

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JAN 12 1 01 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (see 5(a))		C00022988		120597	P 268
BENJAMIN C BOLUSKY					
NURSERY INDUSTRY POLITICAL					
ACTION COMMITTEE					
1250 I STREET NW/SUITE 500					
WASHINGTON		DC 20005			
2. FEC IDENTIFICATION NUMBER C00022988					
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

- 12-Day Pre-Election Report for the _____
(Type of Election)
- election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>July 1, 1997</u> through <u>December 31, 1997</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 24,939
(b) Cash on Hand at Beginning of Reporting Period	\$ 21,733	
(c) Total Receipts (from Line 19)	\$ 20,223	\$ 34,664
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 41,956	\$ 59,603
7. Total Disbursements (from Line 20)	\$ 11,415	\$ 29,062
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 30,541	\$ 30,541
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20483 Tel Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

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

BENJAMIN C. BOLUSKY

Signature of Treasurer

Benjamin C. Bolusky

Date

1-8-98

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 8/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE

AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

REPORT COVERING PERIOD

FROM **JULY 1, 1997** TO **DECEMBER 31, 1997**

	COLUMN A Total This Period	COLUMN B Calendar Year	
Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	15,800	23,900	11a
ii. Unitemized	4,155	10,290	11b
iii. Total (add i and ii) >	19,955	34,190	11c
b. Political Party Committees			11d
c. Other Political Committees (such as PACs)			11e
d. Total Contributions (add a ii, b and c) >	19,955	34,190	11f
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	268	474	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	20,223	34,664	19
20. Total Federal Receipts (subtract line 18 from line 19) >	20,223	34,664	20
Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21a
ii. Non-Federal Share			21b
b. Other Federal Operating Expenditures	0	147	21c
c. Total Operating Expenditures (add a i, a ii, and b) >	0	147	21d
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,750	27,250	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28a
b. Political Party Committees			28b
c. Other Political Committees (such as PACs)			28c
d. Total Contribution Refunds (add a, b and c) >	1,665	1,665	28d
29. Other Disbursements	11,415	29,062	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	11,415	29,062	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	11,415	29,062	31
Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	19,955	34,190	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)	19,955	34,190	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	147	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	0	147	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 9
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis McCloskey Box 399 Folsom, LA. 70437	Windmill Nurseries	7-7-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robin Rinaca 25118 Bowman's Folly Rd. Accomac, VA. 23401	Eastern Shore Nursery of Virginia	7-8-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bruce Usey 21007 SE Wallace Dayton, OR. 97114	Manoia Nursery	7-14-97	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ivan Oliniky 30 Sleepy Hollow Dr. Tabernash, NJ 08088	Princeton Nurseries	7-24-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Ahl N1101 US Highway 12 Merrillan, WI. 54754	Northern Christmas Tree Growers	7-24-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Darin 22536 Ford Rd. Dearborn Heights, MI. 48127	English Gardens	7-28-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Hollings, Jr. 90 Ashley Avenue Charleston, SC. 29401	Carolina Nurseries	7-28-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		

SUBTOTAL of Receipts This Page (optional)

\$ 2,500.00

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 9
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

AAN. NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Hermes 9845 Ash Dr. Overland Park, KS - 66207	Hermes Nursery	7-28-97	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lee Bachman 6010 Lyndale So. Minneapolis, MN - 55419	Bachman's	8-1-97	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Platt Hill 1335 Persimmon Dr. St. Charles, IL - 60174	Platt Hill Nursery	8-1-97	\$ 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 1,000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Harold Hart PO Box 14 Birdsboro, PA - 19508	The Buddies Nursery	8-5-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Boething 23475 Long Valley Rd Woodland Hills, CA.	Boething Tree Land Nursery	8-5-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lynn Strohsahl 7231 Irvine Rd Irvine, CA - 92618	Bordiar's Nursery	8-5-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carole Pittelman 1385 York Ave. New York, NY - 10021	Woodbourne Cultural Nursery	8-8-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		

SUBTOTAL of Receipts This Page (optional) \$ 2,400.00

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 3 OF 9
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

AAN - NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Mike Glenn Box 5014 Athens, GA. 30604	Select Trees	8-8-97	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$300		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
David Johnson 816 Palm Blvd. Blk of Palm, SC. 29451	Carolina Nurseries	8-12-97	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Neil Van Sloun Box 116 Westport, MA. 02791	Sylvan Nursery	8-12-97	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Charles Tosovsky Weber Dr. Edwardsville, IL. 62025	Home Nursery	8-14-97	\$500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Kirk Quillen PO Box 46 Lyndhurst, VA. 22952	Waynesboro Nurseries	8-14-97	\$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$200		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Peter Costich PO Box 631 Center Moriches, NY 11934	Horticultural Materials Systems	8-14-97	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$250		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt (this Period)
Fred Hicks 30 Concord St Westbury, NY 11590	Hicks Nurseries	8-19-97	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$250		

SUBTOTAL of Receipts This Page (optional)

