipts This Page (optional) \$2,454.36

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 5 OF 11
FOR LINE NUMBER 11(a){i}

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stanley S Hubbard 3415 University Ave St. Paul MN 55114	Hubbard Broadcasting, I Occupation: Broadcast Executive	5/08/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
Stanley E Hubbard II 1495 S Riviera Ave Lakeland MN 55043	Hubbard Broadcasting, I Occupation: Broadcasting	5/09/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
James A Johnson 3900 NW Wisconsin Ave Washington DC 20016	Fannie Mae Occupation: Chair & CEO	5/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
Natalie Johnston 400 Groveland Ave Apt #508 Minneapolis MN 55403	Occupation: Retired	5/09/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
Sharon L Judge 4109 Sleepy Hollow Rd Annandale VA 22003	Occupation: Homemaker	5/26/98	\$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$300.00		
Michele Kelm-Helgen 2865 Timberview Trl Chaska MN 55318	North State Advisors Occupation: Consultant	5/06/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
Thomas A Kelm 43 SE Main St Suite BH500 Minneapolis MN 55414	North State Advisors Occupation: Consultant	5/06/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		

SUBTOTAL of Receipts This Page (optional) \$2,800.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 6 OF 11
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ray Kogovsek 700 Broadway Suite 929 Denver CO 80203	Kogovsek & Associates	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant		Aggregate Year-to-Date > \$500.00
Andy Kozak 3104 E Minnehaha Pky Minneapolis MN 55406	North State Advisors	5/06/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant		Aggregate Year-to-Date > \$250.00
Edith Ladd 1 NW Massachusetts Ave Suite #8 Washington DC 20001		5/05/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		Aggregate Year-to-Date > \$250.00
Martin R Lueck 2956 Northview Rd Minnetonka MN 55361	Robins Kaplan Miller & resi	6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		Aggregate Year-to-Date > \$250.00
Marie McNamara 811 Milestone Dr Silver Springs MD 20904	Self	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker		Aggregate Year-to-Date > \$500.00
Blaine Miller 3145 E Calhoun Pky Minneapolis MN 55408	Self	6/18/98	\$204.36
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation M.D.		Aggregate Year-to-Date > \$204.36
William W Miller 106 Dulany Pl Falls Church VA 22046	American Public Transit secc.	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		Aggregate Year-to-Date > \$500.00

SUMTOTAL of Receipts This Page (optional) \$2,454.36

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 7 OF 11

FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vincent J Moccio 5305 S Aldrich Ave Minneapolis MN 55419	Robins Kaplan Miller & Resi Attorney	6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Munnich Jr. 1149 Cedar View Dr Minneapolis MN 55405	University Of Minnesota Sr. Fellow	5/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul C Muzio 1917 S Irving Ave Minneapolis MN 55403	Mn Supercomputer Center Manager	6/19/98	\$800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$800.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul C Muzio 1917 S Irving Ave Minneapolis MN 55403	Mn Supercomputer Center Manager	6/19/98	\$200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Craig D Norman 5980 Scenic Pl Shoreview MN 55126	Mn Supercomputer Attorney	6/19/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kathleen A O'Brien 4848 Northrop Dr Minneapolis MN 55406	City Of Minneapolis Administrator	6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel A O'Fallon 1089 Jessie St Saint Paul MN 55101	Robins Kaplan Miller & Resi Attorney	6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		

SUBTOTAL of Receipts This Page (optional) \$3,000.00

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 8 OF 11
FOR LINE NUMBER 11(a)(i)

Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David E Oslund 41 E Minnehaha Pky Minneapolis MN 55419	Robins Kaplan Miller & rees Attorney	6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gerald Rauenhorst P.O. Box 59110 Minneapolis MN 55459	Opus Executive	5/06/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jean Roberts 714 SE 3RD Ave Minneapolis MN 55414	Retired	6/18/98	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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
Barbara Rohde 2700 NW Virginia Ave Apt 1405 Washington DC 20037	Univ. Of Minn Research Fellow	5/26/98	\$500.00
Receipt For: <input checked="" 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	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Harold Roitenberg 3512 W Calhoun Blvd Minnetonka MN 55416	Roitenberg Investments President	5/09/98	\$1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred B Rooney 700 NW Thirteenth St Apt 400 Washington DC 20005	Cassidy & Associates Consultant	6/29/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James P Rowan 700 NW Thirteenth St Suite 400 Washington DC 20005	Cassidy & Associates Consultant	6/29/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250.00		

SUBTOTAL of Receipts This Page (optional)	\$2,850.00
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

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FOR LINE NUMBER 11(a)(1)

Contributions from Individuals

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 committees.

NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marty Russo 700 NW 13th St Apt 4th fl Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Cassidy & Associates Occupation Consultant Aggregate Year-to-Date > \$250.00	6/29/98	\$250.00
2. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank E Schochet 5610 Laurel Ave Apt 313 Golden Valley MN 55416 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date > \$250.00	5/08/98	\$250.00
3. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Schoener 4033 S Dupont Ave Minneapolis MN 55409 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Walk-In Counseling Ctr Occupation Psychologist Aggregate Year-to-Date > \$500.00	5/08/98	\$500.00
4. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M Sell 6070 Stinson Blvd Fridley MN 55432 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Cray Research Occupation Manager Aggregate Year-to-Date > \$750.00	6/19/98	\$750.00
5. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M Sell 6070 Stinson Blvd Fridley MN 55432 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Cray Research Occupation Manager Aggregate Year-to-Date > \$1,000.00	6/19/98	\$250.00
6. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James J Sieben 9349 Cortland Ct Woodbury MN 55125 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation Attorney Aggregate Year-to-Date > \$100.00	5/25/98	\$100.00
7. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James J Sieben 9349 Cortland Ct Woodbury MN 55125 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation Attorney Aggregate Year-to-Date > \$261.19	6/18/98	\$161.19 in-kind
SUBTOTAL of Receipts This Page (optional)			\$2,261.19
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

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Contributions from Individuals

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NAME OF COMMITTEE (in full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William R Sieben 5120 IDS Center Minneapolis MN 55402 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Scheibel, Goetz, Siebe & Maska Occupation Attorney Aggregate Year-to-Date > \$250.00	5/08/98	\$250.00
Lawrence M Small 2804 NW Woodland Dr Washington DC 20008 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Fannie Mae Occupation Administrator Aggregate Year-to-Date > \$250.00	5/26/98	\$250.00
David Stanley 3424 S Zenith Ave Minneapolis MN 55416- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date > \$500.00	5/08/98	\$500.00
Dan C Tate 700 NW 13Th St Suite 400 Washington DC 20037 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Cassidy & Associates Occupation Leg Consultant Aggregate Year-to-Date > \$250.00	6/29/98	\$250.00
Townsend A Van Fleet 499 S Capitol St Sw Suite #520 Washington DC 20003 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Van Fleet-Meredith Group Occupation Consultant Aggregate Year-to-Date > \$500.00	5/26/98	\$500.00
Vincent M Versage 700 NW 13Th St Suite 400 Washington DC 20037 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Cassidy & Associates Occupation Leg. Consultant Aggregate Year-to-Date > \$500.00	6/29/98	\$500.00
Andrea M Walsh 7212 Fleetwood Dr Edina MN 55439 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Health Partners, Inc. Occupation Sr VP Public Affairs Aggregate Year-to-Date > \$350.00	5/26/98	\$250.00

SUBTOTAL of Receipts This Page (optional) \$2,500.00

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

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Contributions from Individuals

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Howard Weiner 5224 Schaefer Rd Edina MN 55436-	Shared Ventures, Inc.	5/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert A Williams 830 Patton Rd New Brighton MN 55112	Mn Supertcomputer Cente	6/19/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Exec. V.P.	Aggregate Year-to-Date > \$1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Elayne Wolfenson 3633 S Abbott Ave Minneapolis MN 55410		6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date > \$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	\$1,500.00
TOTAL This Period (last page this line number only)	\$28,619.91

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11(b)

Contributions from Party Committees

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)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Democratic Congressional Campaign Committee 430 S Capitol St Washington DC 20003	Democratic Congressional Campaign Committee	6/18/98	\$291.81
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Party	Aggregate Year-to-Date > \$291.81	in-kind
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Democratic Congressional Campaign Committee 430 S Capitol St Washington DC 20003	Democratic Congressional Campaign Committee	6/29/98	\$79.42
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Party	Aggregate Year-to-Date > \$371.23	in-kind
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$371.23
TOTAL This Period (last page this line number only)	\$371.23

