

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

RECEIVED
FEDERAL ELECTION
COMMISSION

Oct 14 1 05 PM '98

1. NAME OF COMMITTEE (in full)
ALLIANCE FOR THE WEST

ADDRESS (number and street) Check if different than previously reported
1156 15th STREET, NW

CITY, STATE and ZIP CODE
WASHINGTON, DC 20005

2. FEC IDENTIFICATION NUMBER
00335133

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

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period <u>JULY 1, 1998</u> through <u>SEPT. 30, 1998</u>		
6.	(a) Cash on Hand January 1, 19 <u>98</u> <input checked="" type="checkbox"/>		\$
	(b) Cash on Hand at Beginning of Reporting Period	\$ <u>15,585.52</u>	
	(c) Total Receipts (from Line 19)	\$ <u>39,200.⁰⁰</u>	\$ <u>54,810.⁰⁰</u>
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ <u>54,785.52</u>	\$ <u>54,910.⁰⁰</u>
7.	Total Disbursements (from Line 30)	\$ <u>13,987.⁰²</u>	\$ <u>14,011.⁵⁰</u>
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ <u>40,798.⁵⁰</u>	\$ <u>40,798.⁰⁰</u>
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ <u>0</u>	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20453 Toll Free 800-424-9630 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ <u>9,120.¹⁶</u>	

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 D. HARRIS

Signature of Treasurer *Will Harris* Date **1/30/99**

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

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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/91)

E OF COMMITTEE	REPORT COVERING PERIOD		
	FROM 7/1/98	TO: 9/30/98	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	\$ 8,500	\$ 4,110	11(a)
ii. Unitemized	\$ 700	\$ 700	11(b)
iii. Total	\$ 9,200	\$ 4,810	11(c)
b. Political Party Committees			11(d)
c. Other Political Committees (such as PACs)	\$ 30,000	\$ 40,000	11(e)
d. Total Contributions	\$ 39,200	\$ 54,810	11(f)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Retates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts	\$ 39,200	\$ 54,810	19
20. Total Federal Receipts	\$ 39,200	\$ 54,810	20
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures	\$ 8,977.02	\$ 9,001.80	21(c)
c. Total Operating Expenditures	\$ 8,977.02	\$ 9,001.80	21(d)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	\$ 5,010. ⁰⁰	\$ 5,010. ⁰⁰	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds			28(d)
29. Other Disbursements			29
30. Total Disbursements	\$ 13,987.02	\$ 14,011.80	30
31. Total Federal Disbursements	\$ 13,987.02		31
III Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	\$ 39,200	\$ 54,810	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	\$ 39,200	\$ 54,810	34
35. Total Federal Operating Expenditures	\$ 8,977.02	\$ 9,001.80	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures		\$ 9001. ⁸⁰	37

CCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 3
FOR LINE NUMBER

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)

ALLIANCE FOR THE WEST

PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
US WEST PAC 1020 19th ST, NW, STE 700 WASHINGTON, DC 20036		7/2/98	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ASWORTH CORPORATION PAC P.O. BOX 217 MEMPHIS, TN 38101		7/2/98	\$1,000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MORRISON-KNUDSON PAC 555 13th ST, NW, STE 410 WEST WASHINGTON, DC 20004		7/22/98	\$2,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
US TEAM PAC 100 WEST PUTNAM AVE GREENWICH, CT 06830		7/22/98	\$2,500 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,500	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FEDERAL EXPRESS PAC 2005 CORPORATE AVE MEMPHIS, TN 38132		7/22/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
R. DUFFY WALL ASSY. PAC 13th STREET NW, # 410 WASHINGTON, DC 20005		7/22/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BURSTON-MARSTELLER PAC 1850 M ST., NW WASHINGTON, DC 20036		7/22/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	

SUBTOTAL of Receipts This Page (optional)

\$9,500

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 **2** OF **3**
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ALLIANCE FOR THE WEST

PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN SUGARBEET GROWERS PAC 1156 15th STREET, NW #1101 WASHINGTON, DC 20005		8/11/98	\$4,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 4,000	
RJR PAC 1455 PENNSYLVANIA AVE NW, #425 WASHINGTON, DC 20004		8/11/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
PEABODY PAC 701 MARKET ST, STE 700 ST. LOUIS, MO 63101		8/11/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
LCI INTERNATIONAL PAC 555 SEVENTEENTH ST. DENVER, CO 80202		8/13/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
GREAT LAKES SUGARBEET GROWERS PAC 485 PLAZA NORTH 4800 FASHION SQUARE BLVD. SAGINAW, MICH 48604		9/16/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
NEW REPUBLICAN MAJORITY FUND PAC 228 S. WASHINGTON ST. #200 ALEXANDRIA, VA 22314		9/23/98	\$5,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000	
NATIONAL MEAT ASSOC. 1970 BROADWAY, STE 825 OAKLAND, CA 94612		9/30/98	\$1,000 ⁰⁰
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	\$14,000
TOTAL This Period (last page this line number only)	

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICROSOFT PAC 16011 NE, 36th WAY REDMOND, WA 98073		9/30/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ICF KAISER INTL. PAC 9300 LEE HIGHWAY FAIRFAX, VA 22031		9/30/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BROWN & WILLIAMSON TOBACCO PAC 1701 PENNSYLVANIA AVE, NW, STE 960 WASHINGTON, DC 20006		9/30/98	\$ 2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CAREER COLLEGE ASSN. PAC 750 FIRST ST., NE, STE 900 WASHINGTON, DC 20002		9/30/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AMERICAN HOME COUNCIL PAC "COLT" 1700 K STREET, NW, STE 300 WASHINGTON, DC 20006		9/30/98	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
AMERICAN MARITIME OFFICERS PAC 490 L'ENFANT PLAZA EAST, SW STE. 17204 WASHINGTON, DC 20024		9/30/98	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 4,000	
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	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

6,500

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 1 OF 1
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

INDIVIDUAL

ALLIANCE FOR THE WEST

A. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
B. Full Name, Mailing Address and ZIP Code G. STEWART & HSA HALL 805 LUNENBURG RD. GREAT FALLS, VA 22066 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer STEWART HALL ASSOC. Occupation SELF/OWNER Aggregate Year-to-Date > \$ 500	Date (month, day, year) 8/11/98	Amount of Each Receipt this Period \$ 500.00
C. Full Name, Mailing Address and ZIP Code THOMAS D. CAMPBELL 517 QUEEN ST. ALEXANDRIA, VA 22314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer THOMAS D. CAMPBELL ASSOC. Occupation OWNER/SELF Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 9/23/98	Amount of Each Receipt this Period \$ 1,000.00
D. Full Name, Mailing Address and ZIP Code LOUIS MOORE BROWN 1251 AVENUE OF THE AMERICAS 53RD FLOOR NEW YORK, NY 10020 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer LEWIS-BROWN MOORE CAPITAL MGMT. Occupation CEO/CHAIRMAN Aggregate Year-to-Date > \$ 5,000	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period \$ 5,000.00
E. Full Name, Mailing Address and ZIP Code JAMES B CHRISTIAN JR. 2550 M STREET, NW WASHINGTON, DC 20037 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer PATON-BOGGS Occupation ATTORNEY Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period \$ 500.00
F. Full Name, Mailing Address and ZIP Code R.E. HOLDING (EARL) P.O. BOX 1529 CHEYENNE, WY 82003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer SINCLAIR OIL CORP. Occupation OWNER Aggregate Year-to-Date > \$ 1,500	Date (month, day, year) 9/30/98	Amount of Each Receipt this Period \$ 1,500.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **\$ 8,500.00**

TOTAL This Period (last page this line number only) **\$ 8,500.00**

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE OF
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

