

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 21 10 11 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Corporation for the Advancement of Psychiatry Political Action Committee		2. FEC IDENTIFICATION NUMBER C0011147736
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1400 K Street, NW, 3rd Floor		
CITY, STATE and ZIP CODE Washington, DC 20005		
3. <input 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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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	COLUMN B
5. Covering Period 7/1/97 through 12/31/97		This Period	Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 19 97		\$75,274.56
(b)	Cash on Hand at Beginning of Reporting Period	\$ 60,129.56	
(c)	Total Receipts (from Line 18)	\$ 39,081.00	\$45,991.00
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(e) and 6(c) for Column B)	\$ 99,210.56	\$ 121,265.56
7.	Total Disbursements (from Line 30)	\$ 18,495.83	\$ 40,550.83
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 80,714.73	\$ 80,714.73
9.	Debits and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 599 E Street, NW Washington, DC 20460 Toll Free 800-424-9630 Local 202-219-3420
10.	Debits and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

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

Jay B. Cutler, Assistant Treasurer

Signature of Treasurer

Jay B. Cutler

Date

1/21/98

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

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FEC FORM 3X

(revised 9/93)

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

(revised 1/1/81)

NAME OF COMMITTEE <u>Corporation for the Advancement of Psychiatry</u>	REPORT COVERING PERIOD FROM <u>7/1/97</u> TO <u>12/31/97</u>	
	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)	3,375.00	4,175.00
ii. Unitemized	35,706.00	41,816.00
iii. Total (add i and ii) >	39,081.00	45,991.00
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a ii, b and c) >	39,081.00	45,991.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	39,081.00	45,991.00
20. Total Federal Receipts (subtract line 18 from line 19) >		
II Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures		
c. Total Operating Expenditures (add a i, a ii, and b) >		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	18,495.83	40,550.83
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) >		
29. Other Disbursements		
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	18,495.83	40,550.83
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		
III Net Contributions/Operating Expenditure		
32. Total Contributions (other than loans)(from line 11d)	39,081.00	45,991.00
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	39,081.00	45,991.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >		
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 35 from 35) >		

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 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)

Corporation for the Advancement of Psychiatry PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Kriebel, Jr. 93 Bancroft Road Northampton, MA 01060-2108	Self-Employed	10/30/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist	Aggregate Year-to-Date > \$ 225	
Miodrag Ristich 201 E. 79th Street Apt. 7-J New York, NY 10021-0833	Self-Employed	10/9/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist	Aggregate Year-to-Date > \$ 225	
Roy Monsour RR 2 Box 360A Ligonier, PA 15658-9554	Self-Employed	9/29/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist	Aggregate Year-to-Date > \$ 225	
Phyllida Paterson PSC 41, Box 55 Apo, NY 09464	Self-Employed	9/16/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist	Aggregate Year-to-Date > \$ 225	
Charles Berlin 1226 Bellerock Street Pittsburgh, PA 15217-1231	Self-Employed	9/16/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist	Aggregate Year-to-Date > \$ 225	
Thomas Newlyn 21701 76th Ave. West, Suite 306 Edmonds, WA 98026-7536	Self-Employed	9/16/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist	Aggregate Year-to-Date > \$ 225	
David Robinson PO Box 210411 Auke Bay, AK 99821-0411	Self-Employed	9/15/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Psychiatrist	Aggregate Year-to-Date > \$ 225	

SUBTOTAL of Receipts This Page (optional)

\$1575

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 1 2

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NAME OF COMMITTEE (in Full)

Corporation for the Advancement of Psychiatry PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joseph Ruffin 400 NW 16th Street Oklahoma City, OK 73103-3423	Self-Employed Occupation: Psychiatrist	9/15/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225		
Lloyd Sederer 115 Mill Street Belmont, MA 02178-1041	McLean Hospital Occupation: Psychiatrist	9/15/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225		
Cynthia Harris 1113 Salamanca Street, NW Albuquerque, NM 87107-5626	Self-Employed Occupation: Psychiatrist	9/11/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225		
Andrew Cutler 77 W. Underwood Street, 3rd Floor Orlando, FL 32806	Self-Employed Occupation: Psychiatrist	7/24/97	\$200
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200		
Ahram Hostetter 20 Briarcrest Squire, Suite 205 Hershey, PA 17033-2359	Self-Employed Occupation: Psychiatrist	7/24/97	\$400
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400		
Robert Campbell 333 E. 57th Street, Suite 8-B New York, NY 1022-2950	Self-Employed Occupation: Psychiatrist	7/22/97	\$300
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300		
Cynthia Rose 1829 Alamo Avenue Colorado Springs, CO 80907	Self-Employed Occupation: Psychiatrist	7/23/97	\$225
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 225		