\$2,250.00

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 4 OF 9
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gene Bunting Dupont Highway Selbyville, DE. 19975	Peninsula Nurseries	8-20-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
J. Gwy PO Box 368 Goose Creek, SC. 29445	Carolina Nurseries	8-25-97	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Bradberry 7960 Cognan Rd. San Antonio, TX. 78252	Lone Star Growers	9-16-97	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 500		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Calvin Frelk N1101 Highway 12 Merrillan, WI. 54754	Northern Christmas Tree Graders	9-24-97	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 500		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sam Jones 1971 Whipponwill Rd. Bishop, GA. 30621	Piccadilly Farm	11-4-97	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 750		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William Farmer, III 323 Mapleton Rd. Princeton, NJ. 08540	Princeton Nurseries	11-5-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 300		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Cornum 3918 Glenarm Rd. Crestwood, KY. 40014	National Nursery Products	11-5-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 350		

SUBTOTAL of Receipts This Page (optional)

\$ 2,450.00

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 5 OF 9
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gail Ruckel 6900 Eagle Mills Rd. Waite Hill, OH. 44094 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Warner Nurseries Occupation: <u>Nurseryman</u> Aggregate Year-to-Date > \$ 1,000	11-5-97	\$ 500.00
Wilbur Mull 330 Skyline Pkwy. Athens, GA. 30606 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Classic Groundcovers Occupation: <u>Nurseryman</u> Aggregate Year-to-Date > \$ 500	11-6-97	\$ 50.00
Neil Van Sloun Box 116 Westport, MA. 02791 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Sylvan Nursery Occupation: <u>Nurseryman</u> Aggregate Year-to-Date > \$ 600	11-6-97	\$ 100.00
John Bracken PO Box 739 Meridian, Tx 76665 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Nicholson-Hardie Occupation: <u>Nurseryman</u> Aggregate Year-to-Date > \$ 200	11-6-97	\$ 100.00
Robert Terry 9650 SW Hardebeck Rd. Gaston, OR 97119 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Fisher Farms Occupation: <u>Nurseryman</u> Aggregate Year-to-Date > \$ 700	11-6-97	\$ 500.00
Russell Ireland PO Box 10 East Norwich, NY 11732 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Martin Viette Nurseries Occupation: <u>Nurseryman</u> Aggregate Year-to-Date > \$ 450	11-6-97	\$ 250.00
Peter Orum Box 384 St. Charles, IL. 60174 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Midwest Groundcovers Occupation: <u>Nurseryman</u> Aggregate Year-to-Date > \$ 1,250	11-6-97	\$ 500.00
SUBTOTAL of Receipts This Page (optional)			\$ 2,000.00
TOTAL This Period (last page this line number only)			\$ 2,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in full)
AAN- NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wayne Sawyer 3529 Bridgerd. Suffolk, VA. 23435	Dennett's Creek Nursery	11-7-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carl Meyer Rt. 1, Box 504 St. George, KS. 66535	Horticultural Services	11-7-97	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lowell Hall 31783 S. Meridian Rd. Hubbard, OR. 97032	Hall Nursery	11-7-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 300		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lee Mitchell 2986 Branch Dr. Salt Lake City, UT 84117	Mitchell's Nursery & Gifts	11-7-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Rick Frederick 11310 Loftus Lane Union, KY 41091	The Landscape Supply	11-7-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ken Natorp 5798 Irwin Simpson Rd. Mason, OH 45040	Natorp's	11-7-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward Losely 3410 Shepard Rd. Perry, OH. 44081	Herman Losely & Sons.	11-11-97	\$ 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 500		

SUBTOTAL of Receipts This Page (optional) **\$ 1,350.00**

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 9
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

AAN-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Palmer Bigelow 455 W. Main St. Northboro, MA. 01532	Bigelow Nurseries	11-11-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fount May, Jr. Rt. 2, Box 189-C Quincy, FL. 32351	May Nursery	11-11-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hannah Hogan 878 W. Bridge St. Morrisville, PA. 19067	Ship's Farm & Nursery	11-11-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 350		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Glenn Box 5014 Athens, GA. 30604	Select Trees	11-11-97	\$ 300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 600		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Jacks Montgomery 218 W. Deer Creek Rd O'Fallon, IL. 62269	Goldsmith Seeds	11-14-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 250		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dale Siems 5 Sunset Pl. Charleston, IA. 50616	Sherman Nursery	11-14-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 300		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond Johnson 10315 Kensington Pkwy Kensington, Md. 20895	Johnson's Flower & Garden Center	11-18-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		

SUBTOTAL of Receipts This Page (optional)

\$ 1,200.00

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 **8** OF **9**
FOR LINE NUMBER **11a**

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)

