

# REPORT OF RECEIPTS AND DISBURSEMENTS

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For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSIONS MAIL ROOM

1. NAME OF COMMITTEE (In full) <b>Ralph Neas for Congress</b>		2. FEC IDENTIFICATION NUMBER C00329987
ADDRESS (number and street) P.O. Box 70744	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Chevy Chase MD 20813	STATE / DISTRICT MD / 08	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

## 4. TYPE OF REPORT

- April 15 Quarterly Report  Twelfth day report preceding \_\_\_\_\_  
(election type)
- July 15 Quarterly Report election on \_\_\_\_\_ in the State of \_\_\_\_\_
- October 15 Quarterly Report  Thirtieth day report following the General Election
- January 31 Year End Report on 11/03/1998 in the State of MD
- July 31 Mid-Year Report (Non-election Year Only)  Termination report

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

## SUMMARY

5. Covering period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>10/15/1998</u> through <u>11/23/1998</u>		
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(a))	122036.00	489184.70
(b) Total Contribution Refunds (from line 20(d))	0.00	2250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	122036.00	486934.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	281182.98	720630.78
(b) Total Offsets to Operating Expenditures (from line 14)	10.00	805.43
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	281152.98	719825.33
8. Cash on Hand at Close of Reporting Period (from line 27)	856.14	
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)	85822.14	

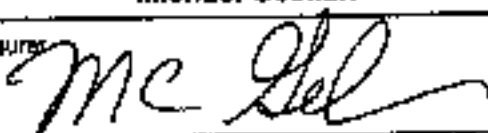
For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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

Type or Print Name of Treasurer

**Michael Gebman**

Signature of Treasurer



Date

12/01/98

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 3**  
(revised 4/87)

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

Name of Committee (in full) Ralph Nease for Congress	Report Covering the Period From: 10/15/1998 To: 11/23/1998	
<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-To-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	49020.00	
(ii) Unitemized	32765.00	
(iii) Total of contributions from individuals	81785.00	382578.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	40250.00	108100.00
(d) The Candidate	0.00	206.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	122036.00	489184.70
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate	65000.00	65000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	65000.00	65000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	10.00	805.43
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	102.99	2283.61
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	187148.99	657253.74
<b>II. DISBURSEMENTS</b>		
<b>17. OPERATING EXPENDITURES</b>	281162.96	720630.76
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00
<b>19. LOAN REPAYMENTS:</b>		
(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
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees	0.00	1750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	2250.00
<b>21. OTHER DISBURSEMENTS</b>	0.00	6802.61
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	281162.96	728483.37
<b>III. CASH SUMMARY</b>		
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>		74970.11
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>		187148.89
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>		262119.10
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>		281162.96
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>		80956.14

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. S. Decker Anstrom 7711 Southdown Road  Alexandria VA 22308	<b>Name of Employer</b> Nat'l Cable TV Association	<b>Date (month, day, year)</b> 10/18/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Executive	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Perry Apfelbaum 2939 Van Ness Street NW  Washington DC 20008	<b>Name of Employer</b> U.S. Congress	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 75.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Lawyer	<b>Aggregate Year-to-Date</b> > \$ 225.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Judith Areen 4912 Rosemary Street  Chevy Chase MD 20815	<b>Name of Employer</b> Georgetown University Law School	<b>Date (month, day, year)</b> 10/15/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Dean	<b>Aggregate Year-to-Date</b> > \$ 1000.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. John Barnes 7710 Chatham Road  Chevy Chase MD 20815	<b>Name of Employer</b> US Nat'l Inst. of Standards and Tech	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Federal Employee	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Timothy Bernsola 7301 Pinehurst Parkway  Chevy Chase MD 20815	<b>Name of Employer</b> Nat'l Center on Education	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Program Director	<b>Aggregate Year-to-Date</b> > \$ 250.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Birch Bayh 3805 Blackthorn Street  Chevy Chase MD 20815	<b>Name of Employer</b> Oppenheimer, Wolff, Donnelly, Bayh	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > \$ 500.00	
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Paul Berger 555 12th Street, NW  Washington DC 20004	<b>Name of Employer</b> Arnold & Porter	<b>Date (month, day, year)</b> 11/02/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney	<b>Aggregate Year-to-Date</b> > \$ 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

FOR LINE NUMBER  
11A

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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Roger Barber 6900 Canal Bridge Court Potomac MD 20854	Brady & Barber Occupation: Lawyer	10/22/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00		
Mr. David S. Blinbaum 9524 Woodington Dr. Potomac MD 20854	Blinbaum Interpreting Service Occupation: President	10/20/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Ms. Daphna Bloomberg 9904 Barstow Ct. Potomac MD 20854	Self Occupation: Interior Designer	10/23/1998	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Ms. Anne Brooks 2500 Virginia Avenue, NW Suite 300 Washington DC 20037	Retired Occupation:	10/26/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Mr. Jeremiah Buckley 4516 Elliott Street, NW Washington DC 20016	Goodwin, Proctor, & Hoar Occupation: Attorney	10/28/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Mr. Lee Burshtyn 1506 Blue Meadow Rd. Potomac MD 20854	Weichert Realtors Occupation: Realtor	10/17/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1500.00		
Mr. Bruce Cameron 1725 17th Street NW, #109 Washington DC 20009	Self Occupation: Lobbyist	10/28/1998	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
<b>TOTALS This Period (last page this line number only)</b> .....			

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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shu-Ping Chan 5809 Nicholson Lane, Apt. 305 North Bethesda MD 20852	MD Gov's Ofc on Asian-Pac Amer Affairs Occupation: Executive Director	10/19/1998	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		
Mr. Norman Christler 3801 Tarkington Lane Silver Spring MD 20908	N/A Occupation: Retired	10/23/1998	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Mr. Charles Curtis 5300 Hamden Lane Bethesda MD 20814	Hogan & Harrison Occupation: Attorney	10/22/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 350.00		
Mr. Michael Daniels 5615 Bent Branch Road Bethesda MD 20816	Powell, Goldstein Occupation: Attorney	10/20/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Mr. Timothy Davis 3106 Leland Street Cherry Chase MD 20815	Information Requested Occupation: Information Requested	10/15/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Mr. Anthony DiCaprio 5213 Silverfox Jamesville NY 13078	Anthony P. DiCaprio, P.C. Occupation: Lawyer	11/02/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00		
Mr. Albert Dwozkin 3050 Chain Bridge Road, Suite 200 Fairfax VA 22030-2884	A.J. Dwozkin & Associates Occupation: CEO	10/23/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

