

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 20 10 26 AM '99

1. NAME OF COMMITTEE (in full) COMERICA INC. CMTE FOR RESPON. POL. ACT.	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported PAC SERVICES, MC2250 P.O. BOX 75000	2. FEC IDENTIFICATION NUMBER C00035501
CITY, STATE and ZIP CODE DETROIT, MI 48275-2250	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>01/01/99</u> through <u>06/30/99</u>		
6. (a) Cash on Hand January 1, 1999		\$ 27,846.14
(b) Cash on Hand at Beginning of Reporting Period	\$ 27,846.14	
(c) Total Receipts (from Line 19)	\$ 29,612.60	\$ 29,612.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 57,458.74	\$ 57,458.74
7. Total Disbursements (from Line 30)	\$ 23,850.00	\$ 23,850.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).	\$ 33,608.74	\$ 33,608.74
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 20468 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 MARTEA HERMANCZ, ASST. TREASURER	
Signature of Treasurer <i>Marta Hermancz</i>	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. 5437g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE COMERICA INC. CMTE FOR RESPON. POL. ACT.	REPORT COVERING PERIOD FROM 01/01/99 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)	7,998.28	7,998.28
ii. Unitemized	21,614.32	21,614.32
iii. Total	29,612.60	29,612.60
..... (add i and ii) ▶		
b. Political Party Committees	0.00	0.00
c. Other Political Committees (such as PACs)	0.00	0.00
d. Total Contributions	29,612.60	29,612.60
..... (add a iii, b and c) ▶		
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 & 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	29,612.60	29,612.60
..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶		
20. Total Federal Receipts	29,612.60	29,612.60
..... (subtract line 18 from line 19) ▶		
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	0.00	0.00
c. Total Operating Expenditures	0.00	0.00
..... (add a i, a ii, and b) ▶		
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	18,800.00	18,800.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a(d))(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	0.00	0.00
..... (add a, b and c) ▶		
29. Other Disbursements	5,050.00	5,050.00
30. Total Disbursements	23,850.00	23,850.00
..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ▶		
31. Total Federal Disbursements	23,850.00	23,850.00
..... (subtract line 21 a ii from line 30) ▶		
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	29,612.60	29,612.60
33. Total Contribution Refunds (from line 28d)	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32)	29,612.60	29,612.60
35. Total Federal Operating Expenditures	0.00	0.00
..... (add 21 a i and 21 b) ▶		
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00
37. Net Operating Expenditures	0.00	0.00
..... (subtract line 36 from 35) ▶		

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 13
FOR LINE NUMBER 11A1

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)
COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THEODORE BENNETT 40 ROCKWELL CIRCLE MARLBORO, NJ 07746-1157	COMERICA BANK	01/05/99	250.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation HR DIRECTOR	Aggregate Year-to-Date > \$ 250.00	
MARGARET BRADSHAW 55 ROSEWOOD DRIVE ATHERTON, CA 94027	COMERICA INC	01/08/99 01/27/99 02/08/99	10.92 10.92 10.92
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SBA MGR NAT'L	Aggregate Year-to-Date > \$ 499.20	
MARGARET BRADSHAW 55 ROSEWOOD DRIVE ATHERTON, CA 94027	COMERICA INC	02/22/99 03/05/99 03/19/99	10.92 10.92 10.92
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SBA MGR NAT'L	Aggregate Year-to-Date > \$ 499.20	
MARGARET BRADSHAW 55 ROSEWOOD DRIVE ATHERTON, CA 94027	COMERICA INC	04/02/99 04/19/99 05/03/99	10.92 10.92 10.92
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SBA MGR NAT'L	Aggregate Year-to-Date > \$ 499.20	
MARGARET BRADSHAW 55 ROSEWOOD DRIVE ATHERTON, CA 94027	COMERICA INC	05/14/99 05/24/99	10.92 390.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SBA MGR NAT'L	Aggregate Year-to-Date > \$ 499.20	
LEONARD CARLETON 3570 ROLAND DRIVE BLOOMFIELD VILLAGE, MI 48301	COMERICA INC	01/08/99 01/27/99 02/08/99	20.00 20.00 20.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MGR-CORP ALIGNMENT	Aggregate Year-to-Date > \$ 260.00	
LEONARD CARLETON 3570 ROLAND DRIVE BLOOMFIELD VILLAGE, MI 48301	COMERICA INC	02/22/99 03/05/99 03/19/99	20.00 20.00 20.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MGR-CORP ALIGNMENT	Aggregate Year-to-Date > \$ 260.00	
SUBTOTAL of Receipts This Page (optional)			869.20

