

FEDERAL ELECTION COMMISSION
REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
 To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

RECEIVED
 FEDERAL ELECTION COMMISSION
 REPORTS ANALYSIS DIVISION
 OCT 21 4 33 PM '98

1. Name of individual, organization or corporation: **League of Conservation Voters**
 Address (number and street): check if different than previously reported
1707 L Street N.W. #750
 City, State and ZIP Code: **Washington, DC 20036**

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No
 Individual filers only: NAME OF EMPLOYER OCCUPATION 3. Identification number

4. TYPE OF REPORT (check appropriate boxes):
 (a) April 15 Quarterly Report 12-Day Report preceding the election.
 July 15 Quarterly Report 30-Day Report following the General Election.
 October 15 Quarterly Report
 January 31 Year-End Report
 July 31 Mid-Year Report
 (b) Is this Report an amendment? Yes No

Type of Election	Date of Election	State

5. COVERING PERIOD: FROM **10/1/98** THROUGH **12/30/98** PAGE **1** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
Pegasus properties 3101 Covenant Drive Bloomington, IN 47401	Rent	10/1/98	500.00		X	J. Hostetter IN-08
Brooklane Apartments 4475 West Dean Rd. Suite 118 Brown Deer, WI 53223	Rent	10/1/98	568.50	X		M. Newman WI-5

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____
 9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM _____
 SIGNATURE (multi-page filers: sign page 1 only) *[Signature]* DATE _____

Subscribed and sworn to before me this 20th day of October, 1998, at Washington, DC
 DARLENE F. ISOM
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003
[Signature]
 My Commission Expires _____ (Notary Public)

INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
 To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

RECEIVED
 FEDERAL ELECTION
 COMMISSION
 REPORTS ANALYSIS
 DIVISION

Oct 20 4 33 PM '98

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. #750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.
 July 15 Quarterly Report 30-Day Report following the General Election.
 October 15 Quarterly Report
 January 31 Year-End Report
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election	Date of Election	State

5. COVERING PERIOD: FROM **10/1/98** THROUGH **10/20/98** PAGE **3** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
James Somerfeldt 1330 Edmore Street Green Bay, WI 54303	Consultant	10/14/98	1390 ⁰⁰		X	M. Newman WI-5
Patrick Mitchell 310 G E. Convent Road Bloomington, IN 47401	Consultant	10/16/98	2000 ⁰⁰		X	J. Hastetter IN-08
	Hotel (Travel)	10/16/98	168.40		X	
	Supplies (Food)	10/16/98	234.15		X	

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

Subscribed and sworn to before me this 20th day of October, 1998.

DARLENE F. ISOM
 FEDERAL PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003

My Commission Expires _____

(Notary Public)

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

Art C. Steer

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

For further information, contact:
 Federal Election Commission
 999 E Street, N.W.
 Washington, D.C. 20463
 Toll Free 800-424-9530 Local 202-219-3420

Any information reported herein may not be copied for sale or distribution by any person for the purposes of soliciting contributions or for any other commercial purpose except that the name and address of any political committee may be used to solicit contributions from that committee.

FEC FORM 5 (4/96)

INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
 To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. Name of individual, organization or corporation: **League of Conservation Voters**

Address (number and street) check if different than previously reported: **1707 L Street, N.W. # 750**

City, State and ZIP Code: **Washington, DC 20036**

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

RECEIVED
 FEDERAL ELECTION COMMISSION
 DC, DISTRICT #
 CIVIL RIGHTS
 ANALYSIS
 DIVISION
 OCT 23 4 31 PM '98

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.
 July 15 Quarterly Report 30-Day Report following the General Election.
 October 15 Quarterly Report
 January 31 Year-End Report
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election: _____ Date of Election: _____ State: _____

