

# Maintenance of Way Political League

FEDERAL ELECTION  
COMMISSION MAIL ROOM



1999 DEC 21 A 11: 59

MAC A. FLEMING, Chairman

28555 Evergreen Road - Suite 200  
Southfield, Michigan 48078-4225  
(248) 948-1010

WILLIAM E. LARUE, Treasurer

December 16, 1999

CERTIFIED MAIL Z-570-707-619

Ms. Andrea Wilkens, Reports Analyst  
Reports Analysis Division  
Federal Election Commission  
999 E Street, N.W.  
Washington, D. C. 20463

Re: December 1999 Report

Dear Ms. Wilkens:

Please find enclosed the December 1999 Report for Receipts and Disbursements (FEC Form 3X), covering November 1 - 30, 1999.

If you have any questions in connection with the foregoing, please do not hesitate to contact me.

Sincerely,

Treasurer

Enclosure  
WEL:dlh

# REPORT OF RECEIPTS AND DISBURSEMENTS

FOR OTHER THAN AN AUTHORIZED COMMITTEE

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

(SUMMARY PAGE)

1999 DEC 21 AM 59

1. NAME OF COMMITTEE (IN FULL)  
**MAINTENANCE OF WAY POLITICAL LEAGUE**  
ADDRESS (NUMBER AND STREET)  
**26555 EVERGREEN ROAD, STE 200**  
CITY, STATE AND ZIP CODE  
**SOUTHFIELD, MI 48076-4225**  
 CHECK IF DIFFERENT THAN PREVIOUSLY REPORTED

2. FEC IDENTIFICATION NUMBER  
**C00000372**

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

4. TYPE OF REPORT

- (a)  April 15 Quarterly Report      Monthly Report Due On:
- July 15 Quarterly Report       February 20       June 20       October 20
- October 15 Quarterly Report       March 20       July 20       November 20
- January 31 Year End Report       April 20       August 20       December 20
- July 31 Mid Year Report (Non-election Year Only)       May 20       September 20       January 31
- Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_
- Termination Report       Thirtieth day report following the \_\_\_\_\_ on  
\_\_\_\_\_ in the State of \_\_\_\_\_
- (b) Is this Report an Amendment?     Yes     No

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>November 1, 1999 through November 30, 1999</u>		
5. (a) Cash on Hand January 1, 1999		\$60,008.43
(b) Cash on Hand at Beginning of Reporting Period	\$90,323.87	
(c) Total Receipts (from line 19)	\$18,138.86	\$170,260.07
(d) Subtotal (add lines 5(b) and 5(c) for Column A and Lines 5(a) and 5(c) for Column B)	\$108,462.73	\$231,168.50
7. Total Disbursements (from Line 30)	\$18,422.94	\$139,126.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 5 (d))	\$92,039.79	\$92,039.79
9. Debt and Obligations Owed To The Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligation BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