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LEONARD CARLETON 3570 ROLAND DRIVE BLOOMFIELD VILLAGE, MI 48301	COMERICA INC	04/02/99	20.00
		04/19/99	20.00
		05/03/99	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: MGR-CORP ALIGNMENT Aggregate Year-to-Date > \$ 260.00	
LEONARD CARLETON 3570 ROLAND DRIVE BLOOMFIELD VILLAGE, MI 48301	COMERICA INC	05/14/99	20.00
		05/28/99	20.00
		06/11/99	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: MGR-CORP ALIGNMENT Aggregate Year-to-Date > \$ 260.00	
LEONARD CARLETON 3570 ROLAND DRIVE BLOOMFIELD VILLAGE, MI 48301	COMERICA INC	06/25/99	20.00
		Occupation: MGR-CORP ALIGNMENT Aggregate Year-to-Date > \$ 260.00	
		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	
BARBARA DEBENEDETTO 6021 CROSSFIELD CT. SAN JOSE, CA 95120	COMERICA INC	05/14/99	250.00
		Occupation: REGIONAL GEN COUNSEL Aggregate Year-to-Date > \$ 250.00	
		Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	
PATRICIA FANCY 28336 HERNDON WOOD FARMINGTN HLS, MI 48018	COMERICA INC	01/08/99	15.75
		01/27/99	15.75
		02/08/99	15.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: ASST GEN COUNSEL Aggregate Year-to-Date > \$ 204.75	
PATRICIA FANCY 28336 HERNDON WOOD FARMINGTN HLS, MI 48018	COMERICA INC	02/22/99	15.75
		03/05/99	15.75
		03/19/99	15.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: ASST GEN COUNSEL Aggregate Year-to-Date > \$ 204.75	
PATRICIA FANCY 28336 HERNDON WOOD FARMINGTN HLS, MI 48018	COMERICA INC	04/02/99	15.75
		04/19/99	15.75
		05/03/99	15.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: ASST GEN COUNSEL Aggregate Year-to-Date > \$ 204.75	
SUBTOTAL of Receipts This Page (optional)			531.75

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. AGT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PATRICIA FANCY 28336 HERNDON WOOD FARMINGTON HILLS, MI 48018	COMERICA INC	05/14/99	15.75
	Occupation ASST GEN COUNSEL	05/28/99 06/11/99	15.75 15.75
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 204.75		
B. Full Name, Mailing Address and ZIP Code PATRICIA FANCY 28336 HERNDON WOOD FARMINGTON HILLS, MI 48018	COMERICA INC	06/25/99	15.75
	Occupation ASST GEN COUNSEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 204.75		
C. Full Name, Mailing Address and ZIP Code PAT FAUBION 3212 BRYN MAWR DALLAS, TX 75225	COMERICA INC.	06/11/99	550.00
	Occupation MGR, CORP BANKING METROPLEX		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 550.00		
D. Full Name, Mailing Address and ZIP Code DOUGLAS FIEDLER 308 TOURAINE RD GROSSE PTE FARMS, MI 48236	COMERICA INC	01/08/99	20.00
	Occupation SVP	01/27/99 02/08/99	20.00 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 260.00		
E. Full Name, Mailing Address and ZIP Code DOUGLAS FIEDLER 308 TOURAINE RD GROSSE PTE FARMS, MI 48236	COMERICA INC	02/22/99	20.00
	Occupation SVP	03/05/99 03/19/99	20.00 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 260.00		
F. Full Name, Mailing Address and ZIP Code DOUGLAS FIEDLER 308 TOURAINE RD GROSSE PTE FARMS, MI 48236	COMERICA INC	04/02/99	20.00
	Occupation SVP	04/19/99 05/03/99	20.00 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 260.00		
G. Full Name, Mailing Address and ZIP Code DOUGLAS FIEDLER 308 TOURAINE RD GROSSE PTE FARMS, MI 48236	COMERICA INC	05/14/99	20.00
	Occupation SVP	05/28/99 06/11/99	20.00 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 260.00		
SUBTOTAL of Receipts This Page (optional)			853.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER **11A1**

