

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 20 2 50 PM '99

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Metropolx Welcome Fund		2. FEC IDENTIFICATION NUMBER C00345116
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1165 21st Street, N.W., Suite 300		
CITY, STATE and ZIP CODE Washington,, DC 20036		
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>06/01/99</u> through <u>06/30/99</u>		
6. (a) Cash on Hand January 1, 19 <u>99</u>		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 11,775.00	
(c) Total Receipts (from Line 19)	\$ 59,620.00	\$ 71,395.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 71,395.00	\$ 71,395.00
7. Total Disbursements (from Line 20)	\$ 71,396.15	\$ 71,396.15
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ -1.15	\$ -1.15
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 899 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 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

Barbara W. Bonfiglio

Signature of Treasurer

Barbara W. Bonfiglio

Date

7/14/99

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]

NAME OF COMMITTEE Metroplex Welcome Fund		REPORT COVERING PERIOD FROM 06/01/99 TO: 06/30/99		
		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)	43,500.00	63,250.00	11(a)(i)
ii.	Unitemized	1,620.00	1,645.00	11(a)(ii)
iii.	Total (add i and ii) >	45,120.00	64,895.00	11(a)(iii)
b.	Political Party Committees	0.00	0.00	11(b)
c.	Other Political Committees (such as PACs)	14,500.00	16,500.00	11(c)
d.	Total Contributions (add a iii, b and c) >	59,620.00	71,395.00	11(d)
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13.	All Loans Received	0.00	0.00	13
14.	Loan Repayments Received	0.00	0.00	14
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17.	Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18.	Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	59,620.00	71,395.00	19
20.	Total Federal Receipts (subtract line 18 from line 19) >	59,620.00	71,395.00	20
II. Disbursements				
21.	Operating Expenditures:			
a.	Shared Federal/Non-Federal Activity (from Schedule H4)			
i.	Federal Share	0.00	0.00	21(a)(i)
ii.	Non-Federal Share	0.00	0.00	21(a)(ii)
b.	Other Federal Operating Expenditures	953.16	953.15	21(b)
c.	Total Operating Expenditures (add a i, a ii, and b) >	953.16	953.15	21(c)
22.	Transfers to Affiliated/Other Party Committees	70,443.00	70,443.00	22
23.	Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00	23
24.	Independent Expenditures (use Schedule E)	0.00	0.00	24
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26.	Loan Repayments Made	0.00	0.00	26
27.	Loans Made	0.00	0.00	27
28.	Refunds of Contributions To:			
a.	Individual/Persons Other Than Political Committees	0.00	0.00	28(a)
b.	Political Party Committees	0.00	0.00	28(b)
c.	Other Political Committees (such as PACs)	0.00	0.00	28(c)
d.	Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29.	Other Disbursements	0.00	0.00	29
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	71,396.15	71,396.15	30
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	71,396.15	71,396.15	31
III. Net Contributions/Operating Expenditures				
32.	Total Contributions (other than loans)(from line 11d)	59,620.00	71,395.00	32
33.	Total Contribution Refunds (from line 28d)	0.00	0.00	33
34.	Net Contributions (other than loans)(subtract line 33 from line 32)	59,620.00	71,395.00	34
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	953.15	953.15	35
36.	Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37.	Net Operating Expenditures (subtract line 36 from line 35) >	953.15	953.15	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER 11 c

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)
Metropolplex Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kay Granger For Congress 910 Houston St. 105-C Fort Worth, TX 76102		06/02/99	711.20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 0.00	(Memo Entry)
Kay Granger For Congress 910 Houston St. 105-C Fort Worth, TX 76102		06/03/99	619.32
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 0.00	(Memo Entry)
Bass Bros. Ent., Inc. Political Action 201 Main St. Suite 2500 Fort Worth, TX 76102		06/04/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,500.00	
Justin Industries, Inc. Good Gov't Fund P.O. Box 425 Fort Worth, TX 76101		06/04/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 500.00	
Kay Granger For Congress 910 Houston St. 105-C Fort Worth, TX 76102		06/04/99	249.76
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 0.00	(Memo Entry)
Sunbelt Good Gov't Comm. of Box B Jacksonville, FL 32203		06/11/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
Southwest Airlines Freedom Fund P.O. box 36611 Dallas, TX 75235-1611		06/16/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	

