

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

SEP 18 4 13 PM '98

1. NAME OF COMMITTEE (in full) American Dietetic Association Political Action Committee	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1225 Eye Street, NW, Ste. 1250	2. FEC IDENTIFICATION NUMBER C00143560
CITY, STATE and ZIP CODE Washington, DC 20005	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM 1M)

4. TYPE OF REPORT

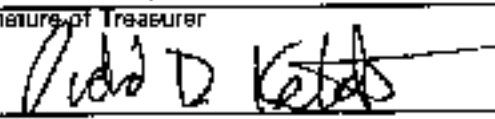
(a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31

Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____

Thirtieth day report following the General Election on _____
in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>08/01/98</u> through <u>08/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 119,041.03
(b) Cash on Hand at Beginning of Reporting Period.....	\$ 178,087.85	
(c) Total Receipts (from line 19).....	\$ 10,507.50	\$ 261,145.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	\$ 188,595.35	\$ 380,186.57
7. Total Disbursements (from Line 30).....	\$ 13,213.31	\$ 204,804.53
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))..	\$ 175,382.04	\$ 175,382.04
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ 0.00	For further information: Federal Election Commission 999 F Street, NW Washington, DC 20463 Toll Free 800-424-9130 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	\$ 0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		
Type or Print Name of Treasurer Todd D. Ketch, Assistant Treasurer		Date
Signature of Treasurer 		7/18/98

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 3X

Revised 11/1/91

NAME OF COMMITTEE	REPORT COVERING PERIOD	
American Dietetic Association Political Action Committee	FROM: 08/01/98	TO: 08/31/98
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	0.00	1,155.57
ii. Unitemized.....	10,507.50	259,989.97
iii. Total.....(add i and ii) >	10,507.50	261,145.54
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add aiii,b and c) >	10,507.50	261,145.54
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 (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d,12,13,14,15,16,17,and 18) >	10,507.50	261,145.54
20. Total Federal Receipts.....[subtract line 18 from line 19] >	10,507.50	261,145.54
II. Disbursements		
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.....	3,713.31	117,504.53
c. Total Operating Expenditures.....(Add ai, aii, and b) >	3,713.31	117,504.53
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9,500.00	87,300.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(f)) (use Schedule F).....	0.00	0.00
26. Loan Repayments 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 Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a,b, and c) >	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements.....(Add 21c,22,23,24,25,26,27,28d, and 29) >	13,213.31	204,804.53
31. Total Federal Disbursements.....[Subtract line 21 d from line 30] >	13,213.31	204,804.53
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	10,507.50	261,145.54
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	10,507.50	261,145.54
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b) >	3,713.31	117,504.53
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....[subtract line 36 from 35] >	3,713.31	117,504.53

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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)
American Dietetic Association Political Action Committee

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
MEMBERSHIP MARKETING SERVICES 1280 Parimeter Parkway Virginia Beach, VA 23454	Fundraising Expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	08/05/98	3,713.31
B. 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 Disb. this Period
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)	Date (Month day, Year)	Amount of Each Disb. 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)	Date (Month day, Year)	Amount of Each Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	3,713.31
TOTAL this Period (Last page this line number only).....>	3,713.31

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
		FOR LINE NUMBER
		23

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NAME OF COMMITTEE (in Full)
American Dietetic Association Political Action Committee

<p>A. Full Name, Mailing Address and Zip Code SPRATT FOR CONGRESS COMMITTEE PO Box 2884 Washington, DC 20013</p>	<p>Purpose of Disbursement John M. Spratt, U.S. HOUSE 5th SC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 500.00</p>
<p>B. Full Name, Mailing Address and Zip Code VIC SNYDER FOR CONGRESS COMMITTEE PO Box 250998 Little Rock, AR 72225-0998</p>	<p>Purpose of Disbursement Vic Snyder, U.S. HOUSE 2nd AR Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 500.00</p>
<p>C. Full Name, Mailing Address and Zip Code CRANE FOR CONGRESS COMMITTEE 4451 Brookfield Corporate Drive, Suite 0 Chantilly, VA 20151-1652</p>	<p>Purpose of Disbursement Philip M. Crane, U.S. HOUSE 8th IL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>D. Full Name, Mailing Address and Zip Code BOB KERREY FOR US SENATE COMM. 3412 P ST., NW WASHINGTON, DC 20007</p>	<p>Purpose of Disbursement Bob Kerrey, U.S. SENATE NE Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 2000</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>E. Full Name, Mailing Address and Zip Code HALL FOR CONGRESS PO Box 711 Rockwall, TX 75087-0711</p>	<p>Purpose of Disbursement Ralph M. Hall, U.S. HOUSE 4th TX Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 500.00</p>
<p>F. Full Name, Mailing Address and Zip Code MISSOURIANS FOR K.F. BOND 507 Capitol Court, NE #100 Washington, DC 20002</p>	<p>Purpose of Disbursement Christopher S. Bond, U.S. SENATE MO Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>G. Full Name, Mailing Address and Zip Code CITIZENS COMMITTEE FOR ERNEST F. HOLLINGS PO Box 65271 Washington, DC 20035</p>	<p>Purpose of Disbursement Ernest F. Hollings, U.S. SENATE SC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 1,000.00</p>
<p>H. Full Name, Mailing Address and Zip Code JIM RAMSTAD VOLUNTEER COMMITTEE 8100 Penn Avenue South #104 Bloomington, MN 55431-1325</p>	<p>Purpose of Disbursement Jim Ramstad, U.S. HOUSE 3rd MN Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 500.00</p>
<p>I. Full Name, Mailing Address and Zip Code FRIENDS OF MELINDA KATZ 96-21 69th Avenue Forest Hills, NY 11375</p>	<p>Purpose of Disbursement Melinda Katz, U.S. HOUSE 9th NY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 08/05/98</p>	<p>Amount of Each Disb. this Period 500.00</p>

SUB TOTAL of Disbursements this page (Optional).....> **6,500.00**

TOTAL this Period (Last page this line number only).....>

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
American Dietetic Association Political Action Committee

A. Full Name, Mailing Address and Zip Code BERKLEY FOR CONGRESS COMMITTEE 7432 Silver Palm Court Las Vegas, NV 89117	Purpose of Disbursement Shedley Berley, U.S. HOUSE 1st NV Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 08/05/98	Amount of Each Disb. this Period 500.00
B. Full Name, Mailing Address and Zip Code DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE 430 South Capitol St., SE Washington, DC 20003	Purpose of Disbursement DSCC 1998 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 08/18/98	Amount of Each Disb. this Period 3,500.00
C. Full Name, Mailing Address and Zip Code DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE 430 South Capitol St., SE Washington, DC 20003	Purpose of Disbursement Voided Check Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 08/18/98	Amount of Each Disb. this Period -1,000.00
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)	Date (Month day, Year)	Amount of Each Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. 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 Disb. this Period

SUB TOTAL of Disbursements this page (Optional)..... > **3,000.00**

TOTAL this Period (Last page this line number only)..... > **9,500.00**

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 9-18-98
<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>SLG</i> PREPARER	9-21-98 DATE PREPARED