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DOUGLAS FIEDLER 308 TOURAINE RD GROSSE PTE FARMS, MI 48236	COMERICA INC	06/25/99	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation SVP	Aggregate Year-to-Date > \$ 260.00	
J MICHAEL FULTON 1069 EASTWOOD COURT LOS ALTOS, CA 94024	COMERICA INC	01/08/99 01/27/99 02/08/99	38.00 38.00 38.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation PRESIDENT & CEO	Aggregate Year-to-Date > \$ 456.94	
J MICHAEL FULTON 1069 EASTWOOD COURT LOS ALTOS, CA 94024	COMERICA INC	02/22/99 03/05/99 03/19/99	38.00 38.00 38.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation PRESIDENT & CEO	Aggregate Year-to-Date > \$ 456.94	
J MICHAEL FULTON 1069 EASTWOOD COURT LOS ALTOS, CA 94024	COMERICA INC	04/02/99 04/19/99 05/03/99	38.00 38.00 38.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation PRESIDENT & CEO	Aggregate Year-to-Date > \$ 456.94	
J MICHAEL FULTON 1069 EASTWOOD COURT LOS ALTOS, CA 94024	COMERICA INC	05/14/99 06/11/99 06/25/99	38.00 38.47 38.47
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation PRESIDENT & CEO	Aggregate Year-to-Date > \$ 456.94	
JAMES GARAVAGLIA 5160 PHEASANT TRAIL ANN ARBOR, MI 48105	COMERICA INC	01/08/99 01/27/99 02/08/99	17.50 17.50 17.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GOVT/COMM AFFAIRS HD	Aggregate Year-to-Date > \$ 227.50	
JAMES GARAVAGLIA 5160 PHEASANT TRAIL ANN ARBOR, MI 48105	COMERICA INC	02/22/99 03/05/99 03/19/99	17.50 17.50 17.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GOVT/COMM AFFAIRS HD	Aggregate Year-to-Date > \$ 227.50	
SUBTOTAL of Receipts This Page (optional)			581.94

SCHEDULE A

ITEMIZED RECEIPTS

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JAMES GARAVAGLIA 5160 PHEASANT TRAIL ANN ARBOR, MI 48105	COMERICA INC	04/02/99	17.50
		04/19/99	17.50
		05/03/99	17.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GOVT/COMM AFFAIRS HD	Aggregate Year-to-Date > \$	227.50
JAMES GARAVAGLIA 5160 PHEASANT TRAIL ANN ARBOR, MI 48105	COMERICA INC	05/14/99	17.50
		05/28/99	17.50
		06/11/99	17.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GOVT/COMM AFFAIRS HD	Aggregate Year-to-Date > \$	227.50
JAMES GARAVAGLIA 5160 PHEASANT TRAIL ANN ARBOR, MI 48105	COMERICA INC	06/25/99	17.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GOVT/COMM AFFAIRS HD	Aggregate Year-to-Date > \$	227.50
KENNETH GILSON 641 NE 19 AVE DEERFIELD BEACH, FL 33441	COMERICA INC	01/08/99	17.00
		01/27/99	17.00
		02/08/99	17.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR INVST ANALYST	Aggregate Year-to-Date > \$	221.00
KENNETH GILSON 641 NE 19 AVE DEERFIELD BEACH, FL 33441	COMERICA INC	02/22/99	17.00
		03/05/99	17.00
		03/19/99	17.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR INVST ANALYST	Aggregate Year-to-Date > \$	221.00
KENNETH GILSON 641 NE 19 AVE DEERFIELD BEACH, FL 33441	COMERICA INC	04/02/99	17.00
		04/19/99	17.00
		05/03/99	17.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR INVST ANALYST	Aggregate Year-to-Date > \$	221.00
KENNETH GILSON 641 NE 19 AVE DEERFIELD BEACH, FL 33441	COMERICA INC	05/14/99	17.00
		05/28/99	17.00
		06/11/99	17.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR INVST ANALYST	Aggregate Year-to-Date > \$	221.00
SUBTOTAL of Receipts This Page (optional)			326.50