SCHEDULE A

ITEMIZED RECEIPTS

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Contributions from Other Committees

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)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Action Committee For Rural Electrification 4301 Wilson Blvd Arlington VA 22203 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$1,000.00	6/18/98	\$1000.00
B. Full Name, Mailing Address and ZIP Code AFL-CIO Transportation Trades Department 400 NW N. Capitol St Suite 861 Washington DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$500.00	6/18/98	\$500.00
C. Full Name, Mailing Address and ZIP Code Air Line Pilots Association 1625 NW Massachusetts Ave Washington DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$1,500.00	6/18/98	\$1500.00
D. Full Name, Mailing Address and ZIP Code Air Transport Association of America 1301 NW Pennsylvania Ave Suite 1 Washington DC 20004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$500.00	6/18/98	\$500.00
E. Full Name, Mailing Address and ZIP Code Alliant Techsystems Inc 600 NE 2nd St Hopkins MN 55343 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$1,000.00	5/26/98	\$1000.00
F. Full Name, Mailing Address and ZIP Code Amalgamated Transit Union 312 Central Ave Suite 438 Minneapolis MN 55414 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$500.00	6/18/98	\$500.00
G. Full Name, Mailing Address and ZIP Code American Association OF Airport Executives 4212 King St Alexandria VA 22302 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$1,000.00	5/05/98	\$1000.00
SUBTOTAL of receipts this Page (optional)			\$6,000.00
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 10
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Bus Association 1100 NW New York Ave Suite 1050 Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$1,000.00	6/18/98	\$1000.00
B. Full Name, Mailing Address and ZIP Code American Express 801 NW Pennsylvania Ave Washington DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$250.00	6/18/98	\$250.00
C. Full Name, Mailing Address and ZIP Code American Federation Of Government Employees 80 NW F St Washington DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$500.00	6/29/98	\$500.00
D. Full Name, Mailing Address and ZIP Code American Federation Of State, County & Municipal Employees 1625 NW L St Washington DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$1,000.00	6/18/98	\$1000.00
E. Full Name, Mailing Address and ZIP Code American Federation Of Teachers 555 NW New Jersey Ave Washington DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$3,500.00	5/05/98 6/29/98	\$1000.00 \$2500.00
F. Full Name, Mailing Address and ZIP Code American Nurses Association 600 SW Maryland Ave Suite 100W Washington DC 20024 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$2,000.00	6/29/98	\$2000.00
G. Full Name, Mailing Address and ZIP Code American Sugarbeet Growers Association 1156 NW 15th St Suite 1101 Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	PAC Aggregate Year-to-Date > \$500.00	5/26/98	\$500.00
SUBTOTAL of Receipts This Page (optional)			\$8,750.00
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 3 OF 10
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code Association Of American Railroads 50 NW F St Suite 12900 Washington DC 20001 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 5/26/98	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and ZIP Code Association Of Professional Flight Attendants 1004 W Eules Blvd Eules TX 76040 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$250.00	Date (month, day, year) 6/18/98	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code AT&T 1120 NW 20Th St Suite 1000 Washington DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 5/26/98	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Boeing Corporation 1700 N Moore St Arlington VA 22209 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 6/18/98	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and ZIP Code Brotherhood Of Locomotive Engineers 1370 Ontario St Cleveland OH 44113-1702 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 5/26/98	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Burson-Marsteller PAC 1801 NW K St Suite 901L Washington DC 20006 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 6/18/98	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and ZIP Code Chrysler Corporation 1000 Chrysler Dr Auburn Hills MI 48326 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 6/18/98	Amount of Each Receipt this Period \$1000.00
SUBTOTAL of Receipts This Page (optional)			\$4,750.00
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 4 OF 10
FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in Full)			
Sabo For Congress Volunteer Committee 074306			
<p>A. Full Name, Mailing Address and ZIP Code Credit Union National Association 805 NW 15th St Suite 300 Washington DC 20005</p>			
<p>Name of Employer</p>		<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation PAC</p>	<p>6/18/98 \$1000.00</p>
		<p>Aggregate Year-to-Date > \$1,000.00</p>	
<p>B. Full Name, Mailing Address and ZIP Code Dorsey National Fund 1330 NW Connecticut Ave Suite 20 Washington DC 20036</p>			
<p>Name of Employer</p>		<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation PAC</p>	<p>6/29/98 \$500.00</p>
		<p>Aggregate Year-to-Date > \$500.00</p>	
<p>C. Full Name, Mailing Address and ZIP Code Faegre & Benson 90 S 7th St Minneapolis MN 55402</p>			
<p>Name of Employer</p>		<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation PAC</p>	<p>6/18/98 \$500.00</p>
		<p>Aggregate Year-to-Date > \$500.00</p>	
<p>D. Full Name, Mailing Address and ZIP Code Farm Credit Council 50 NW F St Suite 900 Washington DC 20001</p>			
<p>Name of Employer</p>		<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation PAC</p>	<p>6/29/98 \$1000.00</p>
		<p>Aggregate Year-to-Date > \$1,000.00</p>	
<p>E. Full Name, Mailing Address and ZIP Code General Dynamics 3190 Fairview Park Dr Falls Church VA 22042-4523</p>			
<p>Name of Employer</p>		<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation Other</p>	<p>5/05/98 \$5000.00</p>
		<p>Aggregate Year-to-Date > \$5,000.00</p>	
<p>F. Full Name, Mailing Address and ZIP Code General Electric 1299 NW Pennsylvania Ave Suite 1 Washington DC 20004</p>			
<p>Name of Employer</p>		<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation PAC</p>	<p>5/26/98 \$1000.00</p>
		<p>Aggregate Year-to-Date > \$1,000.00</p>	
<p>G. Full Name, Mailing Address and ZIP Code Harris Corporation 1201 E Abingdon Dr Suite 300 Alexandria VA 22314</p>			
<p>Name of Employer</p>		<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>		<p>Occupation PAC</p>	<p>6/18/98 \$300.00</p>
		<p>Aggregate Year-to-Date > \$300.00</p>	
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>\$9,300.00</p>
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 10 FOR LINE NUMBER 11(c)

