

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION JUL 23 1998

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <b>Friends of Jim Maloney</b>		2. FEC IDENTIFICATION NUMBER <b>000127924</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. <b>240 Main Street, Suite 3</b>		
CITY, STATE and ZIP CODE <b>Danbury, CT 06810</b>	STATE/DISTRICT <b>CT/05</b>	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 4. TYPE OF REPORT

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

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

### SUMMARY

5. Covering Period <u>6/24/98</u> through <u>6/30/98</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	60,376.03	364,592.39
(b) Total Contribution Refunds (from Line 20(d))		250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	60,376.03	364,342.39
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	21,543.80	288,388.18
(b) Total Offsets to Operating Expenditures (from Line 14)		216.30
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	21,543.80	288,171.88
8. Cash on Hand at Close of Reporting Period (from Line 27)	127,765.11	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	79,036.37	

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  
**Margaret Tansey, Assistant Treasurer**

Signature of Treasurer



Date  
**7/10/98**

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

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

Name of Committee (Full)	Report Covering the Period:		
Friends of Jim Maloney	From: 6/24/98	To: 6/30/98	
I. RECEIPTS	COLUMN A	COLUMN B	
	Total This Period	Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	19,100.00		11(a)(i)
(ii) Unitemized	2,790.00		11(a)(ii)
(iii) Total of contributions from individuals	21,890.00	182,992.94	11(a)(iii)
(b) Political Party Committees	486.03	2,060.76	11(b)
(c) Other Political Committees (such as PACs)	38,000.00	179,538.67	11(c)
(d) The Candidate			11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	60,376.03	364,592.39	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate			13(a)
(b) All Other Loans			13(b)
(c) TOTAL LOANS (add 13(a) and (b))			13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		216.30	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)	232.73	1,419.93	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	60,608.76	366,228.62	16
<b>II. DISBURSEMENTS</b>			
17. OPERATING EXPENDITURES	21,543.80	289,388.18	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate			19(a)
(b) Of All Other Loans			19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other than Political Committees		250.00	20(a)
(b) Political Party Committees			20(b)
(c) Other Political Committees (such as PACs)			20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		250.00	20(d)
21. OTHER DISBURSEMENTS		1,000.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	21,543.80	289,638.18	22
<b>III. CASH SUMMARY</b>			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	88,700.15	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	60,608.76	24
25. SUBTOTAL (add Line 23 and Line 24)	\$	149,308.91	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	21,543.80	26
27. CASH ON HAND AT CLDSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	127,765.11	27

LOANS

Name of Committee (In Full) <b>Friends of Jim Maloney</b>				FEC ID No <b>C00327924</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>James H. Maloney (94 Debt)</b> 15 Wooster Heights Road Danbury, CT 06810			Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period		
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			9,850.00	1,800.00	8,050.00		
Terms: Date Incurred <u>11/4/94</u>		Date Due <u>Demand</u>	Interest Rate <u>0.000 % (apr)</u>	<input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A							
1. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
B. Full Name, Mailing Address and ZIP Code of Loan Source <b>James H. Maloney (94 Debt)</b> 15 Wooster Heights Road Danbury, CT 06810			Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period		
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			8,900.00	-0-	8,900.00		
Terms: Date Incurred <u>11/7/94</u>		Date Due <u>Demand</u>	Interest Rate <u>0.000 % (apr)</u>	<input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B							
1. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
SUBTOTALS This Period This Page (optional)					16,950.00		
TOTALS This Period (last page in this line only)							
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							

LOANS

Name of Committee (in Full) <b>Friends of Jim Maloney</b>				FEC ID No C00327924			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>James B. Maloney (94 Debt) 15 Wooster Heights Road Danbury, CT 06810</b>			Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period		
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			5,000.00	-0-	5,000.00		
Terms: Date Incurred <u>11/10/94</u>		Date Due <u>Demand</u>	Interest Rate <u>0.000 % (apr)</u>	<input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A							
1. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
B. Full Name, Mailing Address and ZIP Code of Loan Source <b>James B. Maloney (94 Debt) 15 Wooster Heights Road Danbury, CT 06810</b>			Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period		
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			200.00	-0-	200.00		
Terms: Date Incurred <u>7/7/95</u>		Date Due <u>Demand</u>	Interest Rate <u>0.000 % (apr)</u>	<input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B							
1. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
SUBTOTALS This Period This Page (optional):					5,200.00		
TOTALS This Period (last page in this line only)							
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							

LOANS

Name of Committee (in Full) <b>Friends of Jim Maloney</b>				FEC ID No <b>C00327924</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>James B. Maloney (94 Debt)</b> <b>15 Wooster Heights Road</b> <b>Danbury, CT 06810</b> Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period		
			300.00	-0-	300.00		
Terms: Date Incurred <u>8/10/95</u> Date Due <u>Demand</u> Interest Rate <u>0.000 % (apr)</u> <input type="checkbox"/> Secured				List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
B. Full Name, Mailing Address and ZIP Code of Loan Source <b>James B. Maloney (94 Debt)</b> <b>15 Wooster Heights Road</b> <b>Danbury, CT 06810</b> Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period		
			500.00	-0-	500.00		
Terms: Date Incurred <u>10/18/95</u> Date Due <u>Demand</u> Interest Rate <u>0.000 % (apr)</u> <input type="checkbox"/> Secured				List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
SUBTOTALS This Period This Page (optional)					900.00		
TOTALS This Period (last page in this line only)							
Carry outstanding balances only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							