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
KENNETH GILSON 641 NE 19 AVE DEERFIELD BEACH, FL 33441	COMERICA INC	06/25/99	17.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR INVT ANALYST	Aggregate Year-to-Date > \$ 221.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
FRANK GUARASCIO 21520 RAINBOW DR. CUPERTINA, CA 95014	COMERICA INC.	05/21/99	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MGR PRIVATE BANKING	Aggregate Year-to-Date > \$ 250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS R. JOHNSON 2462 HUNTERS FOND BLOOMFIELD HILLS, MI 48304	COMERICA INC.	01/05/99	313.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CREDIT POLICY DIR	Aggregate Year-to-Date > \$ 313.50	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
WALTER T. KACZNAREK 106 SUNHAYEN RD. DANVILLE, CA 94506	COMERICA INC.	04/28/99	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CA REG PRESIDENT	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT KEMP JR 759 WINDEMERE COURT BLOOMFIELD HILLS, MI 48304	COMERICA INC	01/08/99 01/27/99 02/08/99	26.92 26.92 26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR MANAGING DIR	Aggregate Year-to-Date > \$ 349.96	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT KEMP JR 759 WINDEMERE COURT BLOOMFIELD HILLS, MI 48304	COMERICA INC	02/22/99 03/05/99 03/19/99	26.92 26.92 26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR MANAGING DIR	Aggregate Year-to-Date > \$ 349.96	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT KEMP JR 759 WINDEMERE COURT BLOOMFIELD HILLS, MI 48304	COMERICA INC	04/02/99 04/19/99 05/03/99	26.92 26.92 26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation IB SR MANAGING DIR	Aggregate Year-to-Date > \$ 349.96	
SUBTOTAL of Receipts This Page (optional)			1,122.78

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ROBERT KEMP JR 759 WINDEMERE COURT BLOOMFIELD HILLS, MI 48304	COMERICA INC	05/16/99	26.92
		05/28/99	26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		06/11/99	26.92
		Aggregate Year-to-Date > \$	349.96
ROBERT KEMP JR 759 WINDEMERE COURT BLOOMFIELD HILLS, MI 48304	COMERICA INC	06/25/99	26.92
		Occupation: 18 SR MANAGING DIR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	349.96
JOHN KILLIAN 3509 MOUNT PLEASANT LN PLANO, TX 75025	COMERICA INC	01/08/99	21.81
		01/27/99	21.81
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		02/08/99	21.81
		Aggregate Year-to-Date > \$	218.10
JOHN KILLIAN 3509 MOUNT PLEASANT LN PLANO, TX 75025	COMERICA INC	02/22/99	21.81
		03/05/99	21.81
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		03/19/99	21.81
		Aggregate Year-to-Date > \$	218.10
JOHN KILLIAN 3509 MOUNT PLEASANT LN PLANO, TX 75025	COMERICA INC	04/02/99	21.81
		04/19/99	21.81
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		05/03/99	21.81
		Aggregate Year-to-Date > \$	218.10
JOHN KILLIAN 3509 MOUNT PLEASANT LN PLANO, TX 75025	COMERICA INC	05/14/99	21.81
		Occupation: DIV MGR SPECIALIZED INDUSTRY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Aggregate Year-to-Date > \$	218.10
DONALD LINDOW 20 FAIR ACRES DRIVE GROSSE POINTE FARMS, MI 48236	COMERICA INC	01/08/99	24.90
		01/27/99	24.90
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		02/08/99	24.90
		Aggregate Year-to-Date > \$	323.70
SUBTOTAL of receipts This Page (optional)			400.48