SUBTOTAL of Receipts This Page (optional) **5,000.00**

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 2 OF 2

FOR LINE NUMBER 11 c

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NAME OF COMMITTEE (in Full)
Metropolx Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Greyhound Lines Political Action P.O. Box 660362 Dallas, TX 75266-0362		06/21/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BNSF RAILPAC P.O. Box 961039 Fort Worth, TX 76161-0039		06/21/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Airlines Political Action 1101 17th St., N.W. No. 600 Washington, DC 20036		06/22/99	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 2,500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
The Sabre Group, Inc. Political Action 4255 Amon Carter Blvd. MD 4204 Fort Worth, TX 76155		06/23/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bass Bros. Ent., Inc. Political Action 201 Main St. Suite 2500 Fort Worth, TX 76102		06/29/99	2,761.69
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 0.00	(Memo Entry)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
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) 9,600.00

TOTAL This Period (last page this line number only) 14,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 7
FOR LINE NUMBER 11 a i

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)
Metroplex Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rice Tilley Jr. 44 Valley Ridge Road Fort Worth, TX 76107	Law, Snakard & Gambrell, PC Occupation: Attorney	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Dee Kelly 2500 Chase Bank Tower 201 Main St. Fort Worth, TX 76102	Kelly, Hart & Hallman, P.C. Occupation: Attorney	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
James Francis Jr. 3904 Miramar Dallas, TX 75206	Francis Enterprises, Inc. Occupation: Investor	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Tony Evans 1737 Westridge Drive Hurst, TX 76064	CHC, Inc. Occupation: Consultant	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
James Leggett P.O. Box 9540 Fort Worth, TX 76147	Majestic Liquor Stores, Inc. Occupation: Chairman	06/04/99	5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 5,000.00		
William Hall 2308 Medford Court West Fort Worth, TX 76109	Self-Employed Occupation: Investor	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Charles Simmons 1120 Shady Oaks Lane Fort Worth, TX 76107	Retired Occupation:	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) 11,000.00

TOTAL This Period (last page line line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 2 OF 7
FOR LINE NUMBER 11 a

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NAME OF COMMITTEE (In Full)
Metroplex Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward Bass 201 Main Street Suite 2700 Fort Worth, TX 76102	Self-Employed Occupation Executive	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
R.W. Moncrief 9th at Commerce Fort Worth, TX 76102	Self-Employed Occupation Oil & Gas Production	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Kay Fortson 301 Commerce St. Suite 3301 Fort Worth, TX 76102	Information Requested Occupation	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Linda Mainers Rt. 3, Box 49 Justin, TX 76247	MICA Corporation Occupation Manager	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
John Snyder 2109 Canterbury Drive Fort Worth, TX 76107	Santa Fe Snyder Corporation Occupation Executive	06/04/99	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Jack McCaslin 6700 Post Oak Drive Alvarado, TX 76008	McCaellin & Company, P.C. Occupation GPA	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		
Gary Martin P.O. Box 91588 Arlington, TX 76015	Martin Sprocket & Gear, Inc. Occupation President	06/04/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional) **6,500.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (In Full)
Metropolix Welcome Fund

A. Full Name, Mailing Address and ZIP Code James Garvey P.O. Box 9600 Fort Worth, TX 76147	Name of Employer Information Requested Occupation	Date (month, day, year) 06/04/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Will Courtney P.O. Box 121488 Fort Worth, TX 76121	Name of Employer Courtney & Courtney Properties Occupation Property Mgr/Real Estate	Date (month, day, year) 06/04/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code J. Don Williamson 1300 S. University Dr. Suite 410 Fort Worth, TX 76107	Name of Employer JDW, Inc. Occupation President	Date (month, day, year) 06/04/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code L.C. Tubb Jr. P.O. Box 181639 Fort Worth, TX 76161	Name of Employer MICA Corporation Occupation CEO	Date (month, day, year) 06/04/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code John Marion 801 Cherry Street Suite 1500 Fort Worth, TX 76102	Name of Employer Retired Occupation	Date (month, day, year) 06/04/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Anne Marion 801 Cherry Street Suite 1500 Fort Worth, TX 76102	Name of Employer Self-Employed Occupation	Date (month, day, year) 06/04/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code John Bailey P.O. Box 9450 Fort Worth, TX 76147	Name of Employer Mount Olivet Cemetery Assoc. Occupation Cemetery Executive	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional) **6,500.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 4 OF 7

FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (in Full)
Metropolx Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Rosenthal 4420 Overton Crest Fort Worth, TX 76109-2521	Self-Employed	06/08/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investments	Aggregate Year-to-Date > \$ 250.00	
Farooq Selod M.D. 800 8th Ave., Suite 506 Fort Worth, TX 76104	Diplomate Amer. Brd. of Orthopedic Surgery	06/08/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$ 250.00	
Thomas Taylor 201 Main St. Suite 3300 Fort Worth, TX 76102	Taylor & Co.	06/09/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000.00	
Richard Smith 12810 Wyckland Drive Clifton, VA 22024	Textron	06/09/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Government Affairs	Aggregate Year-to-Date > \$ 250.00	
Marisa Stewart 3705 Tollgate Terrace Falls Church, VA 22041	Textron	08/09/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Government Affairs	Aggregate Year-to-Date > \$ 250.00	
Chase Mosley 312 D St., NE 1st Floor Washington, DC 20002	Textron	06/09/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Government Affairs	Aggregate Year-to-Date > \$ 250.00	
Robert Rowland 3727 Riverwood Road Alexandria, VA 22307	Textron	06/09/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Government Affairs	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional) 2,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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PAGE 5 OF 7
FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
Metropolplex Welcome Fund

A. Full Name, Mailing Address and ZIP Code E.R. Haggar 6113 Lemmon Ave. Dallas, TX 75209	Name of Employer Retired Occupation	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	
B. Full Name, Mailing Address and ZIP Code Jim Coleman 200 Crescent Ct. Suite 1500 Dallas, TX 75201	Name of Employer Carrington, Coleman, Stoman & Blumenthal Occupation Partner	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code Gunhild Corbett 22 Westover Road Fort Worth, TX 76107	Name of Employer S&B Technical Products, Inc. Occupation Manufacturing-Sales	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code Joseph Macchia 1409 Indian Creek Drive Fort Worth, TX 76107	Name of Employer Reliant American Group, Inc. Occupation Insurance Exec.	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code Walter Huzarevich Jr. 5825 Westcrest Drive E Fort Worth, TX 76134-1837	Name of Employer Merrill Lynch Occupation Financial Consultant	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code Ardon Moore 201 Main St. Suite 3200 Fort Worth, TX 76102	Name of Employer Bass Companies Occupation Investments	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code Larry Anton 1316 Shady Oaks Lane Fort Worth, TX 76107	Name of Employer Larry Anton & Assoc., Inc. Occupation President	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 500.00	

SUBTOTAL of Receipts This Page (optional)	6,800.00
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 7

FOR LINE NUMBER 11 a 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)
Matroplex Welcome Fund

A. Full Name, Mailing Address and ZIP Code Frances Chilee 1300 Shady Oaks Lane Fort Worth, TX 76107 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-to-Date > \$ 2,500.00	Date (month, day, year) 06/09/99	Amount of Each Receipt this Period 2,500.00
B. Full Name, Mailing Address and ZIP Code Jay Lesok 1905 Indian Creek Drive Fort Worth, TX 76107 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer CFS Occupation Investments Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/11/99	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code James Nichols 4821 Overton Woods Drive Fort Worth, TX 76109 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Freese & Nichols, Inc. Occupation Consulting Engineer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/11/99	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Bill Young 7505 Bolo Lane Flower Mound, TX 75022 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sedalco, Inc. Occupation Construction Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/14/99	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code J.R. Martin, Jr. P.O. Box 91588 Arlington, TX 76016-0088 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Martin Sprocket & Gear Occupation CEO & Chalman Aggregate Year-to-Date > \$ 1,000.00	Date (month, day, year) 06/16/99	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Robert Murrill 7838 Churchill Way Dallas, TX 75251 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Texas Instruments Inc. Occupation Attorney Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/16/99	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Clint Forrest 803 Hyde Park Blvd. Cleburne, TX 76031 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed Occupation Auto Dealer Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 06/21/99	Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) **6,000.00**