Full Name, Mailing Address, and ZIP Code	Name of Employer Information Requested	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Daniel Dyer 6455 Colesville Road, Suite 1250  Silver Spring MD 20910-3320 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested  Occupation Information Requested Aggregate Year-to-Date > \$ 500.00	10/23/1998	500.00
Ms. Sandra Eckert 6315 Evermay Drive  McLean VA 22101-2309 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation Homemaker Aggregate Year-to-Date > \$ 250.00	10/15/1998	250.00
Mr. Peter Edelman 3208 Newark Street, NW  Washington DC 20008 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Georgetown University  Occupation Professor Aggregate Year-to-Date > \$ 450.00	10/23/1998	250.00
Mr. John Elliott 925 Harvest Drive  Blue Bell PA 19422 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Union Meeting Corp Center V  Occupation Executive Aggregate Year-to-Date > \$ 1000.00	10/15/1998	1000.00
Mr. Robert Evans 317 Brown Street P.O. Box 332 Washington Grove MD 20680 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer American Bar Assn  Occupation Lawyer Aggregate Year-to-Date > \$ 450.00	10/28/1998	100.00
Mr. Robert Evans 317 Brown Street P.O. Box 332 Washington Grove MD 20680 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer American Bar Assn  Occupation Lawyer Aggregate Year-to-Date > \$ 450.00	10/22/1998	100.00
Mr. Fred Ezra 7501 Fairfax Road  Beltsville MD 20814 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self  Occupation Real Estate Broker Aggregate Year-to-Date > \$ 1200.00	11/02/1998	500.00
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
<b>TOTALS This Period (last page this line number only)</b> .....			

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**NAME OF COMMITTEE (In Full)**  
**Ralph Neas for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Howell Ferguson P.O. Box 150  Tallahassee FL 32302	<b>Name of Employer</b> Landers & Parson, PA	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Occupation</b> Attorney		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Edith Fierst 4114 Rosemary St.  Chevy Chase MD 20815	<b>Name of Employer</b> NA	<b>Date (month, day, year)</b> 10/23/1998	<b>Amount of Each Receipt this Period</b> 100.00
	<b>Occupation</b> Retired		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 350.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. John Franczek 400 E. Randolph Street Unit 2228 Chicago IL 60627	<b>Name of Employer</b> Cook County	<b>Date (month, day, year)</b> 11/09/1998	<b>Amount of Each Receipt this Period</b> 500.00
	<b>Occupation</b> Civil Servant		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. John Garamendi 14216 Highway 180  Walnut Grove CA 95690	<b>Name of Employer</b> Dept of the Interior	<b>Date (month, day, year)</b> 11/02/1998	<b>Amount of Each Receipt this Period</b> 250.00
	<b>Occupation</b> Dept Secretary		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Raymond Gibbs 4849 Langdrum Lane  Bethesda MD 20815	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 11/02/1998	<b>Amount of Each Receipt this Period</b> 250.00
	<b>Occupation</b> Lawyer		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1550.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Raymond Gibbs 4848 Langdrum Lane  Bethesda MD 20815	<b>Name of Employer</b> Self	<b>Date (month, day, year)</b> 10/22/1998	<b>Amount of Each Receipt this Period</b> 100.00
	<b>Occupation</b> Lawyer		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1550.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Reginald Gilliam 10705 Regency Forest Drive  Vienna VA 22181	<b>Name of Employer</b> Hill & Knowlton	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 250.00
	<b>Occupation</b> Lobbyist		
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code Mr. Marc Ginsberg	Name of Employer Georgetown Global Investments	Date (month, day, year) 10/20/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Banker		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Mr. Jeffrey Golan 9 College Ave.  Swarthmore PA 19081	Name of Employer Barrack, Rodas, & Bacina	Date (month, day, year) 10/15/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Mr. Andrew Goldfarb 9010 Briery Road  Chevy Chase MD 20815	Name of Employer Fox, Bennett & Turner	Date (month, day, year) 10/15/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-to-Date > \$ 650.00			
Full Name, Mailing Address, and ZIP Code Ms. Annie Griffin 1015 33rd Street, NW  Washington DC 20007	Name of Employer Information Requested	Date (month, day, year) 10/22/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested		
Aggregate Year-to-Date > \$ 250.00			
Full Name, Mailing Address, and ZIP Code Ms. Elizabeth Griffin 4815 North Park Avenue, #820  Chevy Chase MD 20815	Name of Employer National Public Radio	Date (month, day, year) 11/09/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Assistant Vice President		
Aggregate Year-to-Date > \$ 700.00			
Full Name, Mailing Address, and ZIP Code Mr. Isaac Groner 3304 Wakea Drive  Kensington MD 20895	Name of Employer Self	Date (month, day, year) 10/22/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-to-Date > \$ 500.00			
Full Name, Mailing Address, and ZIP Code Mr. Michael Heaton 715 Forest Avenue  Wilmette IL 60091	Name of Employer O'Keefe, Ashenden, Lyons & Ward	Date (month, day, year) 11/05/1998	Amount of Each Receipt this Period 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		
Aggregate Year-to-Date > \$ 450.00			