Contributions from Other Committees

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Holland & Knight Committee For Effective Government 2100 NW Pennsylvania Ave Suite 4 Washington DC 20037	Other	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$500.00
B. Full Name, Mailing Address and ZIP Code Human Rights Campaign Fund 1101 14th St N.W. Suite St 200 Washington DC 20005	PAC	6/18/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$1,000.00
C. Full Name, Mailing Address and ZIP Code International Association Of Machinist Lodge #737 1399 Eustis St St. Paul MN 55108	PAC	6/18/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$1,000.00
D. Full Name, Mailing Address and ZIP Code International Brotherhood Of Teamsters 3001 SE University Ave Minneapolis MN 55414	PAC	6/29/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$1,000.00
E. Full Name, Mailing Address and ZIP Code Interstate Natural Gas Association Of America 555 NW 13th St Suite 300 Washington DC 20004	PAC	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$500.00
F. Full Name, Mailing Address and ZIP Code Lockheed/Martin Crystal Square Two Suite 300 Arlington VA 22202	PAC	6/29/98	\$2000.00
Receipt For: <input checked="" 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 Lockridge, Grindal, Nauen & Holstein 100 S Washington Ave Suite 2200 Minneapolis MN 55401	PAC	4/16/98 5/26/98	\$2500.00 \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date >	\$3,500.00

SUBTOTAL of Receipts This Page (optional) \$9,500.00

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 6	OF 10
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Contributions from Other Committees

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)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lockridge, Grindal, Nauen & Holstein 100 S Washington Ave Suite 2200 Minneapolis MN 55401	Occupation PAC	6/18/98	\$23.36 in-kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$3,523.36		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Machinists Non-Partisan Political League 9000 Machinist Pl Upper Marlboro MD 20772	Occupation PAC	5/05/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Magazine Publishers Of America PAC 1211 NW Connecticut Ave Suite 610 Washington DC 20036	Occupation PAC	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merck & Company, Inc. 601 NW Pennsylvania Suite 1200 Washington DC 20004	Occupation PAC	6/18/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Minn-Dak Farmers Cooperative 7525 Red River Rd Wahpeton ND 58075	Occupation PAC	5/26/98 6/18/98	\$500.00 \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MLB of Chippewa Indians HCR 67, box 194 Onamia MN 56359	Occupation Other	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Air Traffic Controllers 1150 NW 17th St Suite 701 Washington DC 20036	Occupation PAC	5/26/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1,000.00		