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

Type or Print Name of Treasurer  
**William E. LaRue**

Signature of Treasurer  
*W. LaRue*

Date  
**12-16-99**

# DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE	REPORT COVERING PERIOD	
<b>MAINTENANCE OF WAY POLITICAL LEAGUE</b>	FROM: 11/1/99	TO: 11/30/99
<b>I. Receipts</b>	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contribution (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A).....	\$2,104.00	\$12,125.00
ii. Unitemized.....	\$12,758.86	\$154,359.07
iii. Total.....(add ii and i) >	\$14,862.86	\$166,484.07
b. Political Party Committees.....	\$0.00	\$0.00
c. Other Political Committees (such as PACs).....	\$0.00	\$0.00
d. Total Contributions.....(add a iii, b and c) >	\$14,862.86	\$166,484.07
12. Transfers From Affiliated/Other Party Committees.....	\$0.00	\$0.00
13. All Loans Received.....	\$0.00	\$0.00
14. Loan Repayments Received.....	\$0.00	\$0.00
15. Offsets To Operating Expenditures (Refund, Rebates,.....)	\$3,276.00	\$3,276.00
16. Refunds Of Contributions Made to Federal Candidates & Other Political Committees.....	\$0.00	\$500.00
17. Other Federal Receipts (Dividends, Interest, ect).....	\$0.00	\$0.00
18. Transfer from Nonfederal Account for Joint Activity.....	\$0.00	\$0.00
19. Total Receipts.....(ADD 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$18,138.86	\$170,260.07
20. Total Federal Receipts.....(subtract line 16 from line 19) >	\$18,138.86	\$170,260.07
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal / Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	\$0.00	\$0.00
ii. Non-Federal Share.....	\$0.00	\$0.00
b. Other Federal Operating Expenditures.....	(\$2,184.00)	\$7,684.00
c. Total Operating Expenditures.....(add a i, a ii and b) >	(\$2,184.00)	\$7,684.00
22. Transfers to Affiliated/Other Party Committees.....	\$0.00	\$0.00
23. Contributions to Federal Candidates Committees and Other Political Committees.....	\$18,000.00	\$138,705.77
24. Independent Expenditures (use Schedule E).....	\$0.00	\$0.00
25. Coordinated Expenditures Made by Party Committees(2 USC. 441a(d)) (Sch. F).....	\$0.00	\$0.00
26. Loan Repayment Made.....	\$0.00	\$0.00
27. Loans Made.....	\$0.00	\$0.00
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....	\$0.00	\$0.00
b. Political Party Committees.....	\$0.00	\$0.00
c. Other Political Party Committees (such as PACs).....	\$0.00	\$0.00
d. Total Contribution Refunds.....(add a, b and c) >	\$0.00	\$0.00
29. Other Disbursements.....	\$422.94	\$16,080.71
30. Total Disbursements.....(add 21c, 22, 23, 24, 25, 26, 27, 28d and 29) >	\$16,422.94	\$184,814.48
31. Total Federal Disbursements.....(Subtract line 21 a ii from line 30) >	\$16,422.94	\$184,814.48
<b>III. Net Contributions/ Operating Expenditures</b>		
32. Total Contributions (other than loans)(from line 11d).....	\$14,862.86	\$166,484.07
33. Total contribution Refund (from line 28d).....	\$0.00	\$0.00
34. Net Contributions (other than loans)(subtract line 33 from 32).....	\$14,862.86	\$166,484.07
35. Total Federal Expenditures.....(add 21 a i and 21 b) >	(\$2,184.00)	\$7,684.00
36. Offsets to Operating Expenditures (from line 15).....	\$3,276.00	\$3,276.00
37. Net Operating Expenditures.....(subtract line 35 from 35) >	(\$5,480.00)	\$4,388.00

**SCHEDULE A ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11a.1

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)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TONY WHEELER 205 BW 7TH ST. NEWTON, KS 67114-4227	BRO. OF MAINT. OF WAY EMPL. - AT&SF SYS. FED.	11/30/99	\$150.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: ASSISTANT GENERAL CHAIRMAN	Aggregate Year-to Date > \$1,650	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LOUIS R. BELOW 29 SIMMONS WAY DAVIS, CA 95616-2422	BRO. OF MAINT. OF WAY EMPL. - PACFED	11/30/99	\$42.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: SYSTEM OFFICER	Aggregate Year-to Date > \$462	
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT L. BROWN 411 CHESTNUT ST. ONEONTA, NY 13820-2120	BRO. OF MAINT. OF WAY EMPL. -	11/18/99 11/30/99	\$50.00 \$50.00 \$37.50
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: NEW YORK LEGISLATIVE DIRECTOR	Aggregate Year-to Date > \$897.50	
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM L. GLISSON 11219 LONGBROOKE DRIVE RIVERVIEW, FL 33569-7079	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$50.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: FLORIDA LEGISLATIVE DIRECTOR	Aggregate Year-to Date > \$50	
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GUY SACKETT POB 591 LONGVIEW, TX 75608	BRO. OF MAINT. OF WAY EMPL. - MOPAC SYS. FED.	11/30/99	\$50.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: ASSISTANT CHRMN./ SECRETARY-TREASURER	Aggregate Year-to Date > \$500	
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GREG KREIE POB 26861 PRESCOTT VALLEY, AZ 86312-5861	BRO. OF MAINT. OF WAY EMPL.		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: ARIZONA LEGISLATIVE DIRECTOR	Aggregate Year-to Date > \$500	
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICK B. WEHRLI 1017 S. FRABER WAY AURORA, CO 80012-3794	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$50.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation: VICE PRESIDENT	Aggregate Year-to Date > \$550	

Subtotal Of Receipts This Page (optional) \_\_\_\_\_>

\$479.50

Total This Period (last page this line number only) \_\_\_\_\_>

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NAME OF COMMITTEE (in Full)

