

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAR 26 1998

SEP 18 4 52 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Republican Majority Fund

ADDRESS (number and street) Check if different than previously reported
1155 21st Street, NW, Suite 300

CITY, STATE and ZIP CODE
Washington, DC 20036

2. FEC IDENTIFICATION NUMBER
C00296640

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

- Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

| SUMMARY | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|-------------------------|---|
| 5. Covering Period | <u>08/01/98</u> through <u>08/31/98</u> | | |
| 6. (a) Cash on Hand January 1, 19 <u>98</u> | | | \$ 263,518.74 |
| (b) Cash on Hand at Beginning of Reporting Period | | \$ 257,954.53 | |
| (c) Total Receipts (from Line 19) | | \$ 114,313.14 | \$ 355,801.34 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | | \$ 372,267.67 | \$ 619,320.08 |
| 7. Total Disbursements (from Line 30) | | \$ 65,792.43 | \$ 312,844.84 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | | \$ 306,475.24 | \$ 306,475.24 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | | \$ 0.00 | For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420 |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | | \$ 0.00 | |

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Barbara W. Bonfiglio, Assistant Treasurer

Signature of Treasurer
Barbara W. Bonfiglio

Date
9/18/98

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

FEC FORM 3X

(revised 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

| NAME OF COMMITTEE Republican Majority Fund | REPORT COVERING PERIOD | | |
|---|-------------------------------|---------------------------|------------|
| | FROM | TO | |
| | 08/01/98 | 08/31/98 | |
| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year | |
| 11. Contributions (other than loans) From: | | | |
| a. Individuals/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | 21,000.00 | 66,250.00 | 11(a)(i) |
| ii. Unitemized | 0.00 | 22,287.65 | 11(a)(ii) |
| iii. Total | 21,000.00 | 88,537.65 | 11(a)(iii) |
| b. Political Party Committees | 0.00 | 0.00 | 11(b) |
| c. Other Political Committees (such as PACs) | 92,000.00 | 261,000.00 | 11(c) |
| d. Total Contributions | 113,000.00 | 349,537.65 | 11(d) |
| 12. Transfers From Affiliated/Other Party Committees | 0.00 | 0.00 | 12 |
| 13. All Loans Received | 0.00 | 0.00 | 13 |
| 14. Loan Repayments Received | 0.00 | 0.00 | 14 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | 0.00 | 0.00 | 15 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | 0.00 | 0.00 | 16 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 1,313.14 | 6,283.69 | 17 |
| 18. Transfers from Nonfederal Account for Joint Activity | 0.00 | 0.00 | 18 |
| 19. Total Receipts | 114,313.14 | 355,801.34 | 19 |
| 20. Total Federal Receipts | 114,313.14 | 355,801.34 | 20 |
| II. Disbursements | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | 0.00 | 0.00 | 21(a)(i) |
| ii. Non-Federal Share | 0.00 | 0.00 | 21(a)(ii) |
| b. Other Federal Operating Expenditures | 41,792.43 | 156,196.84 | 21(b) |
| c. Total Operating Expenditures | 41,792.43 | 156,196.84 | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | 0.00 | 0.00 | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 17,000.00 | 119,648.00 | 23 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 | 24 |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a)(d) (use Schedule F) | 0.00 | 0.00 | 25 |
| 26. Loan Repayments Made | 0.00 | 0.00 | 26 |
| 27. Loans Made | 0.00 | 0.00 | 27 |
| 28. Refunds of Contributions To: | | | |
| a. Individuals/Persons Other Than Political Committees | 0.00 | 0.00 | 28(a) |
| b. Political Party Committees | 0.00 | 0.00 | 28(b) |
| c. Other Political Committees (such as PACs) | 0.00 | 0.00 | 28(c) |
| d. Total Contribution Refunds | 0.00 | 0.00 | 28(d) |
| 29. Other Disbursements | 7,000.00 | 37,000.00 | 29 |
| 30. Total Disbursements | 65,792.43 | 312,844.84 | 30 |
| 31. Total Federal Disbursements | 65,792.43 | 312,844.84 | 31 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 113,000.00 | 349,537.65 | 32 |
| 33. Total Contribution Refunds (from line 28d) | 0.00 | 0.00 | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from line 32) | 113,000.00 | 349,537.65 | 34 |
| 35. Total Federal Operating Expenditures | 41,792.43 | 156,196.84 | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | 0.00 | 0.00 | 36 |
| 37. Net Operating Expenditures | 41,792.43 | 156,196.84 | 37 |