5. COVERING PERIOD: FROM **10/1/98** THROUGH **10/30/98** PAGE **4** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
Michael Medberry 1202 West Franklin Street Boise, ID 83702	Consultant	10/10/98	1350 ⁰⁰	X		H. Chenoweth ID-01
Beth Johnson 4170 East Highway 1317 Number 21 Granbury, TX 76049	Consultant	10/16/98	2200 ⁰⁰	X		C. Stenholm TX-17

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

Subscribed and sworn to before me this 20th day of October, 1998

DARLENE F. ISOM
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003

My Commission Expires _____

(Notary Public)

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

[Signature] _____

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

For further information, contact:
 Federal Election Commission
 999 E Street, N.W.
 Washington, D.C. 20463
 Toll Free 800-424-9520 Local 202-219-3420

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FEC FORM 5 (4/96)

FEDERAL ELECTION CAMPAIGN EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

RECEIVED
 ACTION
 SIGN
 REPORT
 10/20/03

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. #750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

31 PM '03

OCT 20

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report 30-Day Report following the General Election.
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election: _____ Date of Election: _____ State: _____

Date of Election: _____ State: _____

5. COVERING PERIOD: FROM 10/1/98 THROUGH 10/01/98 PAGE 5 OF 12

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Deposit	
Green & Associates 418 Convent Road Santa Fe, NM 87501	Consultant Supplies/ misc.	10/16/98	1900 ⁰⁰		X	B. Redmond NM-03
		10/16/98	492.10		X	B. Redmond NM-03
Courtesy, Cuff 4525 West Dean Road Apt #202 Brown Deer, WI 53223	Consultant Parking/ supplies	10/16/98	1700 ⁰⁰		X	M. Newman WI-5
		10/16/98	1896 ⁰⁰		X	

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

Allen C. Soer

Subscribed and sworn to before me this 20th day
 of October, 1998
 DARLENE F. ISOM
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003

[Signature] Notary Public

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

For further information, contact:
 Federal Election Commission
 505 E Street, N.W.
 Washington, D.C. 20463
 Toll Free 800-424-9530 Local 202-219-3420

Any information reported herein may not be copied for other use by any person for the purposes of soliciting contributions or for any other commercial purpose except that the name and address of any political committee may be used to solicit contributions from that committee.

FEC FORM 5 (4/96)

FEDERAL ELECTION COMMISSION
INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
 To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

1. Name of individual, organization or corporation: **League of Conservation Voters** FED. ELEC. COM. FORM 5 (4/96)

Address (number and street) check if different than previously reported: **1707 L Street, N.W. #750**

City, State and ZIP Code: **Washington, DC 20036** Oct 20

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER: _____ OCCUPATION: _____

3. Identification number: _____

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.

July 15 Quarterly Report 30-Day Report following the General Election.

October 15 Quarterly Report

January 31 Year-End Report

July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM **12/1/98** THROUGH **12/31/98** PAGE **6** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payer	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
M. Avila 12211 Menlo Avenue Los Angeles, CA 90044	Consultant	10/16/98	3080 ⁰⁰		X	B. Downer CA-46
Karen Deal 2021 Third Ave Seattle, WA 98121	Consultant	10/16/98	500 ⁰⁰		X	L. Smith WA-5

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM: _____

SIGNATURE (multi-page filers: sign page 1 only) DATE: _____

Abbe C. Gee

Subscribed and sworn to before me this **20th** day of **October**, 1998.

CARLENE F. ISOM
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003

[Signature] (Notary Public)

INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

NOTICE
 FEDERAL ELECTION
 COMMISSION
 REPORTS ANALYSIS
 DIVISION

OCT 20 4 32 PM '98

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. #750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.
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 October 15 Quarterly Report
 January 31 Year-End Report 30-Day Report following the General Election.
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election	Date of Election	State

5. COVERING PERIOD: FROM **10/1/98** THROUGH **10/30/98** PAGE **7** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
GSI Voter Contact Inc 1570 Prospect Hermosa Beach, CA 90254	consultant	10/16/98	3490 ⁰⁰		X	H. Chenoweth ID-01
Wilson Grand 407 N. Washington St Old Town Alexandria Va. 22314	consultant	10/16/98	1508 ⁰⁰		X	B. Cramer AL-05
			1508 ⁰⁰		X	C. Stenholm TX-11

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

Subscribed and sworn to before me this 20th day of October, 1998.