**Maintenance Of Way Political League**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
D. J. BERANEK PO BOX 2036 LA CROSSE, WI 54602-2036	BRO. OF MAINT. OF WAY EMPL. - CMSTPP SYS. FED.	11/18/99	\$80.00
	Occupation: OFFICER	11/18/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$480		
B. Full Name, Mailing Address and Zip Code WILLIAM E. LARUE 2689 WILLARD TROY, MI 48069	BROTHERHOOD OF MAINT. OF WAY EMPLOYES	11/30/99	\$40.00
	Occupation: INTERNATIONAL SECRETARY-TREASURER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$440		
C. Full Name, Mailing Address and Zip Code DAVID T. COLLINS PO BOX 325 WINSTON, GA 30187-0325	BRO. OF MAINT. OF WAY EMPL. - SOL SYS. DIV.	11/18/99	\$40.00
	Occupation: OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$400		
D. Full Name, Mailing Address and Zip Code SAMUEL R. ELLIOTT 1319 AIRPORT RD. 2B HOT SPRINGS, AR 71913-9038	BRO. OF MAINT. OF WAY EMPLOYES MOPAC SYS. FED.	11/18/99	\$40.00
	Occupation: OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$440		
E. Full Name, Mailing Address and Zip Code LEON FENHAUS 45743 308TH STREET WAKONDA, SD 57073-8313	BRO. OF MAINT. OF WAY EMPL. - C&NW FED.	11/30/99	\$40.00
	Occupation: GENERAL CHAIRMAN		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$440		
F. Full Name, Mailing Address and Zip Code MAC A. FLEMING 38271 LONG STREET HARRISON TWP., MI 48045	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$40.00
	Occupation: INTERNATIONAL PRESIDENT		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$440		
G. Full Name, Mailing Address and Zip Code RICHARD A. LAU 8287 LYMNOS ROAD BHERRILLS FORD, NC 28673-9381	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$40.00
	Occupation: VICE PRESIDENT		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$440		

Subtotal Of Receipts This Page (optional) .....

\$340.00

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

**SCHEDULE A ITEMIZED RECEIPTS**

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

PAGE 3 OF 12

FOR LINE NUMBER 11 a. 1

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NAME OF COMMITTEE (In Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MALCOLM B. DAVISON 1819 WOODLAND VIEW DR. INDEPENDENCE, KS 67301-9779	BRO. OF MAINT. OF WAY EMPL. - MOPAC SYS. FED.	11/30/99	\$40.00
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify): <input type="checkbox"/> General		Occupation SYSTEM OFFICER Aggregate Year-to Date > \$440	
B. Full Name, Mailing Address and Zip Code MAYNARD LOWE BOX 173 MENDOTA, IL 39576-3440	BRO. OF MAINT. OF WAY EMPL. - BURL. SYS. DIV.		
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify): <input type="checkbox"/> General		Occupation - OFFICER Aggregate Year-to Date > \$400	
C. Full Name, Mailing Address and Zip Code DAVID K. MARQUAR 1100 LONGO ST WAVELAND, MS 39576-3440	BRO. OF MAINT. OF WAY EMPL. -	11/30/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify): <input type="checkbox"/> General		Occupation MISSISSIPPI LEGISLATIVE DIRECTOR Aggregate Year-to Date > \$375	
D. Full Name, Mailing Address and Zip Code TIMOTHY MC CALL 8980 CELIA DRIVE BATON ROUGE, LA 70811-1135	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$35.00
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify): <input type="checkbox"/> General		Occupation - ORGANIZER Aggregate Year-to Date > \$385	
E. Full Name, Mailing Address and Zip Code MICHAEL R. POOLE 1914 S. WOODLAND ST. AMARILLO, TX 79103-5110	BRO. OF MAINT. OF WAY EMPL. - AT&SF SYS. FED.		
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify): <input type="checkbox"/> General		Occupation - OFFICER Aggregate Year-to Date > \$400	
F. Full Name, Mailing Address and Zip Code DOUG RESER 3103 LINCOLN AVENUE DES MOINES, IA 50310-5148	BRO. OF MAINT. OF WAY EMPL. - UNPAC SYS. DIV.	11/18/99	\$40.00
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify): <input type="checkbox"/> General		Occupation OFFICER Aggregate Year-to Date > \$400	
G. Full Name, Mailing Address and Zip Code ALLAN F. SCOTT 8N 493 GENEVA AVE ST. CHARLES, IL 60174-8823	BRO. OF MAINT. OF WAY EMPL. - CMSTP&P SYS FED.		
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify): <input type="checkbox"/> General		Occupation OFFICER Aggregate Year-to Date > \$400	