SCHEDULE A

ITEMIZED RECEIPTS

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

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)
Republican Majority Fund

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|---|---|-------------------------|---|
| Deborah Steelman 8523 Georgetown Pike McLean, VA 22102 | Self-employed | 08/06/98 | 5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | | Aggregate Year-to-Date > \$ 5,000.00 |
| Kenneth Kies 8109 Franklin Park Rd. McLean, VA 22101 | PriceWaterhouseCoopers | 08/06/98 | 5,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | | Aggregate Year-to-Date > \$ 5,000.00 |
| David Higgins 2709 McConnell Dr. Los Angeles, CA 90064 | info requested | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | Aggregate Year-to-Date > \$ 1,000.00 |
| William Smith 4823 Laurel St. Bellaire, TX 77401 | info requested | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | Aggregate Year-to-Date > \$ 1,000.00 |
| Christian Winkle 20016 Hunt Pass Court Parkton, MD 21120 | info requested | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | | Aggregate Year-to-Date > \$ 1,000.00 |
| Gary Andres 610 Langston Lane Falls Church, VA 22046 | The Dutko Group | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner/Vice-President | | Aggregate Year-to-Date > \$ 1,000.00 |
| John Bode 431 NW 17th St. Oklahoma City, OK 73103 | Olsson, Frank and Weeda | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | | Aggregate Year-to-Date > \$ 1,000.00 |

SUBTOTAL of Receipts This Page (optional) **15,000.00**

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 **3**
FOR LINE NUMBER **11 a f**

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt This Period |
|---|---|---|------------------------------------|
| Charles Carroll 3604 King William Dr. Olney, MD 20832 | National Asso. of Waterfront Employers | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation General Counsel | Aggregate Year-to-Date > \$ 1,000.00 | |
| Phillips Peter 10805 Tara Road Potomac, MD 20854 | Road, Smith, Shaw & McClay | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date > \$ 2,000.00 | |
| Linda Tarplin 3839 26th St., N Arlington, VA 22207 | O'Brian & Callo | 08/06/98 | 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Attorney | Aggregate Year-to-Date > \$ 1,000.00 | |
| David Taylor 47 Ancell Street Alexandria, VA 22305 | Alpine Group, Inc. | 08/06/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | Aggregate Year-to-Date > \$ 500.00 | |
| Brad Edwards 2448 Maas Ave., NW Washington, DC 20008 | info requested | 08/08/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation | Aggregate Year-to-Date > \$ 500.00 | |
| Haley Barbour 1275 Penn. Ave., NW Washington, DC 20004 | Barbour, Griffith and Rogers | 08/31/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | Aggregate Year-to-Date > \$ 500.00 | |
| Lanny Griffith 1275 Penn. Ave., NW Washington, DC 20004 | Barbour, Griffith and Rogers | 08/31/98 | 500.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation Partner | Aggregate Year-to-Date > \$ 500.00 | |

SUBTOTAL of Receipts This Page (optional) **5,000.00**

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 **3** OF **3**
FOR LINE NUMBER **11 a i**

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

| | | | |
|--|--|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code Ed Rogers 1275 Penn. Ave, NW Washington, DC 20004</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Barbour, Griffith and Rogers</p> <p>Occupation Partner</p> <p>Aggregate Year-to-Date > \$ 500.00</p> | <p>Date (month, day, year) 08/31/98</p> | <p>Amount of Each Receipt this Period 500.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Chris Henick 1275 Penn. Ave., NW Washington, DC 20004</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer Barbour, Griffith and Rogers</p> <p>Occupation Managing Director and Principal</p> <p>Aggregate Year-to-Date > \$ 500.00</p> | <p>Date (month, day, year) 08/31/98</p> | <p>Amount of Each Receipt this Period 500.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |

SUBTOTAL of Receipts This Page (optional) **1,000.00**

TOTAL This Period (last page this line number only) **21,000.00**

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 6
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

| | | | |
|--|--|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code The Glaxo Wellcome PAC Five Moore Drive Research Triangle Pk, NC 27709</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p> | <p>Date (month, day, year)</p> <p>08/06/98</p> | <p>Amount of Each Receipt this Period</p> <p>5,000.00</p> |
| <p>B. Full Name, Mailing Address and ZIP Code Brown-Forman Corp. Cmte. P.O. Box 1080 Louisville, KY 40201</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p> | <p>Date (month, day, year)</p> <p>08/06/98</p> | <p>Amount of Each Receipt this Period</p> <p>5,000.00</p> |
| <p>C. Full Name, Mailing Address and ZIP Code Federal Express PAC 2005 Corporate Ave. Memphis, TN 38132</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p> | <p>Date (month, day, year)</p> <p>08/06/98</p> | <p>Amount of Each Receipt this Period</p> <p>5,000.00</p> |
| <p>D. Full Name, Mailing Address and ZIP Code McDermott, Will and Emery PAC 1200 18th St., NW, 8th fl. Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p> | <p>Date (month, day, year)</p> <p>08/06/98</p> | <p>Amount of Each Receipt this Period</p> <p>5,000.00</p> |
| <p>E. Full Name, Mailing Address and ZIP Code HALLPAC-FEDERAL P.O. Box 419580 Kansas City, MO 64141</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p> | <p>Date (month, day, year)</p> <p>08/06/98</p> | <p>Amount of Each Receipt this Period</p> <p>5,000.00</p> |
| <p>F. Full Name, Mailing Address and ZIP Code Ernst & Young PAC 1225 Conn. Ave., NW Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p> | <p>Date (month, day, year)</p> <p>08/06/98</p> | <p>Amount of Each Receipt this Period</p> <p>5,000.00</p> |
| <p>G. Full Name, Mailing Address and ZIP Code American Airlines PAC 1101 17th St., NW., NO. 600 Washington, DC 20036</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 5,000.00</p> | <p>Date (month, day, year)</p> <p>08/06/98</p> | <p>Amount of Each Receipt this Period</p> <p>5,000.00</p> |

SUBTOTAL of Receipts This Page (optional) 35,000.00

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 6
FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

| | | | |
|--|---|-------------------------|---|
| A. Full Name, Mailing Address and ZIP Code CSX Good Government Fund P.O. Box C-32222 Richmond, VA 23261 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period 4,000.00 |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 5,000.00 | | |
| B. Full Name, Mailing Address and ZIP Code El Paso Energy Co. PAC 601 13th St., NW, Ste. 850 S Washington, DC 20005 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period 3,000.00 |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 3,000.00 | | |
| C. Full Name, Mailing Address and ZIP Code The National Asso. of Life Underwriters 1922 F St., NW Washington, DC 20006 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period 2,500.00 |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,500.00 | | |
| D. Full Name, Mailing Address and ZIP Code Clothing Industry and Workers PAC 1155 21st St., NW, Ste. 300 Washington, DC 20036 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period 2,500.00 |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,500.00 | | |
| E. Full Name, Mailing Address and ZIP Code Genesis Health Ventures, Inc. 148 West State St. Kennett Square, PA 19348 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period 2,600.00 |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,500.00 | | |
| F. Full Name, Mailing Address and ZIP Code America's Community Bankers' PAC 900 19th St., NW, #400 Washington, DC 20006 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period 2,000.00 |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 3,000.00 | | |
| G. Full Name, Mailing Address and ZIP Code American Trucking PAC 430 First Street, SE Washington, DC 20003 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period 2,000.00 |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,000.00 | | |

SUBTOTAL of Receipts This Page (optional) **18,500.00**

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 **3** OF **6**
FOR LINE NUMBER **11 c**