LOANS

Name of Committee (In Full) <b>Friends of Jim Maloney</b>				FEC ID No C00327924			
A. Full Name, Mailing Address and ZIP Code of Loan Source <b>James H. Maloney (94 Debt) 15 Wooster Heights Road Danbury, CT 06810</b>			Original Amount of Loan <b>250.00</b>	Cumulative Payment To Date <b>-0-</b>	Balance Outstanding at Close of This Period <b>250.00</b>		
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):							
Terms: Date Incurred <b>5/31/96</b>		Date Due <b>Demand</b>	Interest Rate <b>0.000 % (apr)</b>		<input type="checkbox"/> Secured		
List All Endorsers or Guarantors (if any) to Item A							
1. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
B. Full Name, Mailing Address and ZIP Code of Loan Source <b>James B. Maloney (94 Debt) 15 Wooster Heights Road Danbury, CT 06810</b>			Original Amount of Loan <b>100.00</b>	Cumulative Payment To Date <b>-0-</b>	Balance Outstanding at Close of This Period <b>100.00</b>		
Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):							
Terms: Date Incurred <b>12/4/95</b>		Date Due <b>Demand</b>	Interest Rate <b>0.000 % (apr)</b>		<input type="checkbox"/> Secured		
List All Endorsers or Guarantors (if any) to Item B							
1. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer					
		Occupation					
		Amount Guaranteed Outstanding: \$					
SUBTOTALS This Period This Page (optional)					<b>350.00</b>		
TOTALS This Period (last page in this line only)							
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							

LOANS

Name of Committee (in Full) Friends of Jim Maloney				FEC ID No C0D327924			
A. Full Name, Mailing Address and ZIP Code of Loan Source James R. Maloney (94 Debt) 15 Wooster Heights Road Danbury, CT 06810 Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			Original Amount of Loan 1,200.00	Cumulative Payment To Date -0-	Balance Outstanding at Close of This Period 1,200.00		
Terms: Date Incurred 12/30/95 Date Due Demand Interest Rate 0.000 % (apr) <input type="checkbox"/> Secured			List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
B. Full Name, Mailing Address and ZIP Code of Loan Source James B. Maloney (94 Debt) 15 Wooster Heights Road Danbury, CT 06810 Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):			Original Amount of Loan 4,000.00	Cumulative Payment To Date -0-	Balance Outstanding at Close of This Period 4,000.00		
Terms: Date Incurred 6/6/97 Date Due Demand Interest Rate 0.000 % (apr) <input type="checkbox"/> Secured			List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
2. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
3. Full Name, Mailing Address and ZIP Code		Name of Employer		Amount Guaranteed Outstanding: \$			
		Occupation					
		Amount Guaranteed Outstanding: \$					
SUBTOTALS This Period This Page (optional)					5,200.00		
TOTALS This Period (last page in this line only)					20,500.00		
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.							



**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Page 1 of 5 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payments This Period	Outstanding Balance at Close of This Period
<b>Friends of Jim Maloney</b>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Gold Communications (94 Debt) 98 San Jacinto Blvd., #900 Austin, TX 78701	1,600.00	-0-	-0-	1,600.00
Nature of Debt (Purpose): Media Consulting				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Dasilva Sons (94 Debt) 288 Main Street Danbury, CT 06810	2,800.00	-0-	-0-	2,800.00
Nature of Debt (Purpose): Rent				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Huntington Organizatn (94 Debt) 60 Merritt Boulevard Trumbull, CT 06611	1,219.22	-0-	-0-	1,219.22
Nature of Debt (Purpose): Telephone Equipment Rental				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor James Fleckner (94 Debt) 5 Hancock Street, #5 Boston, MA 02114	1,539.00	-0-	-0-	1,539.00
Nature of Debt (Purpose): Staff salary				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Matt Levine (94 Debt) 5123 45th Street, NW Washington, DC 20016	8,312.50	-0-	-0-	8,312.50
Nature of Debt (Purpose): Staff Salary				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor Shepherd's Inc. (94 Debt) 32 Henry Street Bethel, CT 06801	1,911.00	-0-	-0-	1,911.00
Nature of Debt (Purpose): Moving & Storage				
1) SUBTOTALS This Period This Page (optional)				17,381.72
2) TOTALS This Period (last page this line only)				
3) TOTAL, OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				



SCHEDULE D  
(Revised 3/80)

DEBTS AND OBLIGATIONS  
Excluding Loans

Page 2 of 6 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Friends of Jim Maloney				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bertha K. McCollam Insurance Agency (94 Debt) 10 Mansfield Street Bethel, CT 06801	380.67	-0-	-0-	380.67
Nature of Debt (Purpose): Insurance				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Computer Express (94 Debt) Deep Brook Road Newtown, CT 06470	-0-	318.00	-0-	318.00
Nature of Debt (Purpose): Computer Services				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor No Entry				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor No Entry				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor No Entry				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor No Entry				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				698.67
2) TOTALS This Period (last page this line only)				
3) TOTAL, OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D  
(Revised 3/80)