Subtotal Of Receipts This Page (optional) \_\_\_\_\_

\$140.00

Total This Period (last page this line number only) \_\_\_\_\_

**SCHEDULE A ITEMIZE RECEIPTS**

Use separate schedule (s)  
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Detailed Summary Page

FOR LINE NUMBER  
11 a. i

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NAME OF COMMITTEE (In Full)

**Maintenance Of Way Political League**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WILLIAM H. SPEER, JR. 48 HYNES AVE., APT B2 GROTON, CT 06340	BRO. OF MAINT. OF WAY EMPL. - NE SYS. FED.	11/30/99	\$40.00
	Occupation OFFICER	11/30/99	\$40.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$440		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN VILLALOBOS 915 W. EL DORADO DR. WOODLAND, CA 96885-6083	BRO. OF MAINT. OF WAY EMPL. - PACFED	11/30/99	\$40.00
	Occupation SYSTEM OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$440		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HENRY WISE 3465 SMITH HILL RD SLATINGTON, PA 18080-3423	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$40.00
	Occupation VICE PRESIDENT		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$440		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL DE EMILIO 2 MILLRACE LN WEST GROVE, PA 19390-9308	BRO. OF MAINT. OF WAY EMPL.		
	Occupation: Asst. to Pres. for State Legislative Activities		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$225		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOUGLAS M. ERHART 1203 27TH ST., NW MANDAN, ND 58554-1522	BRO. OF MAINT. OF WAY EMPL.		
	Occupation NORTH DAKOTA LEGISLATIVE DIRECTOR		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$310		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HOSIE L. EVANS 1218 S. 39TH ST KANSAS CITY, KS 66108-1813	BRO. OF MAINT. OF WAY EMPL.		
	Occupation KANSAS LEGISLATIVE DIRECTOR		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$300		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CHARLES E. FORBES, JR. 10425 SMALLEY AVE KANSAS CITY, MO 64134-2040	BRO. OF MAINT. OF WAY EMPL.		
	Occupation MISSOURI LEGISLATIVE DIRECTOR		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$360		

Subtotal Of Receipts This Page (optional) .....

\$160.00

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

**SCHEDULE A ITEMIZE RECEIPTS**

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

PAGE 5 OF 12

FOR LINE NUMBER 11 e. i

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NAME OF COMMITTEE (in Full)

**Maintenance Of Way Political League**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MARK E. HEMPHILL PO BOX 748 NEWTON, KS 67114-0748	BRO. OF MAINT. OF WAY EMPL - AT&SF SYS. FED.	11/30/99	\$30.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation GENERAL CHAIRMAN		
	Aggregate Year-to Date >\$350		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DALE HOFFMAN 1928 PARKER AVE OBAWATOMIE, KS 66064-1710	BRO. OF MAINT. OF WAY EMPL - FRISCO FED.		
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OFFICER		
	Aggregate Year-to Date >\$300		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY E. KINNEY PO BOX 350 ATOKA, TN 38004-0350	BRO. OF MAINT. OF WAY EMPL - MOPAC SYS. FED	11/30/99	\$30.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation SYSTEM OFFICER		
	Aggregate Year-to Date >\$330		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEPHEN C. KLAFFKE 2125 LEMURIA ST EUGENE, OR 97402-1019	BRO. OF MAINT. OF WAY EMPL - PACFED	11/18/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation OFFICER	11/18/99	\$4.00
	Aggregate Year-to Date >\$319		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EDWARD W. LONG III 3493 WEBSTER RD FREDONIA, NY 14063-0782	BRO. OF MAINT. OF WAY EMPL - CRSF	11/30/99	\$30.00
Receipts For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation OFFICER		
	Aggregate Year-to Date >\$390		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID RICH 18 WEST LEHMAN AVE HATBORO, PA 19040-3844	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$30.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation GRAND LODGE AUDIT		
	Aggregate Year-to Date >\$380		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ERNEST L. TORKSE 851 OLATHE WAY AURORA, CO 80011-7858	BRO. OF MAINT. OF WAY EMPL.	11/30/99	\$30.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation VICE PRESIDENT		
	Aggregate Year-to Date > \$390		

Subtotal Of Receipts This Page (optional) **\$179.00**

Total This Period (last page this line number only)