ALLIANCE FOR THE WEST

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THE TOWNSEND GROUP 1510 WOODBINE ST. ALEXANDRIA, VA 22302	FUNDRAISING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/2/98	\$4,278.80
B. Full Name, Mailing Address and ZIP Code UPSTAIRS/DOWNSTAIRS CATERING 1713 WALKER RD. GREAT FALLS, VA 22066	FUNDRAISING/CATERING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/17/98	\$175.00
C. Full Name, Mailing Address and ZIP Code SUZANNE CRAIG 3107 WESSYNTON WAY ALEXANDRIA, VA 22309	FUNDRAISING/FOOD Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/98	\$777.91
D. Full Name, Mailing Address and ZIP Code 116 CLUB 116 C STREET WASHINGTON, DC 20002	FUNDRAISING/FOOD Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/98	\$326.32
E. Full Name, Mailing Address and ZIP Code FIRST UNION BANK CONNECTICUT & L WASHINGTON, DC	SERVICE CHARGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/12/98	\$4.00
F. Full Name, Mailing Address and ZIP Code FIRST UNION BANK CONNECTICUT & L WASHINGTON, DC	CHECK CHARGE Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/12/98	\$61.57
G. Full Name, Mailing Address and ZIP Code THE TOWNSEND GROUP 1510 WOODBINE ST. ALEXANDRIA, VA	FUNDRAISING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/11/98	\$3,353.44
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$8,977.02

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER

CONTRIBUTIONS TO FEDERAL CANDIDATES / OTHER COM.

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NAME OF COMMITTEE (in Full)

ALLIANCE FOR THE WEST

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
MIKE CRAPO FOR U.S. SENATE 106 N. 6 th ST., 2 nd FLR BOISE, ID 83702	CANDIDATE MIKE CRAPO, U.S. SENATE CANDIDATE, (IDAHO) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	\$1,000 ⁰⁰
FAYE BOOZEMAN FOR U.S. SENATE 414 S. PULASKI STREET LITTLE ROCK, ARK. 72201	CANDIDATE FAYE BOOZEMAN, U.S. SENATE, (ARKANSAS) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	\$1,000 ⁰⁰
PETER FITZGERALD FOR U.S. SENATE 50 N. BRACKENAY, STE 4-5 PALATINE, IL 60067	CANDIDATE PETER FITZGERALD, U.S. SENATE, (ILLINOIS) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	\$1,000 ⁰⁰
MATT FONG FOR U.S. SENATE 888 FIGUEROA #680 LAS ANGELES, CA 90017	CANDIDATE MATT FONG, U.S. SENATE (CALIFORNIA) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	\$1,000 ⁰⁰
JIM BUNNING FOR U.S. SENATE 1717 DIXIE HIGHWAY, #230 FORT WRIGHT, KY 4011	CANDIDATE JIM BUNNING, U.S. SENATE (KENTUCKY) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	\$1,000 ⁰⁰
IDAHO REPUBLICAN PARTY P.O. Box 2267 BOISE, ID 83701	STATE PARTY (IDAHO) CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/30/98	\$10 ⁰⁰
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$5,010⁰⁰

TOTAL This Period (last page this line number only)

\$5,010⁰⁰

SCHEDULE D

Revised 3/80

DEBTS AND OBLIGATIONS

Excluding Loans

LINE NUMBER _____
(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
ALLIANCE FOR THE WEST A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor THE TOWNSEND GROUP 1510 WOODBINE ST. ALEXANDRIA, VA 22302		\$9,120. ¹⁶		\$9,120. ¹⁶
Nature of Debt (Purpose): FUNDRAISING				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
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)				
2) TOTALS This Period (last page in this line only)				\$9,120. ¹⁶
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)				

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 <i>10-14-98</i>
<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>[Signature]</i> PREPARER	<i>10-14-98</i> DATE PREPARED