SUBTOTAL of Receipts This Page (optional) \$5,523.36

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

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Contributions from Other Committees

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NAME OF COMMITTEE (in full)

Sabo For Congress Volunteer Committee D74306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Association Of Letter Carriers 100 NW Indiana Ave Washington DC 20001	PAC	5/15/98	\$1500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$1,500.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Committee To Preserve Social Security And Medicare 2000 NW K St Suite 800 Washington DC 20006	PAC	5/26/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$1,000.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Education Association 1201 NW 16Th St Washington DC 20036	PAC	5/05/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$1,000.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
National Farmers Union 11900 E Cornell Pl Aurora CO 80014	PAC	5/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Northwest Airlines 901 NW 15th St Suite 310 Washington DC 20005	PAC	5/26/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$500.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Magliocchetti Associates 1755 Jefferson Davis Hwy Suite 1 Arlington VA 22202	PAC	5/26/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$1,000.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pillsbury Company Pillsbury Center Suite 39K5 Minneapolis MN 55402	PAC	6/18/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC		Aggregate Year-to-Date > \$250.00

SUBTOTAL of Receipts This Page (optional)

\$5,500.00

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

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Contributions from Other Committees

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074305

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PRC Inc. 1500 PRC Dr Mc Lean VA 22102 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$500.00	6/29/98	\$500.00
B. Full Name, Mailing Address and ZIP Code Professional Airways Systems Specialists 1150 17th St Suite 702 Washington DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	5/26/98	\$1000.00
C. Full Name, Mailing Address and ZIP Code Raytheon 1215 Jefferson Davis Hwy Suite 1 Arlington VA 22202-3256 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	6/18/98	\$1000.00
D. Full Name, Mailing Address and ZIP Code Reid & Priest Political Action Committee 701 NW Pennsylvania Ave Suite 80 Washington DC 20004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	5/26/98	\$1000.00
E. Full Name, Mailing Address and ZIP Code Responsible Citizens Political League 3 Research Pl Rockville MD 20850 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	6/18/98	\$1000.00
F. Full Name, Mailing Address and ZIP Code Robins, Kaplan, Miller & Ciresi 800 LaSalle Ave Minneapolis MN 55402 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	6/18/98	\$1000.00
G. Full Name, Mailing Address and ZIP Code Southern Minnesota Sugar Co-Op PO Box 500 Renville MN 56284 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,500.00	6/18/98 6/29/98	\$500.00 \$1000.00

SUBTOTAL of Receipts This Page (optional) \$7,000.00

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

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Contributions from Other Committees

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code Transport Workers Union 10 NE G St Washington DC 20002 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 6/29/98	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and ZIP Code Union Of Needle Traders, Industrial And Textile Employees 1710 Broadway New York NY 10019 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 5/26/98	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and ZIP Code United Auto Workers 8000 E Jefferson Ave Detroit MI 48214 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 6/18/98	Amount of Each Receipt this Period \$2000.00
D. Full Name, Mailing Address and ZIP Code United Auto Workers 1757 N St NW Washington DC 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 6/18/98	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and ZIP Code United Defense 1525 Wilson Blvd Suite 700 Arlington VA 22209 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 5/26/98	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and ZIP Code United Mine Workers Of America 900 NW 15th St Washington DC 20005 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 6/18/98	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and ZIP Code United Steelworkers Of America 2829 SE University Bldg Ave Minneapolis MN 55414 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$2,500.00	Date (month, day, year) 5/26/98	Amount of Each Receipt this Period \$2500.00
SUBTOTAL of Receipts This Page (optional)			\$9,500.00
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 10 OF 10
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Contributions from Other Committees