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Douglas Huron 1864 Monroe Street NW Washington DC 20010	Heller, Huron Occupation Lawyer	10/15/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 2000.00		
Mr. Paul Igasaki 1259 Quaker Hill Drive Alexandria VA 22314	EEOC Occupation Vice Chair	10/29/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 250.00		
Mr. Michael Iskowitz 1716 15th Street, NW, #22 Washington DC 20008	U.S. Congress Occupation Counsel	10/26/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 500.00		
Ms. Betsy Jacobs 625 Maple Avenue Wilmette IL 60091	Attorney Occupation	10/20/1998	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 300.00		
Ms. Elaine Jones 1417 Whittier Street, NW Washington DC 20012	NACP-LDF Occupation Attorney	10/23/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 500.00		
Mr. Michael Jones 5801 Bruce Drive Silver Spring MD 20901	Natl Assoc. of Securities Dealers Occupation Lawyer	10/23/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 1500.00		
Mr. George Joseph 7601 Rosadhu Court Chevy Chase MD 20815	Information Requested Occupation Information Requested	10/29/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 250.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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**NAME OF COMMITTEE (In Full)**  
**Ralph Neas for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Peter Kadzak 2531 N. Wakefield St.  Arlington VA 22207	<b>Name of Employer</b> Dickstein, Shapiro, Morin & Oshinsky  <b>Occupation</b> Lawyer	<b>Date (month, day, year)</b> 11/05/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 750.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Ruth Kainen 27 West Irving Street  Chevy Chase MD 20815	<b>Name of Employer</b> Retired  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Edward Kaplan 1000 Connecticut Ave., #1110  Washington MD 20036	<b>Name of Employer</b> Chesapeake Management  <b>Occupation</b> Executive	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. John Kemp 2555 Pennsylvania Avenue, NW Apt. 609 Washington DC 20037	<b>Name of Employer</b> Very Special Arts  <b>Occupation</b> Executive	<b>Date (month, day, year)</b> 10/19/1998	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 350.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Cal Klausner 4520 East-West Highway, Suite 640  Bethesda MD 20814-3352	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested	<b>Date (month, day, year)</b> 10/22/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Edward Koenig 4319 Kentbury Drive  Bethesda MD 20814	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 10/15/1998	<b>Amount of Each Receipt this Period</b> 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 780.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Edward Koenig 4319 Kentbury Drive  Bethesda MD 20814	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 11/02/1998	<b>Amount of Each Receipt this Period</b> 180.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 780.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code Mr. Joseph Kolar 5917 Smallwood Drive Bethesda MD 20816	Name of Employer Attorney	Date (month, day, year) 10/26/1998	Amount of Each Receipt this Period 250.00
	Occupation Goodwin, Proctor, &		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Mr. Albert Kramer 2508 Cliffbourne Place Washington DC 20005	Name of Employer Dickstein, Shapiro	Date (month, day, year) 10/15/1998	Amount of Each Receipt this Period 250.00
	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Ms. Margery Kraus 9609 White Cedar Court Vienna VA 22181	Name of Employer APCO	Date (month, day, year) 10/18/1998	Amount of Each Receipt this Period 200.00
	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1200.00		
Full Name, Mailing Address, and ZIP Code Mr. Roger Kuhn 7108 Laverock Road Bethesda MD 20817	Name of Employer NA	Date (month, day, year) 10/23/1998	Amount of Each Receipt this Period 200.00
	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 800.00		
Full Name, Mailing Address, and ZIP Code Mr. Harvey Kushner 5450 Whitley Park Terrace, No. 6 Bethesda MD 20814	Name of Employer Kushner Management Plan	Date (month, day, year) 10/23/1998	Amount of Each Receipt this Period 500.00
	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Mr. Paul Ladd 175 W. 73rd Street, 15D New York NY 10023	Name of Employer Palma, Webber	Date (month, day, year) 10/18/1998	Amount of Each Receipt this Period 1000.00
	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code Ms. Barbara Laur 10300 Lanston Lane Silver Spring MD 20903	Name of Employer Florence Crittenton Services	Date (month, day, year) 10/20/1998	Amount of Each Receipt this Period 250.00
	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Edward Leahy 6026 Orms Street  McLean VA 22101	<b>Name of Employer</b> Boston College Law School  <b>Occupation</b> Lawyer	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mrs. Catherine Leggett 4401 Dustin Road  Burtonsville MD 20868	<b>Name of Employer</b> US Generating Company  <b>Occupation</b> Senior VP- Human Relations	<b>Date (month, day, year)</b> 10/16/1998	<b>Amount of Each Receipt this Period</b> 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Michael Lenoff 1884 Middlebridge Dr.  Silver Spring MD 20908	<b>Name of Employer</b> The Cuno Law Group  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 10/15/1998	<b>Amount of Each Receipt this Period</b> 200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 400.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Terry Lenzner 1140 Connecticut Avenue 4th Floor Washington DC 20016-3151	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 11/19/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Enrique Lersau 9716 Bye Forde Rd.  Kensington MD 20895	<b>Name of Employer</b> Retired  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/25/1998	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 300.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Leonard Levin 15 Brookridge Road  New Rochelle NY 10804	<b>Name of Employer</b> BDO Seidman, L.L.P.  <b>Occupation</b> Lawyer	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Michael Lin 11213 Blackhorse Court  Potomac MD 20854	<b>Name of Employer</b> NIH  <b>Occupation</b> Health Scientist	<b>Date (month, day, year)</b> 10/19/1998	<b>Amount of Each Receipt this Period</b> 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 285.00		

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Jeff Lies 3904 Woodbine Street  Chevy Chase MD 20815	<b>Name of Employer</b> Piper & Marberry  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 11/02/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 750.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Paul Marchand 954 Main Street  Deal MD 20751	<b>Name of Employer</b> THE Arc  <b>Occupation</b> Director Govt. Affairs	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 200.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 650.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Deborah Metz 313 Lawton Street  McLean VA 22101	<b>Name of Employer</b> USDA  <b>Occupation</b> Postal Appointee	<b>Date (month, day, year)</b> 10/26/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. WR McKinnon 3685 Upton Street, NW  Washington DC 20006	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested	<b>Date (month, day, year)</b> 10/18/1998	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Joseph McMahon 1924 N. St. NW  Washington DC 20036	<b>Name of Employer</b> McMahon & Associates  <b>Occupation</b> Owner	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Receipt this Period</b> 750.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 2000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Jane Merkin Westlake Terrace  Bethesda MD 20817	<b>Name of Employer</b> Small Business Administration  <b>Occupation</b> Federal Employee	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Melody Miller 4411 Garfield Street NW  Washington DC 20007	<b>Name of Employer</b> U.S. Senate  <b>Occupation</b> Deputy Press Secretary	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 150.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 400.00		

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Shirley Miller PO Box 59855  Potomac MD 20850-0555  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Retired  <b>Occupation</b>  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Carol Minchberg 8040 Edgington Drive  Chevy Chase MD 20815  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Health Care Administration  <b>Occupation</b> Federal Employee  <b>Aggregate Year-to-Date</b> > \$ 325.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 200.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Elsie Neas 15 E. McDonald Road  Pinhurst NC 28374  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> n/a  <b>Occupation</b> Retired  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. James O'Connell 17200 Conroy Road Box 385 Barnesville MD 20838  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 300.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Susan O'Neill 5910 Glaston Road  Bethesda MD 20818  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  <b>Aggregate Year-to-Date</b> > \$ 250.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. John O'Sullivan 3410 Newark Street, NW  Washington DC 20018  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Chadbourne & Park  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 300.00	<b>Date (month, day, year)</b> 11/02/1998	<b>Amount of Each Receipt this Period</b> 300.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Becky Ogle 5225 Peckes Hill Rd.  Bethesda MD 20814  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Retired  <b>Occupation</b>  <b>Aggregate Year-to-Date</b> > \$ 600.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 250.00

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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