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NAME OF COMMITTEE (in Full)
Republican Majority Fund

| | | | |
|---|---|-------------------------|------------------------------------|
| A. Full Name, Mailing Address and ZIP Code National Venture Capital Assoc. PAC 1655 N. Fort Myer Drive, #700 Arlington, VA 22209 | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,000.00 | | 2,000.00 |
| B. Full Name, Mailing Address and ZIP Code Manor Healthcare Corp. Fed. PAC 11555 Darnestown Rd Gaithersburg, MD 20878 | Name of Employer | Date (month, day, year) | |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,000.00 | | 2,000.00 |
| C. Full Name, Mailing Address and ZIP Code Nationwide Political Participation Cmte. One Nationwide Plaza Columbus, OH 43216 | Name of Employer | Date (month, day, year) | |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | 1,000.00 |
| D. Full Name, Mailing Address and ZIP Code CYMAX PAC P.O. Box 3299 Englewood, CO 80112 | Name of Employer | Date (month, day, year) | |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | 1,000.00 |
| E. Full Name, Mailing Address and ZIP Code Northwestern Mutual Life Fed. PAC 720 Wisconsin Ave. Milwaukee, WI 53202 | Name of Employer | Date (month, day, year) | |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | 1,000.00 |
| F. Full Name, Mailing Address and ZIP Code Marriott International, Inc. PAC Marriott Drive Washington, DC 20068 | Name of Employer | Date (month, day, year) | |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | 1,000.00 |
| G. Full Name, Mailing Address and ZIP Code Food Marketing Ins. PAC 800 Conn., NW, Ste. 500 Washington, DC 20006 | Name of Employer | Date (month, day, year) | |
| | Occupation | 08/06/98 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | 1,000.00 |

SUBTOTAL of Receipts This Page (optional) **9,000.00**

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 4 OF 6
FOR LINE NUMBER 11 c

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

| | | | |
|---|--------------------------------------|---|--|
| NAME OF COMMITTEE (In Full) Republican Majority Fund | | | |
| A. Full Name, Mailing Address and ZIP Code General Electric Company PAC 1299 Penn. Ave., NW, #1100 Washington, DC 20004 | Name of Employer Occupation | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| B. Full Name, Mailing Address and ZIP Code AFSA PAC 919 18th St., NW Washington, DC 20006 | Name of Employer Occupation | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| C. Full Name, Mailing Address and ZIP Code American Gaming Asso. PAC 555 13th St., NW, Suite 1010E Washington, DC 20004 | Name of Employer Occupation | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| D. Full Name, Mailing Address and ZIP Code R. Duffy Wall and Asso. PAC 601 13th St., NW, Suite 410 Washington, DC 20005 | Name of Employer Occupation | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| E. Full Name, Mailing Address and ZIP Code Mortgage Insurance PAC 727 15th St., NW, 12th Floor Washington, DC 20005 | Name of Employer Occupation | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 2,000.00 | | |
| F. Full Name, Mailing Address and ZIP Code Baxter Healthcare Corp. PAC One Baxter Parkway Deerfield, IL 60015 | Name of Employer Occupation | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| G. Full Name, Mailing Address and ZIP Code Mutual of Omaha Companies PAC Mutual of Omaha Plaza Omaha, NE 68176 | Name of Employer Occupation | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Aggregate Year-to-Date > \$ 1,000.00 | | |
| 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