DARLENE F. ISOM
 NOTARY PUBLIC, DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

My Commission Expires _____

SIGNATURE (multi-page filers: sign page 1 only) DATE

Althea C. Sherman

Althea C. Sherman

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 Federal Election Commission
 990 E Street, N.W.
 Washington, D.C. 20463
 Toll Free 800-424-9530 Local 202-219-3420

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FEC FORM 5 (4/96)

FEDERAL ELECTION COMMISSION
REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

FEDERAL ELECTION COMMISSION
 REPORT OF INDEPENDENT EXPENDITURES MADE

Oct 20 4 32 PM '98

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. #750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.
 July 15 Quarterly Report 30-Day Report following the General Election.
 October 15 Quarterly Report
 January 31 Year-End Report
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election	Date of Election	State

5. COVERING PERIOD: FROM 10/1/98 THROUGH 12/30/98 PAGE 8 OF 12

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
Labels & lists 2500 116th Ave, N.E. Bellevue, WA 98004	Vote lists & labels	10/16/98	1051.01		X	L. Smith WA-5
Planet Vox 926 N. St. Rec'd Washington DC 20001	Video Dubbing	10/16/98	93.75	X		B. Dorman CA-46

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

Subscribed and sworn to before me this 20th day of October, 1998.

Darlene F. Isom
 Notary Public District of Columbia
 My Commission Expires September 14, 2003

Adrian C. [Signature]
 (Notary Public)

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

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 Federal Election Commission
 699 E Street, N.W.
 Washington, D.C. 20463
 Toll Free 800-424-9530 Local 202-219-3420

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FEC FORM 5 (4/96)

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. #750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

FEDERAL ELECTION COMMISSION
 REPORTS
 OCT 20 4 32 PM '98

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.
 July 15 Quarterly Report 30-Day Report following the General Election.
 October 15 Quarterly Report
 January 31 Year-End Report
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election	Date of Election	State

5. COVERING PERIOD: FROM **10/1/98** THROUGH **10/30/98** PAGE **9** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
Jason Rosin 1716 Winnebago Street Madison, WI 53704	Consultant	10/16/98	1500 ⁰⁰		X	M. Newman WI-5
John Wallin P.O. Box 953 Verdi, NV 89439	Consultant	10/16/98	298.89		X	J. Ensign NV-5

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

Robert C. [Signature]

Subscribed and sworn to before me this 20th day of October, 1998

DARLENE F. ISOM
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003

[Signature] (Notary Public)

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
 To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

70-10000-0000
 REPORTS
 20 4 30 PM '98

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. # 750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

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(a) April 15 Quarterly Report 12-Day Report preceding the election.
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 October 15 Quarterly Report
 January 31 Year-End Report
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election	Date of Election	State

5. COVERING PERIOD: FROM **10/1/98** THROUGH **10/30/98** PAGE **10** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
Delta Group 1749 North 2nd Abilene, TX 79603	News clips	10/16/98	48.71		X	G. Steinhilber TX-17

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) 4

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) 5

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

Subscribed and sworn to before me this **20th** day
 of **October**, 1998, by **DARLENE F. ISOM**
 CLERK, DISTRICT OF COLUMBIA
 My Commission Expires **September 14, 2003**

[Signature] (Notary Public)

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

[Signature]

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

For further information, contact
 Federal Election Commission
 959 E Street, N.W.
 Washington, D.C. 20463
 Toll Free 800-424-9530 Local 202-219-3420

Any information reported herein may not be copied for sale or use by any person for the purposes of soliciting contributions or for any other commercial purpose except that the name and address of any political committee may be used to solicit contributions from that committee.