DEBTS AND OBLIGATIONS  
Excluding Loans

Page 3 of 6 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<b>Friends of Jim Maloney</b>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Fundraising Mgmt Group(96 Debt) 501 Capitol Court, NE Suite 200 Washington, DC 20002	8,000.00	-0-	-0-	8,000.00
Nature of Debt (Purpose): Fundraising Services				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor A T & T (96 Debt) P.O. Box 598137 Orlando, FL 32859	2,247.81	-0-	-0-	2,247.81
Nature of Debt (Purpose): Long Distance Phone Service				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Bell Atlantic NYNEX (96 Debt) P.O. Box 15608 Worcester, MA 01615-0608	2,195.43	-0-	-0-	2,195.43
Nature of Debt (Purpose): Cellular Phone Service				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor No Entry				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor No Entry				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor No Entry				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				12,443.24
2) TOTALS This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D  
(Revised 3/80)

DEBTS AND OBLIGATIONS  
Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<b>Friends of Jim Maloney</b>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor SNET P.O. Box 1061 New Haven, CT 06508	307.26	784.23	-0-	1,091.49
Nature of Debt (Purpose): Telephone				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Creative Media Planning 951 Hard Scribble Road Chappaqua, NY 10514	3,000.00	-0-	-0-	3,000.00
Nature of Debt (Purpose): Consulting Fees				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Connecticut Light & Power P.O. Box 2960 Bartford, CT 06104-2960	79.92	-0-	-0-	79.92
Nature of Debt (Purpose): Utilities				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor Ace printery, Inc. 11 Walnut Street Bartford, CT 06120	1,085.50	1,379.06	-0-	2,465.56
Nature of Debt (Purpose): Printing				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Erickson & Co. 38 New York Avenue, SE Washington, DC 20003	86.01	-0-	-0-	86.01
Nature of Debt (Purpose): Copying/Telephone				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor 240 Main Street Associates 240 Main Street Danbury, CT 06810	91.21	-0-	-0-	91.21
Nature of Debt (Purpose): Utilities				
1) SUBTOTALS This Period This Page (optional)				6,614.19
2) TOTALS This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Page 5 of 6 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<b>Friends of Jim Maloney</b>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor ICI International P.O. Box 85660 Louisville, KY 40285-5660	267.80	321.76	-0-	589.56
Nature of Debt (Purpose): Telephone				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Global Strategy Group 611 Broadway, Suite 206 New York, NY 10012	836.44	74.50	-0-	910.94
Nature of Debt (Purpose): Research/Polling				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Gilbert S Wolfand, P.C. 2201 Wisconsin Avenue, NW Suite 320 Washington, DC 20007	1,219.00	6,920.00	-0-	8,139.00
Nature of Debt (Purpose): Accounting Services				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor A T & T P.O. Box 371302 Pittsburgh, PA 15250-7302	211.55	-0-	-0-	211.55
Nature of Debt (Purpose): Telephone				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor Linda Hennessey 462 North St. Asaph Street Alexandria, VA 22314	1,000.00	-0-	-0-	1,000.00
Nature of Debt (Purpose): Consulting Fees				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor IMS, Inc. 1320 18th Street, NW, #401 Washington, DC 20006	1,500.00	-0-	-0-	1,500.00
Nature of Debt (Purpose): Research				
1) SUBTOTALS This Period This Page (optional)				12,351.05
2) TOTALS This Period (last page this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

SCHEDULE D  
(Revised 3/80)

DEBTS AND OBLIGATIONS  
Excluding Loans

Page 5 of 6 for  
LINE NUMBER 10  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<b>Friends of Jim Maloney</b>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor Waterbury Sportsmens Club P.O. Box 2086 Waterbury, CT	100.00	-0-	-0-	100.00
Nature of Debt (Purpose): Advertisement				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor Western connecticut state University 181 White Street Danbury, CT 06810	87.50	-0-	-0-	87.50
Nature of Debt (Purpose): Room Rental				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor Sodexo Marriot 181 White Street Danbury, CT 06810	660.00	-0-	-0-	660.00
Nature of Debt (Purpose): Catering				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				847.50
2) TOTALS This Period (last page this line only)				50,536.37
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				28,500.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				79,036.37

