

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION FILE ROOM

FEB 23 11 00 AM '98

USE FEC MAKING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full) MBNA Corporation Federal Political Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported MBNA Corporation	
CITY, STATE and ZIP CODE Wilmington, DE 19884-0616	2. FEC IDENTIFICATION NUMBER C00282868
	3. <input checked="" type="checkbox"/> 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
6. Covering Period <u>01/01/98</u> through <u>01/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 152,986.70
(b) Cash on Hand at Beginning of Reporting Period	\$ 152,986.70	
(c) Total Receipts (from Line 19)	\$ 48,434.93	\$ 46,434.93
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 199,421.63	\$ 199,421.63
7. Total Disbursements (from Line 30)	\$ 11,500.00	\$ 11,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 187,921.63	\$ 187,921.63
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 800-426-9930 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 John W. Schiefen	
Signature of Treasurer 	Date 2/19/98

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

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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/81)

NAME OF COMMITTEE MBNA Corporation Federal Political Committee		REPORT COVERING PERIOD		
		FROM 01/01/88	TO 01/31/88	
		COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts				
11.	Contributions (other than loans) From:			
a.	Individual/Persons Other Than Political Committees			
	I. Itemized (use Schedule A)	6,051.67	6,051.67	11(a)(i)
	II. Unitemized	40,383.26	40,383.26	11(a)(ii)
	B. Total	46,434.93	46,434.93	11(b)(i)
 (add i and ii) >			
b.	Political Party Committees	0.00	0.00	11(b)
c.	Other Political Committees (such as PACs)	0.00	0.00	11(c)
d.	Total Contributions	46,434.93	46,434.93	11(d)
 (add a iii, b and c) >			
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13.	All Loans Received	0.00	0.00	13
14.	Loan Repayments Received	0.00	0.00	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17.	Other Federal Receipts (Dividends, interest, etc.)	0.00	0.00	17
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19.	Total Receipts	46,434.93	46,434.93	19
 (add 11d, 12, 13, 14, 15, 16, 17, and 18) >			
20.	Total Federal Receipts	46,434.93	46,434.93	20
 (subtract line 18 from line 19) >			
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	0.00	0.00	21(b)
c.	Total Operating Expenditures	0.00	0.00	21(c)
 (add a i, a ii, and b) >			
22.	Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	11,500.00	11,500.00	23
24.	Independent Expenditures (use Schedule E)	0.00	0.00	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441e(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)
 (add a, b and c) >			
29.	Other Disbursements	0.00	0.00	29
30.	Total Disbursements	11,500.00	11,500.00	30
 (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >			
31.	Total Federal Disbursements	11,500.00	11,500.00	31
 (subtract line 21 a ii from line 30) >			
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	46,434.93	46,434.93	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from 32)	46,434.93	46,434.93	34
35.	Total Federal Operating Expenditures	0.00	0.00	35
 (add 21 a i and 21 b) >			
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures	0.00	0.00	37
 (subtract line 35 from 36) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER 11 a i

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

NAME OF COMMITTEE (in Full)
MBNA Corporation Federal Political Committee

A. Full Name, Mailing Address and ZIP Code LANCE LORING WEAVER 1105 BERKELEY ROAD WILMINGTON, DE 19807	Name of Employer MBNA America	Date (month, day, year) 01/05/98	Amount of Each Receipt this Period 3,900.00
	Occupation Banking	Aggregate Year-to-Date > \$ 3,900.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code JANINE DENISE MARRONE 15 EVANS DR NEWARK, DE 19711	Name of Employer MBNA America	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 216.67 (\$216.67 Biweekly)
	Occupation Banking	Aggregate Year-to-Date > \$ 216.67	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code RONALD DAVIES 900 STUART RD WILMINGTON, DE 19807	Name of Employer MBNA America	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 250.00 (\$250.00 Biweekly)
	Occupation Banking	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code MICHELLE DESANT SHEPHERD 2403 MACDONOUGH RD WILMINGTON, DE 19806	Name of Employer MBNA America	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 125.00 (\$125.00 Biweekly)
	Occupation Banking	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code JOHN COCHRAN III 6 MONTCHAN DR WILMINGTON, DE 19807	Name of Employer MBNA America	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$150.00 Biweekly)
	Occupation Banking	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code TERRANCE FLYNN 944 OLD PUBLIC ROAD HOCKESSIN, DE 19707	Name of Employer MBNA America	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 125.00 (\$125.00 Biweekly)
	Occupation Banking	Aggregate Year-to-Date > \$ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code BRUCE HAMMONDS 1007 BARLEY MILL RD WILMINGTON, DE 19807	Name of Employer MBNA America	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 150.00 (\$150.00 Biweekly)
	Occupation Banking	Aggregate Year-to-Date > \$ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **4,916.67**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 2 OF 3
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)
MBNA Corporation Federal Political Committee