SUBTOTAL of Receipts This Page (optional) \$1800

TOTAL This Period (last page this line number only) \$3375

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 4
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) Corporation for the Advancement of Psychiatry PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends for Harry Reid 245 Second Street, NE Washington, DC 20002	NV Senate Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$1,000
Friends of Kent Conrad 110-B E. Broad Street Falls Church, VA 22046	ND Senate Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$1,000
Engel for Congress PO Box 60 Bronx, NY 10463	NY 17th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$500
Ted Strickland for Congress PO Box 580 Lucasville, OH 45648	OH 6th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$500
John Spratt for Congress PO Box 2884 Washington, DC 20013	SC 5th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$500
Gene Green Congressional Campaign PO Box 75214 Washington, DC 20013-5214	TX 29th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$500
Richard Neal for Congress PO Box 2884 Washington, DC 20013	MA 2nd Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$500
Capitol City Brewing Co. 2 Massachusetts Avenue, NE Washington, DC 20002	In-kind for Ellen Taucher Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/97	\$210.23
Maloney for Congress 230 Park Avenue, 34th Floor New York, NY 10169	NY 14th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/22/97	\$500

SUBTOTAL of Disbursements This Page (optional)

\$5,210.23

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 2 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full) Corporation for the Advancement of Psychiatry PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Tom Sawyer Committee PO Box 75214 Washington, DC 20013-5214	OH 14th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
B. Full Name, Mailing Address and ZIP Code Porter for Congress PO Box 7126 Deerfield, IL 60015	IL 10th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
C. Full Name, Mailing Address and ZIP Code People for Ganske Committee 4010 Franconia Road Alexandria, VA 22310-2136	IA 14th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
D. Full Name, Mailing Address and ZIP Code Friends of Jerry Kleczka 44 Canal Center Plaza, #400 Alexandria, VA 22314	WI 4th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$1000
E. Full Name, Mailing Address and ZIP Code Citizens for David Obey PO Box 75214 Washington, DC 20013-5214	WI 7th Race Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
F. Full Name, Mailing Address and ZIP Code Friends of Rosa DeLauro 5501 Cherokee Avenue, #112 Alexandria, VA 22312	CT 3rd Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
G. Full Name, Mailing Address and ZIP Code Louise Slaughter Re-Election Campaign PO Box 75214 Washington, DC 20013-5214	NY 28th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
H. Full Name, Mailing Address and ZIP Code Friends of Newt Gingrich PO Box 1399 Roswell, GA 30077	GA 6th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$1000
I. Full Name, Mailing Address and ZIP Code Bob Filner for Congress PO Box 127868 San Diego, CA 92112	CA 50th Race Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500

SUBTOTAL of Disbursements This Page (optional)

\$5,500

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 3 OF 4
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full) Corporation for the Advancement of Psychiatry PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nita Lowey for Congress PO Box 271 White Plains, NY 10605	NY 18th Race Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
B. Full Name, Mailing Address and ZIP Code Boyer for Congress 7905 Malcolm Road, #102 Clinton, MD 20735	MD 5th Race Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
C. Full Name, Mailing Address and ZIP Code Baldacci for Congress 5501 Cherokee Avenue, #112 Alexandria, VA 22312	ME 2nd Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
D. Full Name, Mailing Address and ZIP Code Vitaliano for Congress 1409 Richmond Avenue Staten Island, NY 10314	NY 13th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/3/97	\$500
E. Full Name, Mailing Address and ZIP Code Bob Kerrey for U.S. Senate Committee 3412 P Street, NW Washington, DC 20007	NR Senate Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/4/97	\$1,000
F. Full Name, Mailing Address and ZIP Code Friends of Jim McDermott PO Box 75214 Washington, DC 20013-5214	WA 7th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/4/97	\$500
G. Full Name, Mailing Address and ZIP Code Friends of Cliff Stearns PO Box 308 Silver Spring, MD 34489	FL 6th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/4/97	\$500
H. Full Name, Mailing Address and ZIP Code Phoenix Park Hotel 520 N. Capitol Street, NW Washington, DC 20001	In-kind for Bob Filner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/4/97	\$285.60
I. Full Name, Mailing Address and ZIP Code Ron Wyden for Senate PO Box 349B Portland, OR 97208	OR Senate Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/4/97	\$2,000

SUBTOTAL of Disbursements This Page (optional) \$6,285.60

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 4 OF 4

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full) Corporation for the Advancement of Psychiatry PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Bud Cramer 38 Ivy Street, SE Washington, DC 20003	AL 5th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/4/97	\$500
B. Full Name, Mailing Address and ZIP Code Matsui for Congress 55 Cherokee Avenue, #112 Alexandria, VA 22312	CA 5th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/97	\$500
C. Full Name, Mailing Address and ZIP Code Rivers for Congress PO Box 8293 Ann Arbor, MI 48107	MI 13th Race Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/15/97	\$500
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)

\$1,500

TOTAL This Period (last page this line number only)

\$18,495.83

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 1/21/98
<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	
J.A.C. PREPARER	1/21/98 DATE PREPARED