Full Name, Mailing Address, and ZIP Code Ms. Becky Ogle 5225 Pooks Hill Rd.  Bethesda MD 20814	Name of Employer Retired	Date (month, day, year) 10/18/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Ms. Grace Orfensky 7727 Rocton Avenue  Chevy Chase MD 20815	Name of Employer Retired	Date (month, day, year) 10/28/1998	Amount of Each Receipt this Period 150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 375.00	
Full Name, Mailing Address, and ZIP Code Ms. Grace Orfensky 7727 Rocton Avenue  Chevy Chase MD 20815	Name of Employer Retired	Date (month, day, year) 10/28/1998	Amount of Each Receipt this Period 25.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 375.00	
Full Name, Mailing Address, and ZIP Code Mr. Chung Pak 228 Grange Hall Drive  Gaithersburg MD 20877	Name of Employer U.S. Patent & Trademark Office	Date (month, day, year) 10/19/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Patent Judge	Aggregate Year-to-Date > \$ 350.00	
Full Name, Mailing Address, and ZIP Code Mr. David Patrick 75 Hinckley Road  Milton MA 02188	Name of Employer Day, Berry & Howard	Date (month, day, year) 11/09/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$ 1500.00	
Full Name, Mailing Address, and ZIP Code Mr. John Pickering 6317 Blackstone Rd.  Bethesda MD 20815	Name of Employer Wilmer, Cutler & Pickering	Date (month, day, year) 11/02/1998	Amount of Each Receipt this Period 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 400.00	
Full Name, Mailing Address, and ZIP Code Mr. Howard Polinger 3302 Shirley Lane  Chevy Chase MD 20815	Name of Employer Information Requested	Date (month, day, year) 10/28/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested	Aggregate Year-to-Date > \$ 500.00	

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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Michele Pollak 2708 Rittenhouse Street, NW  Washington DC 20015  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> AARP  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. B. Michael Rauh 5891 Parenham Way  Alexandria VA 22203  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Monett, Phelps & Phillips  <b>Occupation</b> Attorney  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Margaret Rauh 5891 Parenham Way  Alexandria VA 22310-5301  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> MNR Enterprises  <b>Occupation</b> President  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Joseph Romer 304 N. Virginia Ave.  Falls Church VA 22048  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Easter Seals  <b>Occupation</b> Ex. VP of Public Affairs  <b>Aggregate Year-to-Date</b> > \$ 500.00	<b>Date (month, day, year)</b> 10/20/1998	<b>Amount of Each Receipt this Period</b> 150.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Otto Ruesch 1 Primrose Street  Chevy Chase MD 20815  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  <b>Occupation</b> Businessman  <b>Aggregate Year-to-Date</b> > \$ 2000.00	<b>Date (month, day, year)</b> 10/15/1998	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Richard Schifter 3465 Macomb Street, NW  Washington DC 20016  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Texas Pacific Grove  <b>Occupation</b> Investor  <b>Aggregate Year-to-Date</b> > \$ 1000.00	<b>Date (month, day, year)</b> 10/15/1998	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Roger Schneider 6318 Massachusetts Ave.  Beltsville MD 20816  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Information Requested  <b>Occupation</b> Information Requested  <b>Aggregate Year-to-Date</b> > \$ 800.00	<b>Date (month, day, year)</b> 10/20/1998	<b>Amount of Each Receipt this Period</b> 500.00

**SUBTOTALS** of Receipts This Page (Optional) .....

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A

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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Roald Schrack 13 Farsta Court Rockville MD 20850-2747	N/A Occupation: Retired	10/28/1998	40.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Mr. Herman Schwartz 4818 Chevy Chase Blvd. Chevy Chase MD 20815	Washington College of Law Occupation: Professor	10/28/1998	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
Mr. Steven Shincure 18664 Queen Elizabeth Drive Brockville MD 20833	Self Occupation: Physician	10/19/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Mr. Mark Shriver 10014 Carter Road Bethesda MD 20817	State of Maryland Occupation: Delegate	10/19/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Ms. Janet Smith 10413 Boswell Lane Potomac MD 20854	The Ivy Planning Group Occupation: President	10/28/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Ms. Lara Smith 3325 Steiner #2 San Francisco CA 94123	Frankel & Company Occupation: Advertising Executive	11/12/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Mr. Tefft Smith, Jr. 2000 Grand Avenue South Apt #1 Minneapolis MN 55405	Adart Productions Occupation: Graphic Designer	11/12/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		

**SUBTOTALS** of Receipts This Page (Optional) .....

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FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

<p><b>Full Name, Mailing Address, and ZIP Code</b> Mr. Chong Nak Son 8811 Meriden Road Prlomac MD 20854</p>	<p><b>Name of Employer</b> Quality Foods, Inc.</p>	<p><b>Date (month, day, year)</b> 10/20/1998</p>	<p><b>Amount of Each Receipt this Period</b> 500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Occupation</b> President</p>	<p><b>Aggregate Year-to-Date</b> &gt; \$ 500.00</p>	
<p><b>Full Name, Mailing Address, and ZIP Code</b> Mr. Ken South 1212 Parrish Drive Rookville MD 20851-2139</p>	<p><b>Name of Employer</b> Information Requested</p>	<p><b>Date (month, day, year)</b> 10/23/1998</p>	<p><b>Amount of Each Receipt this Period</b> 200.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Occupation</b> Information Requested</p>	<p><b>Aggregate Year-to-Date</b> &gt; \$ 300.00</p>	
<p><b>Full Name, Mailing Address, and ZIP Code</b> Mr. George Spangler 22 Virginia Drive Gaithersburg MD 20877</p>	<p><b>Name of Employer</b> Self</p>	<p><b>Date (month, day, year)</b> 10/19/1998</p>	<p><b>Amount of Each Receipt this Period</b> 250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Occupation</b> Attorney</p>	<p><b>Aggregate Year-to-Date</b> &gt; \$ 350.00</p>	
<p><b>Full Name, Mailing Address, and ZIP Code</b> Mr. Michael Straight 6 Tucker's Trail Chilmark MA 02535</p>	<p><b>Name of Employer</b> Self</p>	<p><b>Date (month, day, year)</b> 10/20/1998</p>	<p><b>Amount of Each Receipt this Period</b> 300.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Occupation</b> Writer</p>	<p><b>Aggregate Year-to-Date</b> &gt; \$ 300.00</p>	
<p><b>Full Name, Mailing Address, and ZIP Code</b> Ms. Barbara Styrt 4400 East-West Highway #227 Bethesda ME 20814</p>	<p><b>Name of Employer</b> USFDA</p>	<p><b>Date (month, day, year)</b> 10/28/1998</p>	<p><b>Amount of Each Receipt this Period</b> 50.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Occupation</b> Physician</p>	<p><b>Aggregate Year-to-Date</b> &gt; \$ 250.00</p>	
<p><b>Full Name, Mailing Address, and ZIP Code</b> Mr. William Sullivan 300 South Wacker Drive Suite 3400 Chicago IL 60606-6785</p>	<p><b>Name of Employer</b> Franczek &amp; Sullivan</p>	<p><b>Date (month, day, year)</b> 11/05/1998</p>	<p><b>Amount of Each Receipt this Period</b> 600.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Occupation</b> Attorney</p>	<p><b>Aggregate Year-to-Date</b> &gt; \$ 600.00</p>	
<p><b>Full Name, Mailing Address, and ZIP Code</b> Mr. Rick Swartz 1816 Park Road NW Washington DC 20010</p>	<p><b>Name of Employer</b> Swartz &amp; Associates</p>	<p><b>Date (month, day, year)</b> 10/15/1998</p>	<p><b>Amount of Each Receipt this Period</b> 600.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p><b>Occupation</b> Political Consultant</p>	<p><b>Aggregate Year-to-Date</b> &gt; \$ 2000.00</p>	