A. Full Name, Mailing Address and ZIP Code JOHN HEWES 1004 FARM LANE WEST CHESTER, PA 19382	Name of Employer MBNA America	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Banking	Payroll Deduction	200.00 (\$200.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Biweekly
B. Full Name, Mailing Address and ZIP Code M. SCOT KAUFMAN 303 RHINEFORTE DRIVE CHURCHVILLE, MD 21028	Name of Employer MBNA America	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Banking	Payroll Deduction	150.00 (\$150.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		Biweekly
C. Full Name, Mailing Address and ZIP Code RICHARD STRUTHERS 800 OLD KENNETT RD WILMINGTON, DE 19807	Name of Employer MBNA America	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Banking	Payroll Deduction	125.00 (\$125.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		Biweekly
D. Full Name, Mailing Address and ZIP Code VERNON WRIGHT 21819 GUNPOWDER RD LINEBORO, MD 21102	Name of Employer MBNA America	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Banking	Payroll Deduction	125.00 (\$125.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		Biweekly
E. Full Name, Mailing Address and ZIP Code JEFFREY FINCHER 7108 COLESBROOKE DR HUDSON, OH 44236	Name of Employer MBNA America	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Banking	Payroll Deduction	160.00 (\$160.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 240.00		Biweekly
F. Full Name, Mailing Address and ZIP Code JOHN SCHEFLEN 911 AUGUSTA RD GREENVILLE, DE 19807	Name of Employer MBNA America	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Banking	Payroll Deduction	125.00 (\$125.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		Biweekly
G. Full Name, Mailing Address and ZIP Code ROBERT J FRASER 1100 BERKELEY ROAD WILMINGTON, DE 19807	Name of Employer MBNA America	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation Banking	Payroll Deduction	125.00 (\$125.00)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		Biweekly

SUBTOTAL of Receipts This Page (optional) **1,010.00**

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**

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NAME OF COMMITTEE (in Full)
MBNA Corporation Federal Political Committee

A. Full Name, Mailing Address and ZIP Code WILLIAM DAIGER 105 KILDONAN GLEN CENTREVILLE, DE 19807	Name of Employer MBNA America	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 126.00 (\$125.00 Biweekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Banking Aggregate Year-to-Date > \$ 250.00		
B. 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
C. 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
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)	125.00
TOTAL This Period (last page this line number only)	6,051.67

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
MBNA Corporation Federal Political Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
ARMEY FOR CONGRESS 4451 BRKFLD CORP DR, SUITE 200 CHANTILLY, VA 22021	Dick Arney, 28th TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	01/23/98	2,000.00
B. Full Name, Mailing Address and ZIP Code FRIENDS OF JOHN BOEHNER 7908 CINCINNATI - DAYTON RD WESTCHESTER, OH 45069	John Boehner, 8th OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	01/23/98	1,000.00
C. Full Name, Mailing Address and ZIP Code GRASSLEY COMMITTEE P.O. BOX 6193 ALEXANDRIA, VA 22306	Charles E. Grassley, 51 IA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	01/15/98	2,000.00
D. Full Name, Mailing Address and ZIP Code JENKINS FOR CONGRESS P.O. BOX 640 ROGERSVILLE, TN 37867	Bill Jenkins, 1st TN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	01/23/98	2,500.00
E. Full Name, Mailing Address and ZIP Code MCCAIN FOR SENATE 507 Capitol Court NE, #100 Washington, DC 20002	John McCain, U.S. SENATE AZ Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	01/06/98	3,000.00
F. Full Name, Mailing Address and ZIP Code STEVE SCHIFF FOR CONGRESS P.O. Box 25185 Albuquerque, NM 87125	Steven H. Schiff, U.S. HOUSE 1st NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	01/06/98	1,000.00
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)	11,500.00
TOTAL This Period (last page this line number only)	11,500.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 2/20/98
<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	
 E.S.	 2/23/98
PREPARER	DATE PREPARED