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DONALD LINDOW 20 FAIR ACRES DRIVE GROSSE POINTE FARMS, MI 48236	COMERICA INC	02/22/99 03/05/99 03/19/99	24.90 24.90 24.90
	Occupation SR ANALYST-MGR		
	Aggregate Year-to-Date > \$ 323.70		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
DONALD LINDOW 20 FAIR ACRES DRIVE GROSSE POINTE FARMS, MI 48236	COMERICA INC	04/02/99 04/19/99 05/03/99	24.90 24.90 24.90
	Occupation SR ANALYST-MGR		
	Aggregate Year-to-Date > \$ 323.70		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
DONALD LINDOW 20 FAIR ACRES DRIVE GROSSE POINTE FARMS, MI 48236	COMERICA INC	05/14/99 05/28/99 06/11/99	24.90 24.90 24.90
	Occupation SR ANALYST-MGR		
	Aggregate Year-to-Date > \$ 323.70		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
DONALD LINDOW 20 FAIR ACRES DRIVE GROSSE POINTE FARMS, MI 48236	COMERICA INC	06/25/99	24.90
	Occupation SR ANALYST-MGR		
	Aggregate Year-to-Date > \$ 323.70		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
RONALD MARKS 3660 FINCH TROY, MI 48064	COMERICA INC	01/08/99 01/27/99 02/08/99	20.00 20.00 20.00
	Occupation TREASURER P		
	Aggregate Year-to-Date > \$ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
RONALD MARKS 3660 FINCH TROY, MI 48064	COMERICA INC	02/22/99 03/05/99 03/19/99	20.00 20.00 20.00
	Occupation TREASURER P		
	Aggregate Year-to-Date > \$ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			
RONALD MARKS 3660 FINCH TROY, MI 48064	COMERICA INC	04/02/99 04/19/99 05/03/99	20.00 20.00 20.00
	Occupation TREASURER P		
	Aggregate Year-to-Date > \$ 260.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC			

SUBTOTAL of Receipts This Page (optional) 429.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD MARKS 3660 FINCH TROY, MI 48064	COMERICA INC	05/14/99	20.00
	Occupation TREASURER P	05/28/99 06/11/99	20.00 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 260.00		
B. Full Name, Mailing Address and ZIP Code RONALD MARKS 3660 FINCH TROY, MI 48064	COMERICA INC	06/25/99	20.00
	Occupation TREASURER P		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 260.00		
C. Full Name, Mailing Address and ZIP Code SHARON McMURRAY 2427 BEECHWOOD DR ROYAL OAK, MI 48073	COMERICA INC	01/08/99	16.50
	Occupation CORP COMMUNICATIONS HEAD	01/27/99 02/08/99	16.50 16.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 214.50		
D. Full Name, Mailing Address and ZIP Code SHARON McMURRAY 2427 BEECHWOOD DR ROYAL OAK, MI 48073	COMERICA INC	02/22/99	16.50
	Occupation CORP COMMUNICATIONS HEAD	03/05/99 03/19/99	16.50 16.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 214.50		
E. Full Name, Mailing Address and ZIP Code SHARON McMURRAY 2427 BEECHWOOD DR ROYAL OAK, MI 48073	COMERICA INC	04/02/99	16.50
	Occupation CORP COMMUNICATIONS HEAD	04/19/99 05/03/99	16.50 16.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 214.50		
F. Full Name, Mailing Address and ZIP Code SHARON McMURRAY 2427 BEECHWOOD DR ROYAL OAK, MI 48073	COMERICA INC	05/14/99	16.50
	Occupation CORP COMMUNICATIONS HEAD	05/28/99 06/11/99	16.50 16.50
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 214.50		
G. Full Name, Mailing Address and ZIP Code SHARON McMURRAY 2427 BEECHWOOD DR ROYAL OAK, MI 48073	COMERICA INC	06/25/99	16.50
	Occupation CORP COMMUNICATIONS HEAD		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 214.50		
SUBTOTAL of Receipts This Page (optional)			294.50