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
United Transportation Union 14600 Detroit Ave Cleveland OH 44107 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation PAC Aggregate Year-to-Date > \$500.00	6/18/98	\$500.00
B. Full Name, Mailing Address and ZIP Code UPSPAC 55 NE Glenlake Pky Atlanta GA 30328 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$500.00	6/29/98	\$500.00
C. Full Name, Mailing Address and ZIP Code Wexler Group 1317 NW F St Suite 600 Washington DC 20004 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation PAC Aggregate Year-to-Date > \$500.00	5/26/98	\$500.00
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)

\$1,500.00

TOTAL this Period (last page this line number only)

\$67,323.36

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 15

Other Receipts

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)
 Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norwest Bank Minnesota, Na P.O. Box B514 Minneapolis MN 55479-0514	Occupation Bank Interest	4/09/98	\$95.97
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$617.30		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norwest Bank Minnesota, Na P.O. Box B514 Minneapolis MN 55479-0514	Occupation Bank Interest	5/11/98	\$92.54
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$617.30		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Norwest Bank Minnesota, Na P.O. Box B514 Minneapolis MN 55479-0514	Occupation Bank Interest	6/09/98	\$104.08
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$617.30		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Painewebber, Inc. 33 S 6Th St Minneapolis MN 55402	Occupation Dividends Interest	4/30/98	\$489.41
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$3,880.27		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Painewebber, Inc. 33 S 6Th St Minneapolis MN 55402	Occupation Interest Dividends	5/29/98	\$543.54
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$3,880.27		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Painewebber, Inc. 33 S 6Th St Minneapolis MN 55402	Occupation Dividends Interest	6/30/98	\$1346.49
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$3,880.27		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)	\$2,672.03
TOTAL This Period (last page this line number only)	\$2,672.03

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 6
FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lockridge, Grindal, Nauen 100 S Washington Ave Suit Minneapolis MN 55401	fundraising expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/18/98	\$23.36 in-kind received
B. Full Name, Mailing Address and ZIP Code Democratic Congressional 430 S Capitol St Washington DC 20003	Member Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/18/98	\$291.81 in-kind received
C. Full Name, Mailing Address and ZIP Code Democratic Congressional 430 S Capitol St Washington DC 20003	Member Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/29/98	\$79.42 in-kind received
D. Full Name, Mailing Address and ZIP Code Robert L Gauthier 2526 S Thomas Ave Minneapolis MN 55405	fundraising expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/18/98	\$204.36 in-kind received
E. Full Name, Mailing Address and ZIP Code James J Sieben 9349 Cortland Ct Woodbury MN 55125	fundraising expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/18/98	\$161.19 in-kind received
F. Full Name, Mailing Address and ZIP Code Blaine Miller 3145 E Calhoun Pky Minneapolis MN 55408	fundraising expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/18/98	\$204.36 in-kind received
G. Full Name, Mailing Address and ZIP Code Postmaster Minneapolis MN 55401	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/08/98 4/08/98 4/22/98	\$320.00 \$233.60 \$64.00
H. Full Name, Mailing Address and ZIP Code Postmaster Minneapolis MN 55401	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/01/98 5/01/98 5/26/98	\$232.00 None \$46.46 None \$128.00 None
I. Full Name, Mailing Address and ZIP Code Postmaster Minneapolis MN 55401	postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/15/98 6/25/98	\$1797.44 \$136.00 None
SUBTOTAL of Disbursements This Page (optional)			\$3,379.54
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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Sabo, Martin 1742 Key West Ln. Vienna VA 22180	airfare	5/08/98	\$351.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/07/98	\$489.21
B. Full Name, Mailing Address and ZIP Code Mpls. Labor Review 312 Central Ave., 526 Mpls. MN 55414-1077	Purpose of Disbursement ad	Date (month, day, year) 6/04/98	Amount of Each Disbursement This Period \$135.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code U.S. West P.O. BOX 1301 Mpls. MN 55483-0001	Purpose of Disbursement phone	Date (month, day, year) 4/01/98	Amount of Each Disbursement This Period \$106.74
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/01/98	\$116.29
D. Full Name, Mailing Address and ZIP Code D.C.C.C. 430 S Capitol St Washington DC 20003	Purpose of Disbursement dues	Date (month, day, year) 6/24/98	Amount of Each Disbursement This Period \$10000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code Inter/Quality Corp. 511 S 11th Ave Mpls. MN 55415	Purpose of Disbursement bookkeeping	Date (month, day, year) 4/14/98	Amount of Each Disbursement This Period \$1056.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code Congressional Liquors 404 SE First St. Washington DC 20003	Purpose of Disbursement refrshmnts	Date (month, day, year) 5/26/98	Amount of Each Disbursement This Period \$244.52 New
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code Norwest Bank Minn., N.A. 6th & Marquette Mpls. MN 55479	Purpose of Disbursement retrnd chk fee	Date (month, day, year) 4/23/98	Amount of Each Disbursement This Period \$3.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code Norwest Bank Minn., N.A. 6th & Marquette Mpls. MN 55479	Purpose of Disbursement credit card fee	Date (month, day, year) 4/30/98	Amount of Each Disbursement This Period \$36.40
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/03/98	\$36.70
I. Full Name, Mailing Address and ZIP Code Norwest Bank Minn., N.A. 6th & Marquette Mpls. MN 55479	Purpose of Disbursement Fed'l/FICA depst 2nd Qtr	Date (month, day, year) 6/25/98	Amount of Each Disbursement This Period \$512.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional) \$12,842.34