**SCHEDULE A ITEMIZED RECEIPTS**

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

PAGE 6 OF 12

FOR LINE NUMBER 11 B. 1

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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TERRY E. DOWELL 276 COLUMBINE CASPER, WY 82604-3824	BRO. OF MAINT. OF WAY EMPL. - BURNDR SYS FED Occupation: OFFICER Aggregate Year-to Date >\$ 280		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL GATES 6208 BLACK OAKS WAY INDIANAPOLIS, IN 46237-9263	BRO. OF MAINT. OF WAY EMPL. Occupation INDIANA LEGISLATIVE DIRECTOR Aggregate Year-to Date > \$302.50	11/30/98 11/30/98 11/30/98	\$25.00 \$25.00 \$2.50
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
MALCOLM MAIR 815 CAPISTRANO DR SUISUN CITY, CA 94585-3213	BRO. OF MAINT. OF WAY EMPL. - PACFED Occupation: OFFICER Aggregate Year-to Date >\$400	Date (month, day, year)	Receipt this Period
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CARL STARK 1852 PARKER AVE SHERIDAN WY 82801-2490	BRO. OF MAINT. OF WAY EMPL. - BURNDR SYS. FED. Occupation OFFICER Aggregate Year-to Date > \$285	11/30/98	\$15.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
HAROLD B. WILSON 695 CUTLIP FRK GASSAWAY WV 26624-9503	BRO. OF MAINT. OF WAY EMPL. - AEF Occupation OFFICER Aggregate Year-to Date >\$300	11/30/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANA D. BOOTH PO BOX 411 310 1/2 PIKE ST. BELINGTON, WV 26250-0411	BRO. OF MAINT. OF WAY EMPL. - Occupation WEST VIRGINIA LEGISLATIVE DIRECTOR Aggregate Year-to Date >\$300	11/30/99	\$30.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL S. BESSETTE 14 CRESTWOOD CT CUMBERLAND, RI 02864-6218	BRO. OF MAINT. OF WAY EMPL. Occupation RHODE ISLAND LEGISLATIVE DIRECTOR Aggregate Year-to Date >\$320	11/30/99 11/30/99 11/30/99	\$25.00 \$25.00 \$5.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):			

Subtotal Of Receipts This Page (optional) .....

\$177.50

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 7 OF 12

FOR LINE NUMBER 11 a. 1

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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERTO L. ALMAGUER 218 N G STREET MONMOUTH, IL 61462-1587	BRO. OF MAINT. OF WAY EMPL. Occupation: ILLINOIS LEGISLATIVE DIRECTOR		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$ 250		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
D. ALQUINZON 1547 E. MILLARD WAY DINUBA, CA 93618-1849	BRO. OF MAINT. OF WAY EMPL - AT&SF SYS. FED. Occupation OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
Name of Employer	Date (month, day, year)	Receipt this Period	
RAYMOND L. ASH 240 S. PINE ST. PORTOLA CA 96122-9000	BRO. OF MAINT. OF WAY EMPL - PACFED Occupation GENERAL CHAIRMAN	11/30/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$275		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIEL J. BREWER 4091 CR 5280 POMONA MO 65789	BRO. OF MAINT. OF WAY EMPL - FRISCO FED. Occupation OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES K. BROWN 1015 RANDLE ST. EDWARDSVILLE, IL 62025-1339	BRO. OF MAINT. OF WAY EMPL - C&NW SYS. FED. Occupation OFFICER	11/18/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$276		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KENT L. BUSHMAN 28161 BUENA VISTA DR ROCK FALLS IL 61071-9332	BRO. OF MAINT. OF WAY EMPL - C&NW SYS. FED. Occupation VICE CHAIRMAN	11/30/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$252.50		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RICARDO C. CANCHOLA PO BOX 314 TRUCKEE CA 96160-0314	BRO. OF MAINT. OF WAY EMPL - PACFED Occupation OFFICER	11/18/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$275		
<b>Subtotal Of Receipts This Page (optional)</b> .....>			\$190.00
<b>Total This Period (last page this line number only)</b> .....>			

**SCHEDULE A ITEMIZE RECEIPTS**

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

PAGE 8 OF 12

FOR LINE NUMBER 11 a. 1

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NAME OF COMMITTEE (in Full)