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TIMOTHY O'BRIEN 2134 GRANDHILL LN. KATY, TX 77494	COMERICA INC	05/10/99	400.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GRP MGR COMM BKG	Aggregate Year-to-Date > \$	400.00
MICHAEL R. ONG 1544 CLAY DR. LOS ALTOS, CA 94024	COMERICA INC.	05/05/99	350.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CENTRAL LOAN ADMIN, DIV EXEC	Aggregate Year-to-Date > \$	350.00
CAROL A. PALESTRO 4555 CROWN BLVD. SAN JOSE, CA 95120	COMERICA INC.	05/06/99	270.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CREDIT ADMIN DFCR	Aggregate Year-to-Date > \$	270.00
STEVEN RUST 6577 CRABAPPLE DRIVE TROY, MI 48098	COMERICA INC	01/08/99 01/27/99 02/08/99	18.00 18.00 18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MGMT ACCT MGR	Aggregate Year-to-Date > \$	234.00
STEVEN RUST 6577 CRABAPPLE DRIVE TROY, MI 48098	COMERICA INC	02/22/99 03/05/99 03/19/99	18.00 18.00 18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MGMT ACCT MGR	Aggregate Year-to-Date > \$	234.00
STEVEN RUST 6577 CRABAPPLE DRIVE TROY, MI 48098	COMERICA INC	04/02/99 04/19/99 05/03/99	18.00 18.00 18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MGMT ACCT MGR	Aggregate Year-to-Date > \$	234.00
STEVEN RUST 6577 CRABAPPLE DRIVE TROY, MI 48098	COMERICA INC	05/14/99 05/28/99 06/11/99	18.00 18.00 18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation MGMT ACCT MGR	Aggregate Year-to-Date > \$	234.00
SUBTOTAL of Receipts this Page (optional)			1,236.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
STEVEN RUST 6577 CRABAPPLE DRIVE TROY, MI 48098	COMERICA INC	06/25/99	18.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation: MGMT ACCT MGR	Aggregate Year-to-Date > \$ 234.00	
ANDREW SHINKO JR 8454 GRAYS DRIVE GROSSE ILE, MI 48138	COMERICA INC	01/08/99 01/27/99 02/08/99	16.09 16.09 16.09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation: CORP TAX MGR	Aggregate Year-to-Date > \$ 209.17	
ANDREW SHINKO JR 8454 GRAYS DRIVE GROSSE ILE, MI 48138	COMERICA INC	02/22/99 03/05/99 03/19/99	16.09 16.09 16.09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation: CORP TAX MGR	Aggregate Year-to-Date > \$ 209.17	
ANDREW SHINKO JR 8454 GRAYS DRIVE GROSSE ILE, MI 48138	COMERICA INC	04/02/99 04/19/99 05/03/99	16.09 16.09 16.09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation: CORP TAX MGR	Aggregate Year-to-Date > \$ 209.17	
ANDREW SHINKO JR 8454 GRAYS DRIVE GROSSE ILE, MI 48138	COMERICA INC	05/14/99 05/28/99 06/11/99	16.09 16.09 16.09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation: CORP TAX MGR	Aggregate Year-to-Date > \$ 209.17	
ANDREW SHINKO JR 8454 GRAYS DRIVE GROSSE ILE, MI 48138	COMERICA INC	06/25/99	16.09
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation: CORP TAX MGR	Aggregate Year-to-Date > \$ 209.17	
DAVID STEARNS 5 CARRIAGE CT NENLO PARK, CA 94025	COMERICA INC	01/08/99 01/27/99 02/08/99	20.00 20.00 20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation: GRP MGR-HIGH TECH	Aggregate Year-to-Date > \$ 220.00	
SUBTOTAL of Receipts This Page (optional)			287.17