AAN - NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robin Rinaca 25118 Baulman's Folly Dr. Accomac, VA. 23401	Eastern Shore Nursery of Virginia	11-19-97	\$ 150.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 400		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Boething 23475 Long Valley Rd. Woodland Hills, CA. 91367	Boething Redland Nursery	11-25-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 500		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ray Oglesby 3630 SW 52nd Ave. Hollywood, FL. 33023	Oglesby Nursery	11-25-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larry Edwards 12037 Mooreville Rd. Davidson, NC. 28036	TurtleCreek Nurseries	11-25-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 450		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George Hackney 1020 Dogwood Dr. Quincy, FL. 32351	Hackney Nursery	12-1-97	\$ 200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 450		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred Shadow 145 Tennessee Valley Dr. Winchester, TN. 37398	Tennessee Valley Nursery	12-4-97	\$ 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 750		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Siebenthaler 3001 Catalpa Dr. Dayton, OH. 45405	Siebenthaler Co.	12-4-97	\$ 100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Nurseryman Aggregate Year-to-Date > \$ 200		

SUBTOTAL of Receipts This Page (optional)

\$ 1,300.00

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 9 OF 9
FOR LINE NUMBER 1141

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NAME OF COMMITTEE (In Full)

AAAI-NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Doug Torn 2902 Turner Groves Rd Greensboro, NC. 27455 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Buds & Blooms Nursery Occupation: Nurseryman Aggregate Year-to-Date > \$ 200	12-18-97	\$ 100.00
Joseph Kinney 5580-A Danks Lane Theodore, AL. 36582 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Kinney Nursery Occupation: Nurseryman Aggregate Year-to-Date > \$ 500	12-30-97	\$ 250.00
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$ 350.00

TOTAL This Period (last page this line number only)

\$ 15,800.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

AAW- NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Smith for Congress Committee 4010 Franconia Road Alexandria, VA 22310	Rep. Bob Smith (OR-2) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/97	\$ 1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Mark Foley P.O. Box 30505 Palm Beach Gardens, FL 33420	Rep. Mark Foley (FL-16) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/97	\$ 500.00
C. Full Name, Mailing Address and ZIP Code Peter Deutsch for Congress P.O. Box 917689 Hollywood, FL 33091	Rep. Peter Deutsch (FL-20) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/97	\$ 500.00
D. Full Name, Mailing Address and ZIP Code Nussle for Congress Committee 4010 Franconia Road Alexandria, VA 22310	Rep. Jim Nussle (IA-2) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/97	\$ 500.00
E. Full Name, Mailing Address and ZIP Code Ewing for Congress P.O. Box 766 Pontiac, IL 61764	Rep. Thomas Ewing (IL-15) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/97	\$ 750.00
F. Full Name, Mailing Address and ZIP Code John T. Doolittle for Congress 4220 Rocklin Road, Suite 5-A Rocklin, CA 95677	Rep. John Doolittle (CA-4) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/97	\$ 500.00
G. Full Name, Mailing Address and ZIP Code Walsh for Congress Committee 4451 Brookfield Corporate Parkway Chantilly, VA 20151	Rep. James Walsh (NY-25) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/97	\$ 500.00
H. Full Name, Mailing Address and ZIP Code Friends of Joe Pitts P.O. Box 16021 Alexandria, VA 22302	Rep. Joe Pitts (PA-16) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/97	\$ 500.00
I. Full Name, Mailing Address and ZIP Code LoBianco for Congress P.O. Box 550 Vineland, NJ 08360	Rep. Frank LoBianco (NJ-2) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	\$ 500.00

SUBTOTAL of Disbursements This Page (optional)

\$ 5,250.00

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 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

AAAL - NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Anne Northup for Congress P.O. Box 7313 Louisville, KY 40257	Anne Northup (KY-3) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	\$500.00
Team Emerson PO Box 16021 Alexandria, VA. 22302	Rep. Jo Ann Emerson (MO-8) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/97	\$500.00
Richard Pombo for Congress PO Box 16021 Alexandria, VA. 22302	Rep. Richard Pombo (CA-11) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/97	\$500.00
Friends of Bud Cramer 38 Ivy St, SE. Washington, DC 20003	Rep. Bud Cramer (AL-5) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/97	\$500.00
Friends of Doc Hastings 2405 37th St, NW Washington, DC 20007	Rep. Doc Hastings (WA-4) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/97	\$500.00
Wes Watkins for Congress Box WW Stillwater, OK 74076	Rep. Wes Watkins (OK-3) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	\$500.00
Hooley for Congress 38 Ivy St, S.E. Washington, D.C. 20003	Rep. Dartenc Hooley (OR-5) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	\$500.00
Weygand Committee P.O. Box 28405 Providence, RI 02908	Rep. Robert Weygand (RI-2) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/10/97	\$500.00
Elect Kawanana Koa P.O. Box 1319 Honolulu, HI 96807	Questis Kawanana Koa (HI-1) Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/18/97	\$500.00

SUBTOTAL of Disbursements This Page (optional)

\$ 4,500.00

TOTAL This Period (last page this line number only)

\$ 9,750.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
AAAN - NURSERY INDUSTRY POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Capitol Advantage P.O. Box 1223 McLean, VA. 22101	Congressional directories Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/97	\$ 1,665.00
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)	
TOTAL This Period (last page this line number only)	\$ 1,665.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 1-8-98
<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>SES</i> PREPARER	1-12-98 DATE PREPARED