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	8
FOR LINE NUMBER		11a1

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)  
**Friends of Jim Maloney** FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code Mark E. Powers 4 Round Rock Road Mianctic, CT 06357  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>Pullman &amp; Cooley</b>	Date (month, day, year) 6/24/98	Amount of Each Receipt this Period 250.00
	Occupation <b>Lobbyist</b> Aggregate Year-To-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code Ruth Lord 190 St. Ronan Street New Haven, CT 06511  Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>Self Employed</b>	Date (month, day, year) 6/25/98	Amount of Each Receipt this Period 500.00
	Occupation <b>Writer</b> Aggregate Year-To-Date > \$ 500.00		
C. Full Name, Mailing Address and ZIP Code Donald E. Weeden 85 Middle River Road Danbury, CT 06811  Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>Weeden &amp; Co</b>	Date (month, day, year) 6/25/98	Amount of Each Receipt this Period 500.00
	Occupation <b>Executive</b> Aggregate Year-To-Date > \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code Helen Davis Hermas 46 Dorothy Road Redding, CT 06098  Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year) 6/25/98	Amount of Each Receipt this Period 500.00
	Occupation <b>Retired</b> Aggregate Year-To-Date > \$ 1,500.00		
E. Full Name, Mailing Address and ZIP Code John Ruffalo, III 415 Howe Avenue Shelton, CT 06484  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>John Ruffalo, III architects</b>	Date (month, day, year) 6/25/98	Amount of Each Receipt this Period 250.00
	Occupation <b>Architect</b> Aggregate Year-To-Date > \$ 250.00		
F. Full Name, Mailing Address and ZIP Code Michael E. Shay 31 Sharphill Road Wilton, CT 06697  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>Flynn Blakelee &amp; Shay</b>	Date (month, day, year) 6/25/98	Amount of Each Receipt this Period 250.00
	Occupation <b>Attorney</b> Aggregate Year-To-Date > \$ 300.00		
G. Full Name, Mailing Address and ZIP Code Richard C. White 1541 Foxhall Road NW Washington, DC 20007  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>Alpine Group</b>	Date (month, day, year) 6/25/98	Amount of Each Receipt this Period 250.00
	Occupation <b>Consultant</b> Aggregate Year-To-Date > \$ 250.00		

SUBTOTAL of Receipts This Page (optional)	2,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	2	8
FOR LINE NUMBER		11a1

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) FEC ID No. C00327924  
 Friends of Jim Maloney

A. Full Name, Mailing Address and ZIP Code Francis G. Pennarola 17 Webster Place Newtown, CT 06470		Name of Employer Chipman, MAZZUCCO	Date (month, day, year) 6/26/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-To-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code Vivian E. Riefberg 321 S. Columbus Street Alexandria, VA 22314		Name of Employer McKenzie Partners	Date (month, day, year) 6/26/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Nancy Killefer 3114 44th Street, NW Washington, DC 20016		Name of Employer US Government	Date (month, day, year) 6/26/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Esther Puer 2919 Ellicott Street, NW Washington, DC 20006		Name of Employer Hawthorn Group	Date (month, day, year) 6/26/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Public Relations	Aggregate Year-To-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Barbara J. Hatchford 2815 N. Jefferson Street Arlington, VA 22207		Name of Employer Yorktown High school	Date (month, day, year) 6/26/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Teacher	Aggregate Year-To-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code Elliott P. Laws 8205 Labbe Lane Vienna, VA 22182		Name of Employer Patten Baggs, LLP.	Date (month, day, year) 6/26/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Partner	Aggregate Year-To-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Victor Borge Field Point Park Greenwich, CT 06830		Name of Employer Self Employed	Date (month, day, year) 6/29/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Pianist/Humorist	Aggregate Year-To-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional)	4,750.00
TOTAL This Period (last page this line number only)	



SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full) **Friends of Jim Maloney** FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code Ruth Anne Faust 5 Timrod Lane West Hartford, CT 06107  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Homemaker	6/29/98	
Aggregate Year-To-Date > \$		2,000.00	
B. Full Name, Mailing Address and ZIP Code Ruth Anne Faust 5 Timrod Lane West Hartford, CT 06107  Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Homemaker	6/29/98	
Aggregate Year-To-Date > \$		2,000.00	
C. Full Name, Mailing Address and ZIP Code Gerard J. Poye, Jr., M.D. 172 Mt. Pleasant Road Newtown, CT 06513  Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Candlewood OB-Gyn Assoc. P.C.	6/29/98	
Aggregate Year-To-Date > \$		250.00	
D. Full Name, Mailing Address and ZIP Code Donald L. Franco 5 Oakhill Drive East Haven, CT 06513  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Paragon Group, Inc.	6/29/98	
Aggregate Year-To-Date > \$		600.00	
E. Full Name, Mailing Address and ZIP Code Frank D. Malone 105 Middle River Road Danbury, CT 06811  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Filosa Nursing Home	6/29/98	
Aggregate Year-To-Date > \$		250.00	
F. Full Name, Mailing Address and ZIP Code Gary C. Smith 23B Mountain Road Ridgefield, CT 06877  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Ridgefield Bank	6/30/98	
Aggregate Year-To-Date > \$		500.00	
G. Full Name, Mailing Address and ZIP Code John W. Grouen 110 Tunxis Village Farmington, CT 06032  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Farmington Savings Bank	6/30/98	
Aggregate Year-To-Date > \$		250.00	

SUBTOTAL of Receipts This Page (optional)	3,400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
**Friends of Jim Maloney**

FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code William J. McGurk 25 Park Street PO Box 660 Vernon Rockville, CT 06066		Name of Employer Savings Bank of Rockville	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Banker	Aggregate Year-To-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code James R. Wood 815 Cooper Hill Road West Suffield, CT 06093		Name of Employer 1st Natl Bank of Suffield	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Pres/CEO	Aggregate Year-To-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code Gerald M. Noonan 167 Kingswood Drive Naugatuck, CT 06770		Name of Employer Connecticut Bankers Assoc.	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code Charles P. Basson 142 Horseshoe Lane Fairfield, CT 06430		Name of Employer Fairfield County Savings Bank	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Aggregate Year-To-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code Thomas S. Mongelliow 257 Adrian Avenue Newington, CT 06111		Name of Employer Connecticut Bankers Assoc.	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 250.00	
F. Full Name, Mailing Address and ZIP Code Marion P. Brown 113 Indian Hill Road Wilton, CT 06097		Name of Employer Wilton Bank	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Ronald D. Lengyel 333 Church Street Naugatuck, CT 06770		Name of Employer Naugatuck Valley Savings & Loan	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Pres/Chairman	Aggregate Year-To-Date > \$ 400.00	