PAGE **5** OF **8**
FOR LINE NUMBER **11 c**

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Republican Majority Fund

| | | | | |
|---|--|-----------------------------|-------------------------|------------------------------------|
| A. Full Name, Mailing Address and ZIP Code Anadarko Petroleum Corp. PAC P.O. Box 1330 Houston, TX 77251 | | 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 | 08/06/98 | 1,000.00 |
| | | Aggregate Year-to-Date > \$ | 1,000.00 | |
| B. Full Name, Mailing Address and ZIP Code Greenberg, Traurig, Hoffman, Lipoff, ... PAC 1221 Brickell Ave. Miami, FL 33131 | | 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 | 08/06/98 | 1,000.00 |
| | | Aggregate Year-to-Date > \$ | 1,000.00 | |
| C. Full Name, Mailing Address and ZIP Code Northwest Airlines PAC 5101 Northwest Drive St. Paul, MN 55111 | | 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 | 08/06/98 | 1,000.00 |
| | | Aggregate Year-to-Date > \$ | 1,000.00 | |
| D. Full Name, Mailing Address and ZIP Code Hoffmann La Roche Good Gov. Cmte. 340 Kingsland St. Nutly, NJ 07110 | | 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 | 08/06/98 | 1,000.00 |
| | | Aggregate Year-to-Date > \$ | 1,000.00 | |
| E. Full Name, Mailing Address and ZIP Code The National Food Processors Asso. PAC 1133 20th St., NW Washington, DC 20036 | | 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 | 08/06/98 | 1,000.00 |
| | | Aggregate Year-to-Date > \$ | 1,000.00 | |
| F. Full Name, Mailing Address and ZIP Code Physical Therapy PAC 1111 N. Fairfax St. Alexandria, VA 22314 | | 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 | 08/06/98 | 1,000.00 |
| | | Aggregate Year-to-Date > \$ | 1,000.00 | |
| G. Full Name, Mailing Address and ZIP Code NovaCare PAC 1016 W. Ninth Ave. King of Prussia, PA 19406 | | 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 | 08/06/98 | 1,000.00 |
| | | Aggregate Year-to-Date > \$ | 1,000.00 | |

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

PAGE 6 OF 6
FOR LINE NUMBER 11c

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)
Republican Majority Fund

| A. Full Name, Mailing Address and ZIP Code Amgen PAC 1840 De Havilland Dr. Thousand Oaks, CA 91320 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00 | Date (month, day, year) 08/06/98 | Amount of Each Receipt this Period 1,000.00 |
|---|--|---|--|
| B. Full Name, Mailing Address and ZIP Code PriceWaterhouseCoopers PAC II 1301 K Street, NW, Ste. 800W Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000.00 | Date (month, day, year) 08/31/98 | Amount of Each Receipt this Period 5,000.00 |
| C. Full Name, Mailing Address and ZIP Code CH2M Hill Companies, LTD PAC 6060 S. Willow Dr. Greenwood Village, CO 80111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Occupation Aggregate Year-to-Date > \$ 2,500.00 | Date (month, day, year) 08/31/98 | Amount of Each Receipt this Period 2,500.00 |
| D. Full Name, Mailing Address and ZIP Code Torchmark PAC 2001 Third Ave., South Birmingham, AL 35233 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000.00 | Date (month, day, year) 08/31/98 | Amount of Each Receipt this Period 5,000.00 |
| E. Full Name, Mailing Address and ZIP Code Oracle Corporation PAC 500 Oracle Parkway Redwood City, CA 94065 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00 | Date (month, day, year) 08/31/98 | Amount of Each Receipt this Period 1,000.00 |
| F. Full Name, Mailing Address and ZIP Code The Pittston Co. PAC 1000 Virginia Center Pky P.O. Box 4228 Glen Allen, VA 23058 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Name of Employer Occupation Aggregate Year-to-Date > \$ 1,000.00 | Date (month, day, year) 08/31/98 | Amount of Each Receipt this Period 1,000.00 |
| 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) | | | 15,500.00 |
| TOTAL This Period (last page this line number only) | | | 92,000.00 |

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **1** OF **1**
FOR LINE NUMBER **17**

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)
Republican Majority Fund

| | | | |
|--|---|--|---|
| <p>A. Full Name, Mailing Address and ZIP Code First Union CAP Department One First Union Center Charlotte, NC 28288</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer:</p> <p>Occupation:</p> <p>Aggregate Year-to-Date > \$ 6,283.69</p> | <p>Date (month, day, year) 08/31/98</p> | <p>Amount of Each Receipt this Period 1,313.14</p> |
| <p>B. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer:</p> <p>Occupation:</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>C. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer:</p> <p>Occupation:</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer:</p> <p>Occupation:</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer:</p> <p>Occupation:</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer:</p> <p>Occupation:</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p> | <p>Name of Employer:</p> <p>Occupation:</p> <p>Aggregate Year-to-Date > \$</p> | <p>Date (month, day, year)</p> | <p>Amount of Each Receipt this Period</p> |
| <p>SUBTOTAL of Receipts This Page (optional)</p> | | | <p>1,313.14</p> |
| <p>TOTAL This Period (last page this line number only)</p> | | | <p>1,313.14</p> |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21B