FEC FORM 5 (4/96)

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

FEDERAL ELECTION COMMISSION
 REPORTS AND STATEMENTS
 DIVISION
 OCT 20 4 33 PM '98

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. #750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report 12-Day Report preceding the election.
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year-End Report 30-Day Report following the General Election.
 July 31 Mid-Year Report

(b) Is this Report an amendment? Yes No

Type of Election	Date of Election	State

5. COVERING PERIOD: FROM 10/1/98 THROUGH 10/20/98 PAGE 11 OF 12

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support?	Oppose	
<u>Jeremy Sheffer 730 Oakmont Ave. Apt. 910 Las Vegas, NV 89109</u>	<u>Consulting</u>	<u>10/18/98</u>	<u>461.60</u>		<u>X</u>	<u>J. Chisler NV-5</u>

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or replication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

Subscribed and sworn to before me this 20th day
October, 1998
 DARLENE F. ISOM
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003
 My Commission Expires _____
 _____ (Notary Public)

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

[Signature]

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 999 E Street, N.W.
 Washington, D.C. 20463
 Toll Free 800-424-9530 Local 202-215-3420

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FEC FORM 5 (4/96)

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED
 To Be Used by Persons (Other than Political Committees) Including Qualified Nonprofit Corporations

FEDERAL ELECTION COMMISSION
 REPORTS ANALYSIS DIVISION

OCT 20 4 32 PM '98

1. Name of individual, organization or corporation
League of Conservation Voters

Address (number and street) check if different than previously reported
1707 L Street, N.W. #750

City, State and ZIP Code
Washington, DC 20036

2. Corporate filers only: Is the filer a qualified nonprofit corporation? Yes No

Individual filers only: NAME OF EMPLOYER OCCUPATION

3. Identification number

4. TYPE OF REPORT (check appropriate boxes):

(a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report July 31 Mid-Year Report

12-Day Report preceding the election. Type of Election: _____ Date of Election: _____ State: _____

30-Day Report following the General Election. Date of Election: _____ State: _____

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM **10/1/98** THROUGH **12/31/98** PAGE **12** OF **12**

6. CONTRIBUTION(S) RECEIVED (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Contributor	Name of Employer	Occupation	Date (Month, Day, Year)	Amount

7. INDEPENDENT EXPENDITURE(S) MADE (Submit multiple forms if additional space is required)

Full Name, Mailing Address and ZIP Code of Payee	Purpose of Expenditure	Date (Month, Day, Year)	Amount	Check One		Name and Office Sought (District, State) of Federal Candidate
				Support	Oppose	
Axelrod, Arsenauer 730 N Franklin St Chicago, IL 60610	Audio Production	10/16/98	150		X	B. Redmond NH-03
			150		X	M. Newman WA-05
			150		X	B. Dornan CA-46
			150		X	J. Heston IL-02
			150		X	H. Chenoweth ID-01
			150		X	L. Smith WA-5
			150		X	J. Osign NV-5

8. TOTAL CONTRIBUTIONS (multi-page filers: enter total on page 1) \$ _____

9. TOTAL INDEPENDENT EXPENDITURES (multi-page filers: enter total on page 1) \$ _____

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee, nor did they involve the financing, dissemination, distribution or republication of any campaign materials prepared by a candidate or a candidate's agent or authorized committee. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

Subscribed and sworn to before me this 20th day of October, 1998
DARLENE F. ISOM
 NOTARY PUBLIC DISTRICT OF COLUMBIA
 My Commission Expires September 14, 2003

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE (multi-page filers: sign page 1 only) DATE

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 Washington, D.C. 20463
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FEC FORM 5 (4/96)

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10/20/98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>RAS</i> PREPARER	<i>10/21/98</i> DATE PREPARED