SUBTOTAL of Receipts This Page (optional)	1,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
**Friends of Jim Maloney**

FEC ID No. **CD0327924**

<p>A. Full Name, Mailing Address and ZIP Code  <b>Stephen S. Stack</b>                  19 Prospect Ridge, #24                  Ridgefield, Ct 06877-4605</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer  <b>Ridgefield Bank</b></p> <p>Occupation  <b>Sr. V.P. &amp; Treasurer</b></p> <p>Aggregate Year-To-Date &gt; \$ <b>250.00</b></p>	<p>Date (month, day, year)  <b>6/30/98</b></p>	<p>Amount of Each Receipt this Period  <b>250.00</b></p>
<p>B. Full Name, Mailing Address and ZIP Code  <b>Robert T. Kenney</b>                  181 Maybrook Road                  Waterbury, CT 06708</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer  <b>American Savings Bank</b></p> <p>Occupation  <b>Banker</b></p> <p>Aggregate Year-To-Date &gt; \$ <b>250.00</b></p>	<p>Date (month, day, year)  <b>6/30/98</b></p>	<p>Amount of Each Receipt this Period  <b>250.00</b></p>
<p>C. Full Name, Mailing Address and ZIP Code  <b>Steven F. Mount</b>                  6701 Robinhood Circle                  Westerville, OH 43082</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer  <b>Squires, Sanders &amp; Dempsey</b></p> <p>Occupation  <b>Attorney</b></p> <p>Aggregate Year-To-Date &gt; \$ <b>250.00</b></p>	<p>Date (month, day, year)  <b>6/30/98</b></p>	<p>Amount of Each Receipt this Period  <b>250.00</b></p>
<p>D. Full Name, Mailing Address and ZIP Code  <b>William O. Murphy</b>                  7 Thomas Place                  Rowayton, CT 06853</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation  <b>Retired</b></p> <p>Aggregate Year-To-Date &gt; \$ <b>500.00</b></p>	<p>Date (month, day, year)  <b>6/30/98</b></p>	<p>Amount of Each Receipt this Period  <b>500.00</b></p>
<p>E. Full Name, Mailing Address and ZIP Code  <b>John S. Manning</b>                  1492 Flanders Road                  Southington, CT 06469</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer  <b>First City Bank</b></p> <p>Occupation  <b>President</b></p> <p>Aggregate Year-To-Date &gt; \$ <b>250.00</b></p>	<p>Date (month, day, year)  <b>6/30/98</b></p>	<p>Amount of Each Receipt this Period  <b>250.00</b></p>
<p>F. Full Name, Mailing Address and ZIP Code  <b>Gene C. Guilbert</b>                  66 Potaford Hill Road                  Roxbury, CT 06783</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer  <b>American Savings Bank</b></p> <p>Occupation  <b>Banker</b></p> <p>Aggregate Year-To-Date &gt; \$ <b>250.00</b></p>	<p>Date (month, day, year)  <b>6/30/98</b></p>	<p>Amount of Each Receipt this Period  <b>250.00</b></p>
<p>G. Full Name, Mailing Address and ZIP Code  <b>John J. Martocci</b>                  599 France Street                  Rocky Hill, CT 06067</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer  <b>Newtown Savings Bank</b></p> <p>Occupation  <b>Banker/President</b></p> <p>Aggregate Year-To-Date &gt; \$ <b>250.00</b></p>	<p>Date (month, day, year)  <b>6/30/98</b></p>	<p>Amount of Each Receipt this Period  <b>250.00</b></p>

SUBTOTAL of Receipts This Page (optional)	<b>2,000.00</b>
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	6	8
FOR LINE NUMBER		
11a1		

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NAME OF COMMITTEE (in Full)  
 Friends of Jim Maloney

FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code Charles A. O'Malley, III 26 Loyal Ledge Lane Guilford, CT 06437		Name of Employer Guilford Savings Bank	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Aggregate Year-To-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code David R. Jaffe 45 Hemlock Ridge Weston, CT 06883		Name of Employer Dress Barn, Inc.	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 1,000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Exec. vice president	Aggregate Year-To-Date > \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code Todd Payne 2A Ives Street Danbury, CT 06610		Name of Employer Goodfellow/Ashmore	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code Joy L. Tomasso 132 Roslyn Drive New Britain, CT 06052		Name of Employer	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Homemaker	Aggregate Year-To-Date > \$ 250.00	
E. Full Name, Mailing Address and ZIP Code Angelo Tomasso, Jr. 132 Roslyn Drive New Britain, CT 06052		Name of Employer Tilcon, Inc.	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Chairman	Aggregate Year-To-Date > \$ 750.00	
F. Full Name, Mailing Address and ZIP Code Stephen R. Kinney 20 Cromwell Place Old Saybrook, CT 06476		Name of Employer Gaffney Bennett & Assoc.	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code Mary Phil Guinan 205 Beacon Street Hartford, CT 06105		Name of Employer MP Guinan & Assoc.	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Executive	Aggregate Year-To-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)	2,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full) **Friends of Jim Maloney** FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert V. Heffernan 3699 Broadbridge Ave., 328 Stratford, CT 06497	Connecticut Florists Assn.	6/30/98	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Executive Director</b>		
	Aggregate Year-To-Date > \$	450.00	
William A. Dibella 91 N. Cove Road Old Saybrook, CT 06475	CMD Partners	6/30/98	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Investment</b>		
	Aggregate Year-To-Date > \$	250.00	
Allen R. Zeiner 3699 Broad Bridge Avenue Stratford, CT 06497	Irene's Flower Shop	6/30/98	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Asst. Mgr</b>		
	Aggregate Year-To-Date > \$	250.00	
Joseph S. Coatsworth 66 Old Carriage Road Portland, CT 06480	Connecticut Hospital Assn.	6/30/98	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Executive</b>		
	Aggregate Year-To-Date > \$	250.00	
Wilma J. Doyle 375 Copper Ridge Southington, CT 06488	Doyle Group	6/30/98	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>Secretary / book keeper</b>		
	Aggregate Year-To-Date > \$	250.00	
James R. Caisy 1903 Burr Street Fairfield, CT 06430	Stratford Development	6/30/98	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>President</b>		
	Aggregate Year-To-Date > \$	250.00	
John G. Phelan, P.E. Two World Trade Plaza Bridgeport, CT 06604	Fletcher Thompson	6/30/98	250.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation <b>President</b>		
	Aggregate Year-To-Date > \$	250.00	

SUBTOTAL of Receipts This Page (optional)	1,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full) **Friends of Jim Maloney** FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code Marilyn O'Halloran 116 Danbury Road Wilton, CT 06897	Name of Employer -- C. Halloran Advertising	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
	Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation V.P. Operations	
B. Full Name, Mailing Address and ZIP Code Gerard Egan 23 Dearfield Road Brookfield, CT 06804	Name of Employer J.C. & S.	Date (month, day, year) 06/30/98	Amount of Each Receipt this Period 100.00
	Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor	
C. Full Name, Mailing Address and ZIP Code John Monagan 3043 West Lane Keys Washington, DC 20007	Name of Employer	Date (month, day, year) 06/30/98	Amount of Each Receipt this Period 100.00
	Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	19,100.00

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in full)  
 Friends of Jim Maloney

FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code Democratic Congressional Campaign Committee 430 S. Capitol Street, SE Washington, DC 20003 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period 486.03 In-kind
	Occupation	06/30/98	
	Aggregate Year-To-Date	> \$ 2,060.78	
B. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
C. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
D. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
E. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
F. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	
G. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-To-Date	> \$	

SUBTOTAL of Receipts This Page (optional)	486.03
TOTAL This Period (last page this line number only)	486.03



SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)  
 Friends of Jim Maloney

FEC ID No. C00327924

<p>A. Full Name, Mailing Address and ZIP Code                  BOUSE PAC                  2700 Sanders Road                  Prospect Heights, IL 60070</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 1,500.00</p>	<p>Date (month, day, year)                  6/25/98</p>	<p>Amount of Each Receipt this Period                  500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code                  Easton Democratic Town Cmte.                  c/o Gelfand &amp; Solek, LLC                  1595 Black Rock Turnpike                  Fairfield, CT 06432-4144</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 1,000.00</p>	<p>Date (month, day, year)                  6/25/98</p>	<p>Amount of Each Receipt this Period                  1,000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code                  Fleet Financial Group Fed PAC                  One Federal Street                  Boston, MA 02110</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 2,000.00</p>	<p>Date (month, day, year)                  6/26/98</p>	<p>Amount of Each Receipt this Period                  1,000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code                  National Air Traffic                  Controllers Assn. NATCA-PAC                  1150 17th Street, NW, #701                  Washington, DC 20036</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 1,500.00</p>	<p>Date (month, day, year)                  6/26/98</p>	<p>Amount of Each Receipt this Period                  500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code                  American Bankers Association                  1120 Connecticut Avenue, NW                  Washington, DC 20036</p> <p>Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 3,500.00</p>	<p>Date (month, day, year)                  6/26/98</p>	<p>Amount of Each Receipt this Period                  1,000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code                  NationsBank Corporation PAC                  Charlotte, NC 28255</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 500.00</p>	<p>Date (month, day, year)                  6/26/98</p>	<p>Amount of Each Receipt this Period                  500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code                  OAH V CAP                  8000 East Jefferson Street                  Detroit, MI 48214-3983</p> <p>Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 3,000.00</p>	<p>Date (month, day, year)                  6/26/98</p>	<p>Amount of Each Receipt this Period                  2,000.00</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>6,500.00</p>
<p>TOTAL This Period (last page this line number only)</p>			<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)  
**Friends of Jim Maloney**

FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dealers Election Action Cmte. of Natl Auto Dealers Assoc. 6400 Westpark Drive McLean, VA 22102		6/26/98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date	> \$ 500.00	
B. Full Name, Mailing Address and ZIP Code MBNA Corp Federal Pol Cmte Wilmington, DE 19864-0616		6/29/98	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date	> \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code The Chase Manhattan Corp. Fund for Good Government 270 Park Avenue New York, NY 10017		6/29/98	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date	> \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code KeyCorp Political Action Cmte 127 Public Square Cleveland, OH 44114-1306		6/29/98	1,000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date	> \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code International Union of Operating Engineers (EPBC) 1125 17th Street, NW Washington, DC 20036		6/29/98	1,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date	> \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code BankBoston Corporation PAC Federal Street Office Boston, MA		6/30/98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date	> \$ 500.00	
G. Full Name, Mailing Address and ZIP Code AANA CRNA PAC 222 South Prospect Avenue Park Ridge, IL 60068		6/30/98	500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-To-Date	> \$ 500.00	

SUBTOTAL of Receipts This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

Marked through: Democratic Congressional Campaign Committee  
 430 S. Capitol St., Washington, DC 20003

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in full)  
**Friends of Jim Maloney** FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code <b>Peoples Bank Federal PAC</b> P.O. Box 1580 Bridgeport, CT 06601	Name of Employer  Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-To-Date $\gg$ \$ 500.00	
B. Full Name, Mailing Address and ZIP Code <b>IBEW 42 PAC</b> P.O. Box 1213 379 Wetherell Street Manchester, CT 06040	Name of Employer  Date (month, day, year) 6/30/98	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 $\gg$ \$ 150.00	
C. Full Name, Mailing Address and ZIP Code <b>Redding-Georgetown Democratic Town Committee</b> Redding, CT 06877	Name of Employer  Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 500.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-To-Date $\gg$ \$ 500.00	
D. Full Name, Mailing Address and ZIP Code <b>New Democratic Network</b> 501 Capitol Ct., NE, Ste. 200 Washington, DC 20002	Name of Employer  Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 2,000.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-To-Date $\gg$ \$ 4,330.96	
E. Full Name, Mailing Address and ZIP Code <b>Democratic Town Committee of Brookfield</b> Brookfield, CT 06804	Name of Employer  Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 600.00
Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-To-Date $\gg$ \$ 600.00	
F. Full Name, Mailing Address and ZIP Code <b>Committee on Political Education, AFL-CIO</b> \$15 16th Street, NW Washington, DC 20006	Name of Employer  Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 3,000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-To-Date $\gg$ \$ 6,000.00	
G. Full Name, Mailing Address and ZIP Code <b>D.R.I.V.E. - PAC</b> 25 Louisiana Avenue, NW Washington, DC 20001	Name of Employer  Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 5,000.00
Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-To-Date $\gg$ \$ 5,000.00	

SUBTOTAL of Receipts This Page (optional)	11,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	4	6
FOR LINE NUMBER 11c		

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NAME OF COMMITTEE (in Full) **Friends of Jim Maloney** FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code CBA FED PAC c/o Connecticut Bankers Assn. 450 Church Street Hartford, CT 06103 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		6/30/98	1,000.00
B. Full Name, Mailing Address and ZIP Code United Food and Comm Workers Internatl Union, AFL-CIO/CLC 1775 K Street, NW Washington, DC 20006 Receipt for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		6/30/98	5,000.00
C. Full Name, Mailing Address and ZIP Code NARPE PAC Fund 606 N. Washington Street Alexandria, VA 22118 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		6/30/98	*** 1,000.00
D. Full Name, Mailing Address and ZIP Code International Assn of Fire Fighters - FIREPAC 1750 New York Avenue, NW Washington, DC 20006 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		6/30/98	1,000.00
E. Full Name, Mailing Address and ZIP Code BPA/PAC 2012 Massachusetts Ave., NW Washington, DC 20036 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		6/30/98	500.00
F. Full Name, Mailing Address and ZIP Code American Dietetic Assn. PAC 1225 I Street, NW, Suite 1250 Washington, DC 20005 Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		6/30/98	500.00
G. Full Name, Mailing Address and ZIP Code No Entry Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	9,000.00
TOTAL This Period (last page this line number only)	

\*\*\* Barmarked through: Democratic Congressional Campaign Committee  
 430 S. Capitol St., Washington, DC 20003

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)  
 Friends of Jim Maloney

FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code Fleet Financial Group-Fed PAC One Federal Street Boston, MA 02110  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-To-Date > \$ 2,000.00	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code BEO COPE 1313 I Street, NW Washington, DC 20005  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-To-Date > \$ 4,000.00	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code SMBT Political Action Cmtc. 227 Church Street New Haven, CT 06508  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-To-Date > \$ 250.00	Date (month, day, year) 6/30/98	Amount of Each Receipt this Period 250.00
D. Full Name, Mailing Address and ZIP Code Walter Capps for Congress PO Box 91429 Santa Barbara, CA 93190  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-To-Date > \$ 500.00	Date (month, day, year) 06/30/98	Amount of Each Receipt this Period *** 500.00
E. Full Name, Mailing Address and ZIP Code Nancy Pelosi for Congress One Bush Street, Suite 1100 San Francisco, CA 94104  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-To-Date > \$ 1,000.00	Date (month, day, year) 06/30/98	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Bouse PAC 2700 Sanders Road Prospect Heights, IL 60070  Receipt for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-To-Date > \$ 1,500.00	Date (month, day, year) 06/30/98	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code  No Entry  Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation  Aggregate Year-To-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	4,250.00
TOTAL This Period (last page this line number only)	

