

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

1 / 8
10/15/1998 12 : 10

1. NAME OF COMMITTEE (in full) Bob Anderson for Congress		2. FEC IDENTIFICATION NUMBER C00338428
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1715 Girard NE		
CITY, STATE, and ZIP CODE Albuquerque NM 87110	STATE / DISTRICT NM / 1	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"/> July 15 Quarterly Report

<input checked="" 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"/> Twelfth day report preceding _____
(election type)
election on _____ in the State of _____

<input type="checkbox"/> Thirtieth day report following the General Election

on _____ in the State of _____

<input type="checkbox"/> Termination report |
|--|--|

This report contains activity for: Primary election General election Runoff election Special election

SUMMARY

5. Covering period <u>07/01/1998</u> through <u>09/30/1998</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(a))	10802.23	20005.31
(b) Total Contribution Refunds (from line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	10802.23	20005.31
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	6696.43	13503.71
(b) Total Offsets to Operating Expenditures (from line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	6696.43	13503.71
8. Cash on Hand at Close of Reporting Period (from line 27)	6476.60	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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

Electronically Filed by Ray Maseman

Signature of Treasurer

Date

10/15/1998

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
 (Page 2, FEG Form 3)

Name of Committee (In Full) Bob Anderson for Congress	Report Covering the Period From: 07/01/1998 To: 09/30/1998	
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)	6400.00	
(ii) Unitemized	4402.23	
(iii) Total of contributions from individuals	10802.23	20005.31
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	10802.23	20005.31
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.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	10802.23	20005.31
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	6696.43	13503.71
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) and (b))	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 CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	0.00
21. OTHER DISBURSEMENTS	25.00	25.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	6721.43	13528.71
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		2395.80
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		10802.23
25. SUBTOTAL (add Line 23 and Line 24)		13198.03
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		6721.43
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		6476.60

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 8
			FOR LINE NUMBER 11A

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)
Bob Anderson for Congress

Full Name, Mailing Address, and ZIP Code Lynn Daniel Montgomery PO Box 612 Placitas NM 87043 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 07/16/1998	Amount of Each Receipt this Period 500.00
	Occupation Farmer		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Charles Shepard 80 Camino Barranca Placitas NM 87043 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Retired	Date (month, day, year) 08/06/1998	Amount of Each Receipt this Period 1000.00
	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Deran Ludd 170 11th Ave. #305 Seattle WA 98122 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 08/13/1998	Amount of Each Receipt this Period 250.00
	Occupation Writer		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Marjorie Cypress 3501 Camino Aplauso NW Albuquerque NM 87102 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 08/21/1998	Amount of Each Receipt this Period 500.00
	Occupation		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Philip Jameson 3501 Camino Aplauso NW Albuquerque NM 87107 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 08/21/1998	Amount of Each Receipt this Period 500.00
	Occupation		
	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Frances Harwood RR1 Box 28A Santa Cruz NM 87507 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self	Date (month, day, year) 08/24/1998	Amount of Each Receipt this Period 250.00
	Occupation Anthropologist		
	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Jasbir Singh Bhargoo 503 E. University Blvd. Tucson AZ 85705 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer	Date (month, day, year) 08/28/1998	Amount of Each Receipt this Period 250.00
	Occupation Physicist		
	Aggregate Year-to-Date > \$ 250.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 8
			FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)
Bob Anderson for Congress

Full Name, Mailing Address, and ZIP Code Doreen Bunting 5021 Guadalupe Trail NW Albuquerque NM 87107 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Retired Occupation Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/03/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Peter Petrella PO Box 744 Sandia Park NM 87047 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Albuquerque Printing Occupation Printing Press Operator Aggregate Year-to-Date > \$ 200.00	Date (month, day, year) 09/03/1998	Amount of Each Receipt this Period 200.00
Full Name, Mailing Address, and ZIP Code Steven Clark 10401 Haywood Dr. Silver Spring MD 20902 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Writer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/10/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Robert M. Bernstein 1450 Paseo Norteno Santa Fe NM 87505 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Physician Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 09/14/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Jen Wordan 3020 Carleta Rd NW Albuquerque NM 87104 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Self Occupation Fire Systems Technician Aggregate Year-to-Date > \$ 950.00	Date (month, day, year) 09/15/1998	Amount of Each Receipt this Period 200.00
Full Name, Mailing Address, and ZIP Code Sam Hitt PO Box 1543 Santa Fe NM 87504 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Forest Guardians Occupation Environmentalist Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/16/1998	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Eilsebeth Jean Wood 38 Long Hill Rd Leverett MA 01054 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 09/16/1998	Amount of Each Receipt this Period 500.00
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 8
			FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)
Bob Anderson for Congress