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID STEARNS 5 CARRIAGE CT MENLO PARK, CA 94025	COMERICA INC	02/22/99	20.00
		03/05/99	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: GRP MGR-HIGH TECH Aggregate Year-to-Date > \$ 220.00	
DAVID STEARNS 5 CARRIAGE CT MENLO PARK, CA 94025	COMERICA INC	04/02/99	20.00
		04/19/99	20.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: GRP MGR-HIGH TECH Aggregate Year-to-Date > \$ 220.00	
DAVID STEARNS 5 CARRIAGE CT MENLO PARK, CA 94025	COMERICA INC	05/14/99	20.00
		06/11/99	10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: GRP MGR-HIGH TECH Aggregate Year-to-Date > \$ 220.00	
DAVID WHITE 31081 VIA CONSUELO COTO DE CAZA, CA 92679	COMERICA INC	01/08/99	25.00
		01/27/99	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: S. CAL REGIONAL PRES Aggregate Year-to-Date > \$ 306.00	
DAVID WHITE 31081 VIA CONSUELO COTO DE CAZA, CA 92679	COMERICA INC	02/22/99	25.00
		03/05/99	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: S. CAL REGIONAL PRES Aggregate Year-to-Date > \$ 306.00	
DAVID WHITE 31081 VIA CONSUELO COTO DE CAZA, CA 92679	COMERICA INC	04/02/99	25.00
		04/19/99	25.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: S. CAL REGIONAL PRES Aggregate Year-to-Date > \$ 306.00	
DAVID WHITE 31081 VIA CONSUELO COTO DE CAZA, CA 92679	COMERICA INC	05/14/99	25.00
		06/11/99	28.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: S. CAL REGIONAL PRES Aggregate Year-to-Date > \$ 306.00	
SUBTOTAL of Receipts This Page (optional)			466.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
THOMAS WILSON 51 SUNNINGDALE GROSSE PTE SHORES, MI 48236	COMERICA INC	01/08/99	26.92
	Occupation IB SR MANAGING DIR	01/27/99 02/08/99	26.92 26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$	349.96	
THOMAS WILSON 51 SUNNINGDALE GROSSE PTE SHORES, MI 48236	COMERICA INC	02/22/99	26.92
	Occupation IB SR MANAGING DIR	03/05/99 03/19/99	26.92 26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$	349.96	
THOMAS WILSON 51 SUNNINGDALE GROSSE PTE SHORES, MI 48236	COMERICA INC	04/02/99	26.92
	Occupation IB SR MANAGING DIR	04/19/99 05/03/99	26.92 26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$	349.96	
THOMAS WILSON 51 SUNNINGDALE GROSSE PTE SHORES, MI 48236	COMERICA INC	05/14/99	26.92
	Occupation IB SR MANAGING DIR	05/28/99 06/11/99	26.92 26.92
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$	349.96	
THOMAS WILSON 51 SUNNINGDALE GROSSE PTE SHORES, MI 48236	COMERICA INC	06/25/99	26.92
	Occupation IB SR MANAGING DIR		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$	349.96	
SCOTT M. WINEHAN 2444 VILLA NUEVA WAY MOUNTAIN VIEW, CA 94040	COMERICA BANK	05/05/99	250.00
	Occupation ACAD III		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$	250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	Aggregate Year-to-Date > \$		
SUBTOTAL of receipts This Page (optional)			599.96
TOTAL This Period (last page this line number only)			7,998.28