\*\*\*Earmarked through: Democr Congressnl Camp Cmtc 430 S. Capitol St. Wash, D.C. 20003

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) FEC ID NO. C00327924  
**Friends of Jim Maloney**

A. Full Name, Mailing Address and ZIP Code Human Rights Campaign PAC 1101 14th Street, NW Washington, DC 20005	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/98	1,000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): '94 Debt	Aggregate Year-To-Date > \$		6,000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-To-Date > \$		

SUBTOTAL of Receipts This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	38,000.00

Friends of Jim Maloney  
C00327924  
6/24/98-6/30/98

MEMO ENTRY:

Earmarked contributions received from: Democratic Congressional Campaign Committee  
430 South Capitol Street  
Washington, D.C. 20003

Date of Receipts: 6/26/98-6/30/98

Amount: \$2,000.00



SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) **Friends of Jim Maloney** FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code First Union National Bank 701 Pennsylvania Avenue, NW Washington, DC 20004  Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>Interest Income</b>  Occupation	Date (month, day, year) 06/30/98	Amount of Each Receipt this Period 232.73  Aggregate Year-To-Date $\geq$ \$ 1,419.93
B. Full Name, Mailing Address and ZIP Code   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation	Date (month, day, year)	Amount of Each Receipt this Period   Aggregate Year-To-Date $\geq$ \$
C. Full Name, Mailing Address and ZIP Code   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation	Date (month, day, year)	Amount of Each Receipt this Period   Aggregate Year-To-Date $\geq$ \$
D. Full Name, Mailing Address and ZIP Code   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation	Date (month, day, year)	Amount of Each Receipt this Period   Aggregate Year-To-Date $\geq$ \$
E. Full Name, Mailing Address and ZIP Code   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation	Date (month, day, year)	Amount of Each Receipt this Period   Aggregate Year-To-Date $\geq$ \$
F. Full Name, Mailing Address and ZIP Code   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation	Date (month, day, year)	Amount of Each Receipt this Period   Aggregate Year-To-Date $\geq$ \$
G. Full Name, Mailing Address and ZIP Code   Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation	Date (month, day, year)	Amount of Each Receipt this Period   Aggregate Year-To-Date $\geq$ \$

SUBTOTAL of Receipts This Page (optional)	232.73
TOTAL This Period (last page this line number only)	232.73

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		
17		

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

NAME OF COMMITTEE (in Full)

Friends of Jim Maloney

FEC ID No. C00327924

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Congressional Campaign Committee 430 S. Capitol St., SE Washington, DC 20003	<u>Fundraising Expenses</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/98	486.03  In-Kind
B. Full Name, Mailing Address and ZIP Code U.S. Postmaster Danbury, CT 06810	<u>Postage</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/98	128.00
C. Full Name, Mailing Address and ZIP Code The Monocle 107 D street, NE Washington, DC	<u>Reception</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/23/98	436.33
D. Full Name, Mailing Address and ZIP Code Federal Express P.O. Box 1140 Memphis, TN 38101	<u>Shipping</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/24/98	19.00
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Danbury, CT 06810	<u>Postage</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/98	1,152.00
F. Full Name, Mailing Address and ZIP Code Kinko's 360 North Bedford Road Mt. Kisco, NY 10549	<u>Copying</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/98	301.92
G. Full Name, Mailing Address and ZIP Code Drescher's Restaurant 25 Leavenworth Waterbury, CT	<u>Reception</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/29/98	130.15
H. Full Name, Mailing Address and ZIP Code Ethan Allen Inn Exit 4, I-84 Danbury, CT 06811	<u>Reception</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/98	283.95
I. Full Name, Mailing Address and ZIP Code Waverly Tavern 286 Maple Avenue Cheeshire, CT 06810-2507	<u>Reception</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/30/98	37.80

SUBTOTAL of Disbursements This Page (optional) . . . . . 2,975.18

TOTAL This Period (last page this line number only) . . . . .

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In full)

REC ID No. C00327924

<p>A. Full Name, Mailing Address and ZIP Code                  First Union National Bank                  701 Pennsylvania Ave., NW                  Washington, DC 20004</p>	<p>Purpose of Disbursement  <u>Bank Charge</u>                  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)                  6/30/98</p>	<p>Amount of Each Disbursement This Period                  3.62</p>
<p>B. Full Name, Mailing Address and ZIP Code                  Direct Response                  Twin Ponds Centre                  Tolland, CT</p>	<p>Purpose of Disbursement  <u>Media Buys</u>                  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)                  6/30/98</p>	<p>Amount of Each Disbursement This Period                  18,550.00</p>
<p>C. Full Name, Mailing Address and ZIP Code                  First Union National Bank                  701 Pennsylvania Ave., NW                  Washington, DC 20004</p>	<p>Purpose of Disbursement  <u>Bank Charge</u>                  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)                  6/30/98</p>	<p>Amount of Each Disbursement This Period                  15.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement                  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement                  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement                  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement                  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement                  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement                  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>			<p>18,568.62</p>
<p>TOTAL This Period (last page this line number only)</p>			<p>21,543.80</p>

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 7-15-98
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Sen</i> PREPARER	7-15-98 DATE PREPARED