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A.T. & T. P.O. Box 27-866 Kansas City MO 64184-0866	phone	4/02/98	\$43.06
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/08/98	\$80.65
	<input type="checkbox"/> Other (specify):	6/04/98	\$47.10
B. Full Name, Mailing Address and ZIP Code Card Services P.O. Box 9272 Des Moines IA 50306-9272	Purpose of Disbursement see below	5/01/98	\$1744.20
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/01/98	\$788.81
C. Full Name, Mailing Address and ZIP Code Card Services P.O. Box 9272 Des Moines IA 50306-9272	Purpose of Disbursement annual fee	5/01/98	\$36.66 memo
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code Card Services P.O. Box 9272 Des Moines IA 50306-9272	Purpose of Disbursement see below	5/26/98	\$157.96
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/26/98	\$296.22
	<input type="checkbox"/> Other (specify):	6/25/98	\$1262.75
E. Full Name, Mailing Address and ZIP Code Card Services P.O. Box 9272 Des Moines IA 50306-9272	Purpose of Disbursement see below	6/25/98	\$178.55
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code Acorn Mini Storage 4652 N Lyndale Ave Mpls. MN 55412	Purpose of Disbursement rent	4/23/98	\$103.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/26/98	\$103.00
	<input type="checkbox"/> Other (specify):	6/24/98	\$103.00
G. Full Name, Mailing Address and ZIP Code Fifth District D.F.L. 1459 NW 12Th Ter New Brighton MN 55112	Purpose of Disbursement ad - convention	5/27/98	\$210.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code Bates Neimand 1900 NW L #500 St Washington DC 20036	Purpose of Disbursement consultant	4/01/98	\$3000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/09/98	\$1500.00
I. Full Name, Mailing Address and ZIP Code Bates Neimand 1900 NW L #500 St Washington DC 20036	Purpose of Disbursement consulting	5/01/98	\$2038.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional)

\$11,656.30

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

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FOR LINE NUMBER 17

Operating Expenditures

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bates Neimand 1900 NW L #500 St Washington DC 20036	consultant	6/04/98	\$1500.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code Moore, Olin 2629 W 43Rd #101 St Mpls. MN 55410	fees/expenses	4/01/98	\$395.75
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	4/01/98	\$100.00
	<input type="checkbox"/> Other (specify):	4/13/98	\$100.00
C. Full Name, Mailing Address and ZIP Code Moore, Olin 2629 W 43Rd #101 St Mpls. MN 55410	fees/expenses	5/06/98	\$395.75
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/06/98	\$100.00
	<input type="checkbox"/> Other (specify):	5/06/98	\$100.00
D. Full Name, Mailing Address and ZIP Code Moore, Olin 2629 W 43Rd #101 St Mpls. MN 55410	fees/expenses	6/11/98	\$202.80
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	6/11/98	\$750.50
	<input type="checkbox"/> Other (specify):	6/11/98	\$100.00
E. Full Name, Mailing Address and ZIP Code Hennepin County Treas. 300 E 6Th St Mpls. MN 55415	filing fee	6/20/98	\$300.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code T.D.I. 6950 S France Ave Mpls. MN 55435	advertising	5/13/98	\$9000.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code Faricy & Associates 2211 St. Clair Ave St. Paul MN 55105	consultant	4/08/98	\$2330.50
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	5/01/98	\$2300.00
	<input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code Faricy & Associates 2211 St. Clair Ave St. Paul MN 55105	expenses	5/21/98	\$483.08
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	6/08/98	\$2402.43
	<input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code Kramer & Associates 1471 Barclay St St. Paul MN 55106-1405	printing	6/30/98	\$240.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional) \$20,800.81