**Maintenance Of Way Political League**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GARY COX 803 MC CORMICK ST. FULTONDALE AL 35068-0233	BRO. OF MAINT. OF WAY EMPL. - SOU. SYS. DIV. Occupation GENERAL CHAIRMAN	11/30/98	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$275		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DUANE DICKSON 10591 N. 91ST AVENUE, LOT 59 PEORIA, AZ 85345-8814	BRO. OF MAINT. OF WAY EMPL. - AT&SF SYS. FED. Occupation OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$260		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
GREGORY D. LARGENT 2 JOHNS WOODS DR ROCKFORD IL 61103-1680	BRO. OF MAINT. OF WAY EMPL. - C&NW SYS. FED. Occupation OFFICER	11/18/98	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$275		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RODNEY K. MALCOLM 321 S. PINE ST CENTRALIA, IL 62801-4025	BRO. OF MAINT. OF WAY EMPL. - BURL SYS. DIV. Occupation OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. T. MATTHEWS RR 1, BOX 155 HELPER, UT 84528	BRO. OF MAINT. OF WAY EMPL. - Occupation LITAN LEGISLATIVE DIRECTOR	11/18/98	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$275		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROY L. MILLER RR 1, BOX 530 TORRINGTON, WY 82240-9118	BRO. OF MAINT. OF WAY EMPL. - BURL SYS. DIV. Occupation: OFFICER		
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES R. MOTTRAM 2856 PASEO RIO WAY, APT. 39 SACRAMENTO, CA 95827-1385	BRO. OF MAINT. OF WAY EMPL. - PACFED Occupation OFFICER	11/18/98	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$275		

Subtotal Of Receipts This Page (optional) \_\_\_\_\_>

\$100.00

Total This Period (last page this line number only) \_\_\_\_\_>

**SCHEDULE A ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11 a. 1

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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SCOTTY D. NISWONGER POB 264 CABOT, AR 72023-0264  Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	BRO. OF MAINT. OF WAY EMPL. Occupation: ILLINOIS LEGISLATIVE DIRECTOR Aggregate Year-to Date > \$ 253	11/18/99	\$23.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TIMOTHY W. PATOCKA 23303 CO RD 170 PERRY OK 73077-9337  Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	BRO. OF MAINT. OF WAY EMPL. - FRISCO FED. Occupation		
	Aggregate Year-to Date > \$250		
J. A. PUCKETT R/R 1, BOX 83 CARROLLTON, AL 36447-9733  Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Name of Employer BRO. OF MAINT. OF WAY EMPL. Occupation ALABAMA LEGISLATIVE DIRECTOR Aggregate Year-to Date > \$260	Date (month, day, year)	Receipt this Period
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEFF J. RANKIN 411 SUMMIT ST MARSHALLTOWN, IA 50158-6750  Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	BRO. OF MAINT. OF WAY EMPL. - C&NW SYS. FED. Occupation OFFICER Aggregate Year-to Date > \$275	11/18/99	\$25.00
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TERRY D. RODRIGUEZ 13870 SAN GORGONIA VICTORVILLE, CA 92382-9048  Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	BRO. OF MAINT. OF WAY EMPL. - AT&TF SVS. FED. Occupation OFFICER Aggregate Year-to Date > \$290		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES A. TEAGUE PO BOX 1337 WESTFORD, MA 01886-4837  Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	BRO. OF MAINT. OF WAY EMPL. Occupation MASSACHUSETTS LEGISLATIVE DIRECTOR Aggregate Year-to Date > \$315	11/30/99 11/30/99 11/30/99	\$15.00 \$15.00 \$50.00
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL E. THOMAS 2204 NORMAN LN PUEBLO, CO 81005-3358  Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	BRO. OF MAINT. OF WAY EMPL. Occupation COLORADO LEGISLATIVE DIRECTOR Aggregate Year-to Date > \$250		

Subtotal Of Receipts This Page (optional) \_\_\_\_\_

\$128.00

Total This Period (last page this line number only) \_\_\_\_\_

**SCHEDULE A ITEMIZE RECEIPTS**

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

FOR LINE NUMBER 11 a. i

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NAME OF COMMITTEE (In Full)

**Maintenance Of Way Political League**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JUAN A. TRADO, JR 5800 FAIR OAKS DR BAKERSFIELD, CA 93306-2404	BRO. OF MAINT. OF WAY EMPL. - UNPAC SYS DIV. Occupation OFFICER	11/18/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN A. FISHER 5895 RUSH BRANCH RD SOMERSET KY 42501-5729	BRO. OF MAINT. OF WAY EMPL. - Occupation OFFICER	11/18/98	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CLAUDE W. REEDER 540 TREMONT DR GODFREY IL 62085-2350	BRO. OF MAINT. OF WAY EMPL. - Occupation OFFICER	11/18/99	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALAN M. STODER 205 W NORTH AVE POB 506 PIONEER, OH 43554-0506	BRO. OF MAINT. OF WAY EMPL. - Occupation OFFICER	11/18/98	\$25.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$250		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD J. COLUMBUS 8400 E. ILIFF AVE #56 DENVER, CO 80231-3484	BRO. OF MAINT. OF WAY EMPL. Occupation GRAND LODGE AUDITOR	11/30/98	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$220		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STUART A. HURLBURT JR. 808 COUNTY HIGHWAY 48 ONEONTA, NY 13820-8899	BRO. OF MAINT. OF WAY EMPL. - NE SYS. FED. Occupation: GENERAL CHAIRMAN	11/30/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$220		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL J. KUK 5415 EISENHOWER DR WONDER LAKE, IL 60097-9708	BRO. OF MAINT. OF WAY EMPL. - C&NW Occupation: OFFICER	11/18/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$220		