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A1

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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ms. Mary Swedin 3123 Coker Road Falls Church VA 22042 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Small Business Administration Occupation Asst. Administrator Aggregate Year-to-Date \$ 250.00	10/28/1998	250.00
Mr. John Travine 2830 Van Ness Street, NW No. 562 Washington DC 20008 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Immigration-Dept of Justice Occupation Special Counsel Aggregate Year-to-Date \$ 250.00	10/18/1998	250.00
Mr. Philip Verveer 2125 Leroy Place Washington DC 20008 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Wilkie, Ferr & Gallagher Occupation Lawyer Aggregate Year-to-Date \$ 1000.00	11/02/1998	500.00
Mr. Richard Verville 5301 Potomac Ave. NW Washington DC 20016 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Power Pyles Sutter Occupation Lawyer Aggregate Year-to-Date \$ 1500.00	10/21/1998	500.00
Ms. Sarah Von der Lippe 115 E Street SE, Apt. 303 Washington DC 20003 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation Lawyer Aggregate Year-to-Date \$ 850.00	10/28/1998	100.00
Mr. Gregory Volaw 6717 Loring Court Bethesda MD 20817 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	NA Occupation Retired Aggregate Year-to-Date \$ 600.00	10/22/1998	100.00
Mr. Richard Waldhorn 3713 Williams Lane Chevy Chase MD 20815 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Georgetown Hospital Occupation Doctor Aggregate Year-to-Date \$ 1000.00	11/02/1998	1000.00

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Robert Waters 1604 Cresswood Ln.  McLean VA 22101	<b>Name of Employer</b> Arent Fox  <b>Occupation</b> Lawyer	<b>Date (month, day, year)</b> 10/20/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> \$ 750.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Mark Weinberg 11517 Regency Drive  Potomac MD 20854	<b>Name of Employer</b> Weinberg & Jacobs  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 10/15/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Maureen West 718 Highland Drive  Bellingham WA 98225	<b>Name of Employer</b> Self  <b>Occupation</b> Nurse	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 750.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> \$ 1750.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Timothy Westmoreland 601 Albany Avenue  Takoma Park MD 20912-4199	<b>Name of Employer</b> Georgetown University Law Center  <b>Occupation</b> Law Professor	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> \$ 1500.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Wendy White 7011 Meadow Lane  Chevy Chase MD 20815	<b>Name of Employer</b> Shea Gardiner  <b>Occupation</b> Attorney	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Anna Woking 5128 Overlea Road  Bethesda MD 20816-2241	<b>Name of Employer</b> Self  <b>Occupation</b> Consultant	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Receipt this Period</b> 250.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> \$ 250.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Susan Wynne 3503 Littledale Road  Kensington MD 20895	<b>Name of Employer</b> N/A  <b>Occupation</b> Homemaker	<b>Date (month, day, year)</b> 10/19/1998	<b>Amount of Each Receipt this Period</b> 500.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> \$ 500.00		
<b>SUBTOTALS of Receipts This Page (Optional)</b> .....			
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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Amalgamated Transit Union COPE 5025 Wisconsin Avenue NW Washington DC 20016		11/05/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 2500.00		
Archer's Arrow PAC 400 Renaissance Center Suite 3600 Detroit MI 48243-1658		10/18/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
California Energy Co., INC 10631 Old Mill Road Omaha NE 68154		10/17/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
Carpenters Legislative Improvement Committee 101 Constitution Avenue NW Washington DC 20001		10/15/1998	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 5000.00		
Citizens for Ida Ruben 117 Eldrid Drive Silver Spring MD 20904		10/17/1998	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 200.00		
Committee for a Democratic Consensus P.O. Box 11217 Washington DC 20008		10/28/1998	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 100.00		
Democratic Club of Leisure World		10/15/1998	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 500.00		
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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Drive Political Fund of the Int'l Brotherhood 25 Louisiana Ave., NW Washington DC 20001	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 10000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Effective Government Committee 607 14th Street Suite 800 Washington DC 20005	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 2000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Fatih for Congress	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/23/1998	<b>Amount of Each Receipt this Period</b> 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1000.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Friends of Howell Heflin Committee P.O. Box 1690 Tusculum AL 35674	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 750.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 1750.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Friends of Ike Leggett 2008 Forest Dale Drive Silver Spring MD 20903	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/16/1998	<b>Amount of Each Receipt this Period</b> 600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 600.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Friends of Len Tietelbaum 601 Northwood Terrace Silver Spring MD 20902	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Receipt this Period</b> 100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 100.00		
<b>Full Name, Mailing Address, and ZIP Code</b> Leadership '88 1800 K Street, NW Ste. 710 Washington DC 20006	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/15/1998	<b>Amount of Each Receipt this Period</b> 3000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> > \$ 3000.00		

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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Machinists Non-Partisan Political League 9000 Machinist Place Upper Marlboro MD 20772 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  Aggregate Year-to-Date > \$ 8000.00	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Receipt this Period</b> 5000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Office & Professional Employees International 8455 Colesville Road Suite 1250 Silver Spring MD 20910 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  Aggregate Year-to-Date > \$ 1100.00	<b>Date (month, day, year)</b> 10/26/1998	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> Scott for Congress P.O. Box 251 Newport News VA 23607 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  Aggregate Year-to-Date > \$ 500.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 500.00
<b>Full Name, Mailing Address, and ZIP Code</b> The Society for Korean Roots 1118 Arcola Avenue Silver Spring MD 20902 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  Aggregate Year-to-Date > \$ 100.00	<b>Date (month, day, year)</b> 10/18/1998	<b>Amount of Each Receipt this Period</b> 100.00
<b>Full Name, Mailing Address, and ZIP Code</b> UAW - V - CAP 8000 East Jefferson Avenue Detroit MI 48214-3963 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  Aggregate Year-to-Date > \$ 9000.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 5000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Unite Campaign Committee 1710 Broadway New York NY 10019 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  Aggregate Year-to-Date > \$ 1500.00	<b>Date (month, day, year)</b> 11/11/1998	<b>Amount of Each Receipt this Period</b> 1000.00
<b>Full Name, Mailing Address, and ZIP Code</b> United Food and Commercial Workers Intl Union 1775 K Street, NW Washington DC 20006 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b>  Aggregate Year-to-Date > \$ 9750.00	<b>Date (month, day, year)</b> 10/28/1998	<b>Amount of Each Receipt this Period</b> 5000.00