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)
Republican Majority Fund

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Rachel Pearson 545 East Braddock Road #308 Alexandria, VA 22314 | consulting exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/07/98 | 2,500.00 |
| B. Full Name, Mailing Address and ZIP Code Doral Golf Resort and Spa 4400 NW 87th Ave., Miami, FL 33178-9192 | fundraising exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/07/98 | 3,621.00 |
| C. Full Name, Mailing Address and ZIP Code O'Dell and Simms 7700 Leesburg Pike, Suite 307 Falls Church, VA 22043 | direct mail exps. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/20/98 | 5,855.00 |
| D. Full Name, Mailing Address and ZIP Code O'Dell and Simms 7700 Leesburg Pike, Suite 307 Falls Church, VA 22043 | direct mail exps. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/21/98 | 14,000.00 |
| E. Full Name, Mailing Address and ZIP Code O'Dell and Simms 7700 Leesburg Pike, Suite 307 Falls Church, VA 22043 | direct mail exps. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/21/98 | 7,275.00 |
| F. Full Name, Mailing Address and ZIP Code Citibank Advantage P.O. Box 1747 Hagerstown, MD 21748-1747 | credit card exps. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/21/98 | 7,298.87 |
| G. Full Name, Mailing Address and ZIP Code New England Press 1200 Wake Forest Dr. Alexandria, VA 22307 | printing exp. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/26/98 | 928.56 |
| H. Full Name, Mailing Address and ZIP Code Sarah Hanlon 319 1/2 A St., NE Washington, DC 20002 | reimburse exps. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | 08/26/98 | 514.00 |
| 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)

41,792.43

TOTAL This Period (last page this line number only)

41,792.43

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 23

Any information copied from such Reports and Statements may not be add 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)
Republican Majority Fund

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| Campbell Victory Fund P.O. Box 480166 Denver, CO 80248 | Ben Nighthorse Campbell, U.S. SENATE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 | 08/04/98 | 5,000.00 |
| B. Full Name, Mailing Address and ZIP Code Voinovich for Senate Committee 358 North Parkview Ave. Columbus, OH 43209 | George V. Voinovich, U.S. SENATE OH Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 | 08/21/98 | 5,000.00 |
| C. Full Name, Mailing Address and ZIP Code Crapo for U.S. Senate P.O. Box 1948 Boise, ID 83701 | Michael D. Crapo, U.S. SENATE ID Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 | 08/21/98 | 5,000.00 |
| D. Full Name, Mailing Address and ZIP Code Federer for Congress Committee P.O. Box 4373 St. Louis, MO 63123 | William Federer, U.S. HOUSE 3rd MO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 | 08/26/98 | 2,000.00 |
| 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)

17,000.00

TOTAL This Period (see page this line number only)

17,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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)

Republican Majority Fund

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| David Myers for State Senate 2301 Copperfield Cir. Ponca City, OK 74604 | David Meyers, STATE SENATE OK Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 | 08/08/98 | 1,000.00 |
| B. Full Name, Mailing Address and ZIP Code Kempthorne for Governor P.O. Box 1868 Boise, ID 83701 | Dirk Kempthorne, GOVERNOR ID Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 | 08/21/98 | 5,000.00 |
| C. Full Name, Mailing Address and ZIP Code Forrest Claunch for State House 10320 Oak Park Dr. Midwest City, OK 73130 | Forrest Claunch, STATE HOUSE REP. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998 | 08/25/98 | 1,000.00 |
| 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)

7,000.00


TOTAL This Period (last page this line number only)

7,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

| | |
|---|--------------------------------------|
| <input checked="" type="checkbox"/> Hand Delivered | Date of Receipt 9-18-98 |
| <input type="checkbox"/> First Class Mail | POSTMARKED |
| <input type="checkbox"/> Registered/Certified Mail | POSTMARKED |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt |
| <input type="checkbox"/> Received from the Senate Office of Public Records | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Postmarked and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing | |
|  PREPARER | 9-21-98 DATE PREPARED |