Subtotal Of Receipts This Page (optional) \_\_\_\_\_

\$180.00

Total This Period (last page this line number only) \_\_\_\_\_

**SCHEDULE A ITEMIZED RECEIPTS**

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

PAGE 11 OF 12

FOR LINE NUMBER 11 a. 1

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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
M. LEWIS PO BOX 3014 WINDOW ROCK AZ 86515-3014	BRO. OF MAINT. OF WAY EMPL. - MOPAC Occupation: OFFICER	11/18/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$220		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES W. MORRIS 308 N. MAIN ST HOISINGTON, KS 67544-2358	BRO. OF MAINT. OF WAY EMPL. - MT&PLS Occupation: OFFICER	11/18/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$220		
ROBERT I. NICKENS 1142 E BURKITT ST SHERIDAN WY 82801-6801	BRO. OF MAINT. OF WAY EMPL. - BURL SYS. DIVISION Occupation: VICE GEN. CHAIRMAN SECRETARY-TREASURER	11/30/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$220		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
EVAN OSTLUND 6210 SHERIDAN AVENUE S RICHFIELD, MN 55423-1006	BRO. OF MAINT. OF WAY EMPL. - 800 LINE SYS. DIV. Occupation: GENERAL CHAIRMAN	11/20/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date > \$220		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MATTHEW J. PITTS 1722 W NEWHALL DR TUCSON AZ 85748-1378	BRO. OF MAINT. OF WAY EMPL. - PACFED Occupation: OFFICER	11/18/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$220		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVEN V. POWERS 314 BARTRAM ROAD RIVERSIDE IL 60548-1819	BRO. OF MAINT. OF WAY EMPL. - Occupation: ASST. TO PRESIDENT	11/30/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$220		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES A. SUPERFISKY 48736 SHEFFIELD DR NOVI MI 48374-3945	BRO. OF MAINT. OF WAY EMPL. Occupation: DIRECTOR, INFORMATION SYSTEMS	11/30/99	\$20.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Aggregate Year-to Date >\$		

Subtotal Of Receipts This Page(optional) .....> \$140.00

Total This Period (last page this line number only) .....> \$2,104.00

**SCHEDULE A ITEMIZE RECEIPTS**

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

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NAME OF COMMITTEE (in Full)

**Maintenance Of Way Political League**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SHEEL METAL WORKERS INT'L ASSOCIATION POLITICAL ACTION LEAGUE 1750 NEW YORK AVENUE, N.Y. WASHINGTON DC 20006		11/18/89	\$3,276.00
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Purchased left over RedSkine Tickets	Occupation	Aggregate Year-to Date > \$3,276	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	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
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	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
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	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
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	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
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	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
Receipts For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to Date > \$	