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	24 / 39
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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> United Steel Workers of America 5 Gateway Center  Pittsburgh PA 15222	<b>Name of Employer</b>  <b>Occupation</b>	<b>Date (month, day, year)</b> 10/21/1998	<b>Amount of Each Receipt this Period</b> 5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 9000.00	

--	--

<b>SUBTOTALS of Receipts This Page (Optional)</b> .....	
<b>TOTALS This Period (last page this line number only)</b> .....	<b>40250.00</b>



<b>SCHEDULE A</b>	<b>ITEMIZED RECEIPTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	26 / 39
			FOR LINE NUMBER 13A

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**NAME OF COMMITTEE (In Full)**  
**Ralph Neas for Congress**

<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Ralph Neas, Jr. 5207 Massachusetts Avenue  Bethesda MD 20816	<b>Name of Employer</b> The Neas Group	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Receipt this Period</b> 65000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Occupation</b> Lawyer	
		<b>Aggregate Year-to-Date</b> \$ 65000.00	

<b>SUBTOTALS of Receipts This Page (Optional)</b> .....	
<b>TOTALS This Period (last page this line number only)</b> .....	<b>65000.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

**Full Name, Mailing Address, and ZIP Code**

Franklin National Bank  
1722 Eye Street NW

Washington DC 20006

**Name of Employer**

**Date (month,  
day, year)**  
10/28/1996

**Amount of Each  
Receipt this Period**  
102.99  
Interest

**Occupation**

**Receipt For:**  Primary  General

**Aggregate Year-to-Date** > \$ 2289.61

Other (specify):

**SUBTOTALS** of Receipts This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

102.99

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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17

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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
4841 Mont. Ave. Ltd. Partnership c/o Katz & Company 817 Sever Spring Ave., Suite 400 Silver Spring MD 20910	Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/1998	600.00
Ameritel Corp. 702 East Gude Drive Rockville MD 20850	Equipment Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/09/1998	269.75
Bell Atlantic P.O. Box 648 Baltimore MD 21285-0848	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/1998	1496.51
Bell Atlantic P.O. Box 648 [MEMO ITEM] Baltimore MD 21285-0848	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/1998 See Jackie Hooper (10/29/98)	175.00
Bell Atlantic P.O. Box 648 [MEMO ITEM] Baltimore MD 21285-0848	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/1998 See Jackie Hooper (10/20/98)	125.00
Bell Atlantic P.O. Box 648 Baltimore MD 21285-0848	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/26/1998	131.80
Bell Atlantic P.O. Box 648 Baltimore MD 21285-0848	Mobile Phone Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/1998	254.82
Bell Atlantic P.O. Box 648 [MEMO ITEM] Baltimore MD 21285-0848	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/23/1998 See Phil Evans (11/23/98)	81.46
Comptroller of the Treasury P.O. Box 17132 Baltimore MD 17132	Tax Withholdings Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/1998	881.80

**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	28 / 39
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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) Ralph Neas for Congress					
Full Name, Mailing Address, and ZIP Code Ms. Angela Courtin 11030 Briarlyn Court  Fairfax Station VA 22039		Purpose of Disbursement Event Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 11/10/1998	Amount of Each Disbursement This Period 79.00
Full Name, Mailing Address, and ZIP Code Ms. Angela Courtin 11030 Briarlyn Court  Fairfax Station VA 22039		Purpose of Disbursement Fundraising Consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 11/15/1998	Amount of Each Disbursement This Period 1000.00
Full Name, Mailing Address, and ZIP Code Ms. Angela Courtin 11030 Briarlyn Court  Fairfax Station VA 22039		Purpose of Disbursement Event Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 10/29/1998	Amount of Each Disbursement This Period 99.30
Full Name, Mailing Address, and ZIP Code Dodge Color Image Express 7220 Wisconsin Avenue Bethesda MD 20814		Purpose of Disbursement Photos Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 11/23/1998 See memo	Amount of Each Disbursement This Period 62.24 Marinoff (11/23/98)
Full Name, Mailing Address, and ZIP Code Mr. Philip Evans 5225 Pooks Hill Road, #416S Bethesda MD 20814		Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 10/15/1998	Amount of Each Disbursement This Period 1701.63
Full Name, Mailing Address, and ZIP Code Mr. Philip Evans 5225 Pooks Hill Road, #416S Bethesda MD 20814		Purpose of Disbursement See memo Bell Atlantic Mobile (11/23/98) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 11/23/1998	Amount of Each Disbursement This Period 395.76
Full Name, Mailing Address, and ZIP Code Mr. Philip Evans 5225 Pooks Hill Road, #416S Bethesda MD 20814		Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 11/01/1998	Amount of Each Disbursement This Period 1701.63
Full Name, Mailing Address, and ZIP Code Mr. Philip Evans 5225 Pooks Hill Road, #416S Bethesda MD 20814		Purpose of Disbursement See memo Staples (10/30/98) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 10/30/1998	Amount of Each Disbursement This Period 237.84
Full Name, Mailing Address, and ZIP Code Mr. Philip Evans 5225 Pooks Hill Road, #416S Bethesda MD 20814		Purpose of Disbursement Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Date (month, day, year) 11/15/1998	Amount of Each Disbursement This Period 1701.83
SUBTOTALS of Disbursements This Page (Optional) .....					
TOTALS This Period (last page this line number only) .....					