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

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Operating Expenditures

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Impact Printing 1067 Rice St St. Paul MN 55117	printing	5/08/98	\$23.14
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Ari Systems, Inc. 983 Stony Point Rd Eagan MN 55123	telemarketing	4/02/98	\$1366.75
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/10/98	\$742.50
Ari Systems, Inc. 983 Stony Point Rd Eagan MN 55123	telemarketing	4/11/98	\$279.95
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/01/98	\$1328.80
Ari Systems, Inc. 983 Stony Point Rd Eagan MN 55123	telemarketing	5/01/98	\$232.76
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/08/98	\$1936.00
Ari Systems, Inc. 983 Stony Point Rd Eagan MN 55123	telemarketing	5/13/98	\$1577.40
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/21/98	\$799.15
Ari Systems, Inc. 983 Stony Point Rd Eagan MN 55123	telemarketing	5/23/98	\$1177.55
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/07/98	\$800.25
Ari Systems, Inc. 983 Stony Point Rd Eagan MN 55123	telemarketing	6/10/98	\$77.20
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/17/98	\$426.25
Ari Systems, Inc. 983 Stony Point Rd Eagan MN 55123	telemarketing	6/30/98	\$99.55
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Internal Revenue Serv 98 P.O. Box 970007 St. Louis MO 63197-0007	1st qtr. FED'L/fica '98	4/10/98	\$358.50
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Sprint P.C.S. P.O. Box 2200 Bedford Park IL 60499-220	phone	4/08/98	\$37.82
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/01/98	\$408.69
Sprint P.C.S. P.O. Box 2200 Bedford Park IL 60499-220	phone	5/08/98	\$36.85
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/10/98	\$76.29
Sprint P.C.S. P.O. Box 2200 Bedford Park IL 60499-220	phone	6/25/98	\$42.55
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

GRAND TOTAL of Disbursements This Page (optional)

\$11,801.86

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(a)
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Operating Expenditures

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NAME OF COMMITTEE (in Full):

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Twin Cities Pride Guide 2344 Nicollet Ste. 13 Mpls. MN 55404	ad Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/19/98	\$295.00
B. Full Name, Mailing Address and ZIP Code Lamb, Larry 983 Stony Point Rd Eagan MN 55123	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	4/20/98	\$323.84
C. Full Name, Mailing Address and ZIP Code Tastefully Yours Caterer 11405 Monterrey Dr. Silver Spring Md 20902	Purpose of Disbursement catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/01/98 6/25/98	\$1744.20 memo \$1100.30 memo
D. Full Name, Mailing Address and ZIP Code Ramaley Printing/Crepeau P.O. Box 86 Mpls. MN 55406-1421	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/20/98	\$1760.15
E. Full Name, Mailing Address and ZIP Code Nationwide Group 2415 E Franklin Ave Mpls. MN 55406	Purpose of Disbursement security deposit Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/23/98	\$500.00
F. Full Name, Mailing Address and ZIP Code Nationwide Group 2415 E Franklin Ave Mpls. MN 55406	Purpose of Disbursement June rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	6/23/98	\$91.70
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) \$2,970.69

TOTAL This Period (last page this line number only) \$63,451.54

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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Other Disbursements

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NAME OF COMMITTEE (in Full)

Sabo For Congress Volunteer Committee 074306

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Beckman For Congress P.O. Box 708 Owatonna MN 55060	contrib., MN - Dist. 01 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	5/28/98	\$1000.00
B. 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
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)

\$1,000.00

TOTAL This Period (last page this line number only)

\$1,000.00