Full Name, Mailing Address, and ZIP Code Jen Worden 3020 Carlota Rd NW Albuquerque NM 87104	Name of Employer Self	Date (month, day, year) 09/16/1998	Amount of Each Receipt this Period 200.00
	Occupation Fire Systems Technician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 550.00		
Full Name, Mailing Address, and ZIP Code Jen Worden 3020 Carlota Rd NW Albuquerque NM 87104	Name of Employer Self	Date (month, day, year) 09/20/1998	Amount of Each Receipt this Period 200.00
	Occupation Fire Systems Technician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 850.00		
Full Name, Mailing Address, and ZIP Code Jen Worden 3020 Carlota Rd NW Albuquerque NM 87104	Name of Employer Self	Date (month, day, year) 09/20/1998	Amount of Each Receipt this Period 200.00
	Occupation Fire Systems Technician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 950.00		
Full Name, Mailing Address, and ZIP Code Steven Clark 10401 Haywood Dr. Silver Spring MD 20902	Name of Employer Self	Date (month, day, year) 09/25/1998	Amount of Each Receipt this Period 250.00
	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Jen Worden 3020 Carlota Rd NW Albuquerque NM 87104	Name of Employer Self	Date (month, day, year) 09/30/1998	Amount of Each Receipt this Period 150.00
	Occupation Fire Systems Technician		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 850.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	6400.00

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 8
			FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Bob Anderson for Congress

Full Name, Mailing Address, and ZIP Code Mitch Buszek PO Box 16316 Santa Fe NM 87506	Purpose of Disbursement Consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/17/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Bob Anderson 1623 Darlington NE Albuquerque NM 87106	Purpose of Disbursement (House - NM - 1) Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/17/1998	Amount of Each Disbursement This Period 275.51
Full Name, Mailing Address, and ZIP Code Nancy Padilla 4312 Marquette NE Albuquerque NM 87106	Purpose of Disbursement Consulting Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/22/1998	Amount of Each Disbursement This Period 250.00
Full Name, Mailing Address, and ZIP Code Don Mickey Designs 3909 Central NE Albuquerque NM 87106	Purpose of Disbursement 1000 Brochures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/27/1998	Amount of Each Disbursement This Period 146.38
Full Name, Mailing Address, and ZIP Code Mitch Buszek PO Box 16316 Santa Fe NM 87506	Purpose of Disbursement Consulting Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/31/1998	Amount of Each Disbursement This Period 250.00
Full Name, Mailing Address, and ZIP Code On the Road Productions 4527 Sunnydale Albuquerque NM 87110	Purpose of Disbursement August Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 07/31/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code US West Communications PO Box 25080 Phoenix AZ 85036-5080	Purpose of Disbursement Phone Service Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/06/1998	Amount of Each Disbursement This Period 250.00
Full Name, Mailing Address, and ZIP Code Mid America Political Showcase 9011 Farmington Way Charlestown IN 47111	Purpose of Disbursement 402 bumper stickers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/07/1998	Amount of Each Disbursement This Period 237.75
Full Name, Mailing Address, and ZIP Code Pat Freeman 131 Harvard SE #2 Albuquerque NM 87106	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/14/1998	Amount of Each Disbursement This Period 199.04

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE B	ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	7 / 8
			FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Bob Anderson for Congress

Full Name, Mailing Address, and ZIP Code First Impression, Inc. 6204 Lomas NE Albuquerque NM 87110	Purpose of Disbursement 2500 Brochures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/14/1998	Amount of Each Disbursement This Period 615.43
Full Name, Mailing Address, and ZIP Code Don Mickey Designs 3909 Central NE Albuquerque NM 87108	Purpose of Disbursement 1000 Envelopes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/14/1998	Amount of Each Disbursement This Period 163.48
Full Name, Mailing Address, and ZIP Code First Impression, Inc. 6204 Lomas NE Albuquerque NM 87110	Purpose of Disbursement 50 Campaign Info Books Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/19/1998	Amount of Each Disbursement This Period 475.62
Full Name, Mailing Address, and ZIP Code Bob Anderson 1623 Darlmouth NE Albuquerque NM 87106	Purpose of Disbursement (House - NM - 1) Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/25/1998	Amount of Each Disbursement This Period 330.00
Full Name, Mailing Address, and ZIP Code Pat Freeman 131 Harvard SE #2 Albuquerque NM 87106	Purpose of Disbursement Reimbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/25/1998	Amount of Each Disbursement This Period 490.18
Full Name, Mailing Address, and ZIP Code Nancy Padilla 4312 Marquette NE Albuquerque NM 87106	Purpose of Disbursement Consulting Fee Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/25/1998	Amount of Each Disbursement This Period 200.00
Full Name, Mailing Address, and ZIP Code New Mexico State Fair PO Box 6548 Albuquerque NM 87198	Purpose of Disbursement Booth Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 08/28/1998	Amount of Each Disbursement This Period 300.00
Full Name, Mailing Address, and ZIP Code On the Road Productions 4527 Sunnydale Albuquerque NM 87110	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/01/1998	Amount of Each Disbursement This Period 500.00
Full Name, Mailing Address, and ZIP Code Mitch Buszek PO Box 16316 Santa Fe NM 87506	Purpose of Disbursement Consulting/Fundraising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Date (month, day, year) 09/02/1998	Amount of Each Disbursement This Period 404.20

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