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fair Lanes Bowling Center 15720 Shady Grove Road Gaithersburg MD	Fundraising Event Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/1998	214.48
Franklin National Bank 1722 Eye Street NW Washington DC 20008	Tax Withholdings Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/09/1998	2278.84
Franklin National Bank 1722 Eye Street NW Washington DC 20008	Unemployment Taxes Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/1998	150.00
Ms. Patty Gault 1830 Columbia Pike, Apt. 412 Arlington VA 22204	Research Consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/09/1998	1500.00
Gazette Newspapers 1200 Quince Orchard Blvd Gaithersburg MD	Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/16/1998	722.19
Gazette Newspapers 1200 Quince Orchard Blvd Gaithersburg MD	Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/23/1998	2553.48
Giant Supermarket 12051 Rockville Pike Rockville MD 20852	Event Catering Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/23/1998	420.67
H&W Printing Co., Inc. 3818 Oak Lane Mount Ranier MD 20712	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/09/1998	73.50
H&W Printing Co., Inc. 3818 Oak Lane Mount Ranier MD 20712	Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/09/1998	2216.40

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (in Full)**  
**Ralph Neas for Congress**

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H&W Printing Co., Inc. 3616 Oak Lane Mount Rainier MD 20712	Invitations Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/1998	1138.20
H&W Printing Co., Inc. 3616 Oak Lane Mount Rainier MD 20712	Door Hangers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/10/1998	1500.00
Mr. John Hennelly 105 6th Street SE Washington DC 20003	See Memo (Party Mail) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/1998	628.69
Mr. John Hennelly 105 6th Street SE Washington DC 20003	Field Consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/16/1998	1125.00
Mr. John Hennelly 105 6th Street SE Washington DC 20003	Field Consulting Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/1998	2250.00
Hispanics Democratic Club 43023 Star Lane Rockville MD 20852	Sample Ballot Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/28/1998	250.00
Ms. Jackie Hooper 7727 Rockton Avenue Chevy Chase MD 20815	See Bell Atlantic Phones (10/29/98) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/29/1998	175.00
Ms. Jackie Hooper 7727 Rockton Avenue Chevy Chase MD 20815	See memo Bell Atlantic Mobile 10/20/98 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/1998	125.00
Ms. Jackie Hooper 7727 Rockton Avenue Chevy Chase MD 20815	Event Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/1998	125.00

**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

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kinko's Copies 4809 Bethesda Avenue Bethesda MD 20814	Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/1998	14.18
Kinko's Copies 4809 Bethesda Avenue Bethesda MD 20814	Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/23/1998	88.02
Kinko's Copies 4809 Bethesda Avenue Bethesda MD 20814	Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/18/1998	48.60
Kinko's Copies 4809 Bethesda Avenue Bethesda MD 20814	Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/1998	37.80
Kinko's Copies 4809 Bethesda Avenue Bethesda MD 20814	Copying Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/28/1998	18.11
Mr. Ian Marinoff 4850 Connecticut Avenue, NW, #120 Washington DC 20008	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/01/1998	970.66
Mr. Ian Marinoff 4850 Connecticut Avenue, NW, #120 Washington DC 20008	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/20/1998	970.66
Mr. Ian Marinoff 4850 Connecticut Avenue, NW, #120 Washington DC 20008	See memo Staples, Dodge Photos (11/23) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/23/1998	275.70
Mr. Ian Marinoff 4850 Connecticut Avenue, NW, #120 Washington DC 20008	See memo Staples (10/29/98) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/1998	815.89

**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

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Ian Marlhoff 4850 Connecticut Avenue, NW, #120  Washington DC 20008	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/15/1998	970.65
Mr. Ian Marlhoff 4850 Connecticut Avenue, NW, #120  Washington DC 20008	Salary Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/1998	970.65
MCI P.O. Box 52251  Phoenix AZ 88072	Phones Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/09/1998	221.44
Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	TV Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/17/1998	15000.00
Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	TV Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/1998	65000.00
Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	TV Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/1998	30000.00
Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	TV Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/30/1998	5000.00
Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	Radio Advertisements Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/28/1998	15000.00
Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	TV Advertisement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/1998	25000.00

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....



<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	33 / 39
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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

<b>Full Name, Mailing Address, and ZIP Code</b> Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	<b>Purpose of Disbursement</b> TV Advertisement  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/23/1998	<b>Amount of Each Disbursement This Period</b> 25000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Media Strategies 318 Massachusetts Avenue, NE  Washington DC 20002	<b>Purpose of Disbursement</b> Radio Advertising  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Disbursement This Period</b> 12000.00
<b>Full Name, Mailing Address, and ZIP Code</b> Ms. Imelda Mehlert 9845 Campbell Drive  Kensington MD 20895	<b>Purpose of Disbursement</b> Event Supplies  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 11/09/1998	<b>Amount of Each Disbursement This Period</b> 226.85
<b>Full Name, Mailing Address, and ZIP Code</b> Montgomery County Permit Sales Office P.O. Box 8399 Silver Spring MD 20907	<b>Purpose of Disbursement</b> Travel  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/29/1998	<b>Amount of Each Disbursement This Period</b> 150.00
<b>Full Name, Mailing Address, and ZIP Code</b> Mr. Ralph Neas, Jr. 5207 Massachusetts Avenue  Bethesda MD 20816	<b>Purpose of Disbursement</b> (House - MD - 06) Misc  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 11/23/1998	<b>Amount of Each Disbursement This Period</b> 119.48
<b>Full Name, Mailing Address, and ZIP Code</b> Office of Tax and Revenue P.O. Box 7792 Ben Franklin Station Washington DC 20044	<b>Purpose of Disbursement</b> Tax Withholdings  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/27/1998	<b>Amount of Each Disbursement This Period</b> 503.40
<b>Full Name, Mailing Address, and ZIP Code</b> Party Mart 174 Halpine Road  Rockville MD 20852	<b>Purpose of Disbursement</b> Outdoor Rally Supplies  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/15/1998 See John Harmally (10/15/98)	<b>Amount of Each Disbursement This Period</b> 311.97
<b>Full Name, Mailing Address, and ZIP Code</b> Postmaster  Bethesda MD 20814	<b>Purpose of Disbursement</b> Mail  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/17/1998	<b>Amount of Each Disbursement This Period</b> 840.00
<b>Full Name, Mailing Address, and ZIP Code</b> Postmaster  Bethesda MD 20814	<b>Purpose of Disbursement</b> Mail  Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	<b>Date (month, day, year)</b> 10/30/1998	<b>Amount of Each Disbursement This Period</b> 1209.21

**SUBTOTALS of Disbursements This Page (Optional)** .....

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/15/1998	12.22
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/28/1998	282.83
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/16/1998	860.00
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/18/1998	33.00
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/18/1998	84.00
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/21/1998	182.02
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	11/23/1998	84.00
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/18/1998	270.65
Postmaster Bethesda MD 20814	Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/20/1998	320.00

**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

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FOR LINE NUMBER  
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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