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
ABA BANK PAC 1120 CONNECTICUT AVE., NW WASHINGTON, DC 20036	FEDERAL POLITICAL ACTION CMTE DC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	05/20/99	5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
GEORGE W BUSH PRESIDENTIAL EXP COMMITTEE 11611 SAN VICENTE 9TH FLOOR LOS ANGELES, CA 90049	GEORGE W. BUSH PRESIDENT DC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/30/99	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
GEORGE W BUSH PRESIDENTIAL EXP COMMITTEE 11611 SAN VICENTE 9TH FLOOR LOS ANGELES, CA 90049	GEORGE W. BUSH PRESIDENT DC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	04/16/99	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
GEORGE W BUSH PRESIDENTIAL EXP COMMITTEE 11611 SAN VICENTE 9TH FLOOR LOS ANGELES, CA 90049	GEORGE W. BUSH PRESIDENT DC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	06/29/99	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
MAJORITY 2000 FEDERAL ACCOUNT 430 SOUTH CAPITOL WASHINGTON, DC 20003	NATIONAL POLITICAL PARTY DC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	06/14/99	1,500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		

SUBTOTAL of Disbursements This Page (optional) 9,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 4

FOR LINE NUMBER 23

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)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
ABRAHAM SENATE 2000 P.O. BOX 8649 ROYAL OAK, MI 48068	SPENCE ABRAHAM U S SENATE MI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	02/23/99	3,000.00
DAVE CAMP FOR CONGRESS 300 FIRST STREET, SE WASHINGTON, DC 20515	DAVE CAMP U S CONGRESS MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	02/23/99	1,000.00
JOHN D. DINGELL FOR CONGRESS COMMITTEE 13912 MICHIGAN AVE. DEARBORN, MI 48126	JOHN DINGELL U S CONGRESS MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	04/29/99	300.00
KILPATRICK FOR CONGRESS 3000 E. GRAND BLVD. DETROIT, MI 48202	CAROLYN KILPATRICK U S CONGRESS MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/25/99	500.00
KILPATRICK FOR CONGRESS 3000 E. GRAND BLVD. DETROIT, MI 48202	CAROLYN KILPATRICK U S CONGRESS MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	06/29/99	2,000.00
KNOLLENBERG FOR CONGRESS 4010 FRANCONIA ALEXANDRIA, VA 22310	JOE KNOLLENBERG U S CONGRESS MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	02/01/99	1,000.00
KNOLLENBERG FOR CONGRESS 4010 FRANCONIA ALEXANDRIA, VA 22310	JOE KNOLLENBERG U S CONGRESS MI Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/25/99	500.00
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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 8,300.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 4

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FRIST 2000, INC. 8150 NORTH CENTRAL EXP. SUITE 1900 DALLAS, TX 75206	BILL FRIST U S SENATE TH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	04/16/99	500.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 4

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
MARTIN FROST CAMPAIGN COMMITTEE P.O. BOX 75214 WASHINGTON, DC 20013	MARTIN FROST U S CONGRESS TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	06/29/99	500.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements this Page (optional)	500.00
TOTAL This Period (last page this line number only)	18,800.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 3

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
CBSA PAC 1121 L. STREET SUITE 1050 SACRAMENTO, CA 95814	STATE POLITICAL ACTION CMTE CA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	05/11/99	2,500.00
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:	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:	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:	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:	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:	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:	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:	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:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) 2,500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 3

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
SUSAN WHELCHER CAMPAIGN 2830 BAYAN BOCA RATON, FL 33431	SUSAN WHELCHER CITY COUNCIL FL Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	02/23/99	300.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		
SUBTOTAL of Disbursements This Page (optional)			300.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 3

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

COMERICA INC. CMTE FOR RESPON. POL. ACT.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
BARBARA MALLODY CARAWAY CAMPAIGN P.O. BOX 764171 DALLAS, TX 75375	BARBARA CARAWAY CITY COUNCIL TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/05/99	1,000.00
RON KIRK RE-ELECTION CAMPAIGN 2700 ROS AVE DALLAS, TX 75201	RON KIRK MAYOR TX Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	02/01/99	1,000.00
MAXINE REESE CAMPAIGN P.O. BOX 270196 DALLAS, TX 75227	MAXINE REESE CITY COUNCIL TX Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	04/16/99	250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			2,250.00
TOTAL This Period (last page this line number only)			5,050.00

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 7-20-99
<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>Jed</i> PREPARER	7-20-99 DATE PREPARED