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 7 OF 7
FOR LINE NUMBER 11 a 1

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NAME OF COMMITTEE (in Full)
Metropolplex Welcome Fund

A. Full Name, Mailing Address and ZIP Code Parry Bass 201 Main St. Suite 3200 Fort Worth, TX 76102	Name of Employer Bass Bros. Enterprises, Inc. Occupation Investments	Date (month, day, year) 08/21/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,000.00			
B. Full Name, Mailing Address and ZIP Code Jesse Upchurch 500 Main St. Suite 800 Fort Worth, TX 76102	Name of Employer Allied Perchval Int'l Ltd. Occupation Executive	Date (month, day, year) 06/21/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,000.00			
C. Full Name, Mailing Address and ZIP Code Roy Basham 1600 Texas St., No. 904 Fort Worth, TX 76102	Name of Employer Information Requested Occupation	Date (month, day, year) 06/22/99	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 500.00			
D. Full Name, Mailing Address and ZIP Code James Lemons P.O. Box 8719 Fort Worth, TX 76124	Name of Employer Information Requested Occupation	Date (month, day, year) 06/22/99	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 250.00			
E. Full Name, Mailing Address and ZIP Code Gerald Haddock 777 Main St. Suite 2100 Fort Worth, TX 76102	Name of Employer Information Requested Occupation	Date (month, day, year) 06/22/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,000.00			
F. Full Name, Mailing Address and ZIP Code B. Kent Hill 1910 Campbell Trl. Richardson, TX 75082	Name of Employer Stone Investments, Inc. Occupation Vice President	Date (month, day, year) 08/23/99	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 250.00			
G. Full Name, Mailing Address and ZIP Code Jack Roger Williams P.O. Box 1382 Fort Worth, TX 76101	Name of Employer Information Requested Occupation	Date (month, day, year) 06/23/99	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date > \$ 1,000.00			
SUBTOTAL of Receipts This Page (optional)			5,000.00
TOTAL This Period (last page this line number only)			43,500.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11U

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NAME OF COMMITTEE (In Full)
Metropolix Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jackson & Walker L.L.P. 901 Main St., Suite 8000 Dallas, TX 75202		06/18/99	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1,000.00		
B. 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 > \$		
C. 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 > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input 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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input 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
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)			1,000.00
TOTAL This Period (last page this line number only)			1,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 22

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)
Metrolpix Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Keep Our Majority PAC 6344 Cavalier Corridor Falls Church, VA 22044	Transfer from Joint Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	06/28/99	35,221.50
Common Sense, Common Solutions PAC 1165 21st Street, N.W. Suite 300 Washington, DC 20036	Transfer from Joint Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	06/28/99	35,221.50
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 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)	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

SUBTOTAL of Disbursements This Page (optional)

70,443.00

TOTAL This Period (last page this line number only)

70,443.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 22

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)

Metroplex Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Transfer from Joint Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	Date (month, day, year)	Amount of Each Disbursement This Period
Keep Our Majority PAC 6344 Cavalier Corridor Falls Church, VA 22044	Transfer from Joint Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	06/28/99	35,221.50
B. Full Name, Mailing Address and ZIP Code Common Sense, Common Solutions PAC 1155 21st Street, N.W. Suite 300 Washington, DC 20038	Transfer from Joint Fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 1999	06/28/99	35,221.50
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 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)	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

SUBTOTAL of Disbursements This Page (optional)

70,443.00

TOTAL This Period (last page this line number only)

70,443.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21B

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)
Metropolix Welcome Fund

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Reliant Energy 1060 17th St., NW Suite 1260 Washington, DC 20038	Fundraising Expense - Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/18/99	952.00
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 Disbursement 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 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)	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

SUBTOTAL of Disbursements This Page (optional)	952.00
TOTAL This Period (last page this line number only)	952.00

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 <i>7-20-95</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>Jm LJ</i> PREPARER	<i>7-20-95</i> DATE PREPARED