<p><b>Full Name, Mailing Address, and ZIP Code</b> Postmaster  Bethesda MD 20814</p>	<p><b>Purpose of Disbursement</b> Mail Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 10/23/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 840.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> PR Promotions P.O. Box 34407  Bethesda MD 20827</p>	<p><b>Purpose of Disbursement</b> Yard signs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 10/18/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 945.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> PR Promotions P.O. Box 34407  Bethesda MD 20827</p>	<p><b>Purpose of Disbursement</b> Yard Signs Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 11/09/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 284.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> PR Promotions P.O. Box 34407  Bethesda MD 20827</p>	<p><b>Purpose of Disbursement</b> Field Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 10/31/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 14.78</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> PR Promotions P.O. Box 34407  Bethesda MD 20827</p>	<p><b>Purpose of Disbursement</b> Label Stickers Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 10/21/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 212.27</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> Print 1 4710 Bethesda Avenue  Bethesda MD 20814</p>	<p><b>Purpose of Disbursement</b> Printing Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 11/09/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 67.57</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> Seder, Laguerre, &amp; Hamburger 1817 Adams Mill Road NW  Washington DC 20008</p>	<p><b>Purpose of Disbursement</b> TV Production Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 10/16/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 11299.07</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> SmartOffice Services 601 Indiana Avenue, NW  Washington DC 20004</p>	<p><b>Purpose of Disbursement</b> Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 11/09/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 70.00</p>
<p><b>Full Name, Mailing Address, and ZIP Code</b> Staples Wisconsin Ave &amp; Bradley Blvd  Bethesda MD 20814</p>	<p><b>Purpose of Disbursement</b> Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :</p>	<p><b>Date (month, day, year)</b> 10/22/1998</p>	<p><b>Amount of Each Disbursement This Period</b> 84.08</p>

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

<b>SCHEDULE B</b>	<b>ITEMIZED DISBURSEMENTS</b>	Use separate schedule(s) for each category of the Detailed Summary Page	36 / 39
			FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code Staples Wisconsin Ave & Bradley Blvd Bethesda MD 20814	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/23/1998 See last page	Amount of Each Disbursement This Period 24.88 Marinoff (11/23/98)
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code Staples Wisconsin Ave & Bradley Blvd Bethesda MD 20814	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/28/1998	Amount of Each Disbursement This Period 124.15
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code Staples Wisconsin Ave & Bradley Blvd Bethesda MD 20814	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/29/1998 See last page	Amount of Each Disbursement This Period 675.42 Marinoff (10/30/98)
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code Staples Wisconsin Ave & Bradley Blvd Bethesda MD 20814	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/30/1998 See Phil Evans (10/30/98)	Amount of Each Disbursement This Period 48.48
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code Staples Wisconsin Ave & Bradley Blvd Bethesda MD 20814	Purpose of Disbursement Office Supplies Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/19/1998	Amount of Each Disbursement This Period 15.87
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code Storage USA 10590 Metropolitan Avenue Kensington MD 20895	Purpose of Disbursement Rent Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 11/17/1998	Amount of Each Disbursement This Period 228.67
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code The Strategy Group 730 North Franklin Street Suite 601 Chicago IL 60610	Purpose of Disbursement Brochures Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/16/1998	Amount of Each Disbursement This Period 13835.00
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code The Montgomery Times	Purpose of Disbursement Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/19/1998	Amount of Each Disbursement This Period 288.00
		[MEMO ITEM]	
Full Name, Mailing Address, and ZIP Code Washington Jewish Week 12300 Twinbrook Parkway Rockville MD 20854	Purpose of Disbursement Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Date (month, day, year) 10/26/1998	Amount of Each Disbursement This Period 408.00
		[MEMO ITEM]	

**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

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FOR LINE NUMBER  
17

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**NAME OF COMMITTEE (in Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Washington Jewish Week 12300 Twinbrook Parkway Rockville MD 20854	Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/27/1998	1240.00
El Montgomery 254 North Washington Street Rockville MD 20852	Advertising Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	10/28/1998	240.00

**SUBTOTALS** of Disbursements This Page (Optional) .....

**TOTALS** This Period (last page this line number only) .....

260430.31

**SCHEDULE C****LOANS**

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(Revised 3/89)

Use separate schedule(s)  
for each numbered lineFOR LINE NUMBER  
10**NAME OF COMMITTEE (In Full)**  
Ralph Neas for Congress

Full Name, Mailing Address, and ZIP Code of Loan Source

Mr. Ralph Neas, Jr.  
5207 Massachusetts Avenue

Bethesda MD 20816

Election:  Primary  General  Other (specify):

Original Amount of Loan

20000.00

REF-ID: 1100

Cumulative Payment  
to Date

0.00

Balance Outstanding  
at Close of This Period

20000.00

TERMS: Date incurred: 12/27/1997

Date Due: 12/27/1998

Interest Rate(%) = 10

 Secured

Full Name, Mailing Address, and ZIP Code of Loan Source

Mr. Ralph Neas, Jr.  
5207 Massachusetts Avenue

Bethesda MD 20816

Election:  Primary  General  Other (specify):

Original Amount of Loan

85000.00

REF-ID: 5521

Cumulative Payment  
to Date

0.00

Balance Outstanding  
at Close of This Period

85000.00

TERMS: Date incurred: 10/27/1998

Date Due:

Interest Rate(%) =

 Secured**SUBTOTALS** This Period This Page (Optional) .....**TOTALS** This Period (last page this line number only) .....

85000.00


Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

<b>SCHEDULE D</b> (Revised 3/80)		<b>DEBTS AND OBLIGATIONS</b> <b>Excluding Loans</b>		<b>38 / 39</b>
Use separate schedule(s) for each numbered line				<b>FOR LINE NUMBER</b> <b>10</b>
<b>NAME OF COMMITTEE (In Full)</b> <b>Ralph Neas for Congress</b>				
	<b>Outstanding Balance Beginning This Period</b>	<b>Amount Incurred This Period</b>	<b>Payment This Period</b>	<b>Outstanding Balance at Close of This Period</b>
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Ameritel Corp. 702 East Gude Drive  Rockville MD 20850	826.98	0.00	288.75	538.23
Nature of Debt (purpose): Office Equipment				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor H&W Printing Co., Inc. 3816 Oak Lane  Mount Ranier MD 20712	0.00	2763.60	0.00	2763.60
Nature of Debt (purpose): Printing				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor H&W Printing Co., Inc. 3816 Oak Lane  Mount Ranier MD 20712	73.50	0.00	73.50	0.00
Nature of Debt (purpose): Invitations				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor National Democratic Club 30 Ivy Street, SE  Washington DC 20003	0.00	520.31	0.00	520.31
Nature of Debt (purpose): Event Expenses				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Print 1 4710 Bethesda Avenue  Bethesda MD 20814	67.57	0.00	67.57	0.00
Nature of Debt (purpose): Copying				
<b>1) SUBTOTALS This Period This Page (Optional)</b>				
<b>2) TOTALS This Period (last page this line number only)</b>				<b>3822.14</b>
<b>3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)</b>				
<b>4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)</b>				

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 12/3/98
<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	
 PREPARER	12/4/98 DATE PREPARED