Subtotal Of Receipts This Page (optional) \$3,276.00

Total This Period (last page this line number only) \$6,380.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
JOHN OLVER (D MA-1) 38 IVY STREET, SE WASHINGTON, DC 20003	CITIZENS FOR JOHN OLVER FOR CONGRESS  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/98	\$600.00
B. Full Name, Mailing Address and Zip Code JIM CLYBURN (D SC-6) 501 CAPITOL CT., NE, SUITE 100 WASHINGTON, DC 20002	FRIENDS OF JIM CLYBURN  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/98	\$1,000.00
C. Full Name, Mailing Address and Zip Code BOB MENENDEZ (D NJ-13) PO BOX 848 UNION CITY, NJ 07087	MENENDEZ FOR CONGRESS, INC.  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/98	\$500.00
D. Full Name, Mailing Address and Zip Code RONNIE SHOWB (D MS-04) ROUTE 2, BOX 234 BASSFIELD, MS 39421	FRIENDS OF RONNIE SHOWB  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/99	\$1,000.00
E. Full Name, Mailing Address and Zip Code DAVID MINGE (D MN-2) PO BOX 74 GRANITE FALLS, MN 58241	MINGE FOR CONGRESS  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/06/98	\$1,000.00
F. Full Name, Mailing Address and Zip Code CORRINE BROWN (D FL-3) 421 NEW JERSEY AVE., S.E. WASHINGTON, DC 20003	FRIENDS OF CORRINE BROWN  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/98	\$1,000.00
G. Full Name, Mailing Address and Zip Code LYNN WOOLSEY (D CA-6) PO BOX 750178 PETALUMA, CA 94475	WOOLSEY FOR CONGRESS  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/99	\$500.00
H. Full Name, Mailing Address and Zip Code MARTIN FROST (D TX-11) POB 4218 DALLAS, TX 75208	MARTIN FROST CAMPAIGN COMMITTEE  Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/98	\$1,000.00
I. Full Name, Mailing Address and Zip Code MISSISSIPPI VOTER EDUCATION FUND C/O NEAL FOWLER, PRESIDENT & ST MISSISSIPPI AFL-CIO, PO BOX 3378 JACKSON, MS 39207	MISSISSIPPI VOTER EDUCATION FUND  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) VOTER EDUCATION	11/05/99	\$1,000.00
<b>TOTAL of Disbursements This Page (optional)</b> .....			\$7,500.00
<b>TOTAL This Period (last page this line number only)</b> .....			



**SCHEDULE B ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 4

FOR LINE NUMBER 28

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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
NEW SOUTH DEMOCRATS 200 N. CONGRESS, STE. 308 JACKSON, MS 39201	NEW SOUTH DEMOCRATS (FEDPAC COORDINATED CAMPAIGN) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/99	\$1,000.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
JOHN CONYERS (D MI-14) 680 WOODWARD AVE, SUITE 650 DETROIT, MI 48226	FRIENDS OF JOHN CONYERS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/99	\$1,000.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
SANDER LEVIN (D MI-12) PO BOX 1082 WARREN, MI 48090	LEVIN FOR CONGRESS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/05/99	\$500.00
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
JAMES FLORIO (FORMER NJ GOVERNOR, D-CAND. U. S. SENATE) 390 GEORGE ST., SUITE 404 NEW BRUNSWICK, NJ 08902	FLORIO FOR U. S. SENATE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/18/99	\$8,000.00
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
NEW SOUTH DEMOCRATS 200 N. CONGRESS, STE. 308 JACKSON, MS 39201	NEW SOUTH DEMOCRATS (FEDPAC COORDINATED CAMPAIGN) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/16/99	\$1,000.00
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P		
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	10/27/99	
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	10/27/99	
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement this Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	10/27/99	

TOTAL of Disbursements This Page (optional) \_\_\_\_\_

\$8,000.00

TOTAL This Period (last page this line number only) \_\_\_\_\_

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 4

FOR LINE NUMBER  
21(b)

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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
QUINN FOR CONGRESS PO BOX 2012 BLASDELL, NY 14218	4 TICKETS @ \$28.25 EACH PLUS \$15 PKNG PARKING PASS 11/07/99 GAME, REDSKINS VS. BUFFALO BILLS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/07/99	\$1,082.00 IN KIND CONTRIBUTION
DEMOCRATIC NATIONAL COMMITTEE 480 S. CAPITOL STREET, SE WASHINGTON, DC 20003	4 TICKETS @ \$28.25 EACH PLUS \$15 PKNG PARKING PASS 11/21/99 GAME, REDSKINS VS. NEW YORK GIANTS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	11/21/99	\$1,092.00 IN KIND CONTRIBUTION
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	Date (month day, year)	Amount of each Disbursement this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 2000P	Date (month day, year)	Amount of each Disbursement this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of each Disbursement this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of each Disbursement this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of each Disbursement this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of each Disbursement this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month day, year)	Amount of each Disbursement this Period

TOTAL of Disbursements This Page (optional) .....	52,184.00
TOTAL This Period (last page this line number only) .....	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER  
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NAME OF COMMITTEE (in Full)

**MAINTENANCE OF WAY POLITICAL LEAGUE**

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
TOM JUDGE POB 1039 LINCOLN PARK, MI 48146	SOUVENIRS - 12 JACKETS  Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SOUVENIRS	11/18/98	\$422.94
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month day, year)	Amount of each Disbursement this Period

TOTAL of Disbursements This Page (optional).....>	\$422.94
TOTAL This Period (last page this line number only).....>	\$18,422.94

