



Political Participation Program  
501 Second Avenue South  
Minneapolis, MN 55402

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

APR 15 11 41 AM '98

April 8, 1998

Federal Elections Commission  
999 E Street, NW  
Washington, D.C. 20463

RE: FED I.D. #C00018036

Enclosed is our April 15 quarterly FEC Form 3x for the U.S. Bancorp Political Participation Program covering the period of January 1, 1998 through March 31, 1998.

Please note we have terminated our two affiliated PACs, U.S. Bancorp PAC-Northwest, FEC I.D. # C00108955, and U.S. Bancorp PAC-Oregon, FEC I.D. # C00225946. Also enclosed please find the amended FEC Form 1 reflecting the termination of the two affiliated PACs.

Please contact me at (612) 973-2097 if you have any questions.

Sincerely,

Peggy A. Gunn  
Treasurer

Enclosures: Amended FEC Form 1  
Quarterly FEC Form 3x

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

APR 15 11 41 AM '98

1. NAME OF COMMITTEE (in full)  
**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

ADDRESS (number and street)  Check if different than previously reported  
**601 SECOND AVENUE SOUTH**

CITY, STATE and ZIP CODE  
**MINNEAPOLIS, MN 55402**

2. FEC IDENTIFICATION NUMBER  
**C00018036**

3.  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>01/01/98</u> through <u>03/31/98</u>		
6. (a) Cash on Hand January 1, 1998		\$ 97,805.88
(b) Cash on Hand at Beginning of Reporting Period	\$ 97,805.88	
(c) Total Receipts (from Line 19)	\$ 89,659.92	\$ 89,659.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 187,465.80	\$ 187,465.80
7. Total Disbursements (from Line 30)	\$ 9,450.00	\$ 9,450.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 178,015.80	\$ 178,015.80
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800 424-8630  
Local 202-218 3420

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  
**PEGGY A. GUNN**

Signature of Treasurer *Peggy A. Gunn* Date **4-7-98**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

FEC FORM 3X

(revised 9/91)

F3486204

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE <b>U.S. BANCORP POLITICAL PARTICIP. PROGRAM</b>	REPORT COVERING PERIOD FROM 01/01/98 TO 03/31/98	
<b>I. Receipts</b>	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A) .....	7,090.00	7,090.00
ii. Unitemized .....	12,451.84	12,451.84
iii. Total ..... (add i and ii) ▶	19,541.84	19,541.84
b. Political Party Committees .....	0.00	0.00
c. Other Political Committees (such as PACs) .....	0.00	0.00
d. Total Contributions ..... (add a iii, b and c) ▶	19,541.84	19,541.84
12. Transfers From Affiliated/Other Party Committees .....	70,118.08	70,118.08
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 ..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) ▶	89,659.92	89,659.92
20. Total Federal Receipts ..... (subtract line 18 from line 19) ▶	89,659.92	89,659.92
<b>II. Disbursements</b>		
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 ..... (add a i, a ii, and b) ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees .....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	7,450.00	7,450.00
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 ..... (add a, b and c) ▶	0.00	0.00
29. Other Disbursements .....	2,000.00	2,000.00
30. Total Disbursements ..... (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ▶	9,450.00	9,450.00
31. Total Federal Disbursements ..... (subtract line 21 a ii from line 30) ▶	9,450.00	9,450.00
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d) .....	19,541.84	19,541.84
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from 32) .....	19,541.84	19,541.84
35. Total Federal Operating Expenditures ..... (add 21 a i and 21 b) ▶	0.00	0.00
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00
37. Net Operating Expenditures ..... (subtract line 36 from 35) ▶	0.00	0.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 4  
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)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PATRICIA T BAUER 4352 HEATHCOTE RD DEERHAVEN, MN 55391	U. S. BANK NATIONAL ASSOC	02/02/98	35.00
		03/26/98	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: RET DEP PROD EXEC Aggregate Year-to-Date > \$ 210.00	
B. Full Name, Mailing Address and ZIP Code	U. S. BANK NATIONAL ASSOC	03/26/98	35.00
		03/26/98	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: RET DEP PROD EXEC Aggregate Year-to-Date > \$ 210.00	
C. Full Name, Mailing Address and ZIP Code	U.S. BANCORP	02/02/98	50.00
		03/26/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: INV/CORP REL GRP MGR Aggregate Year-to-Date > \$ 300.00	
D. Full Name, Mailing Address and ZIP Code	U.S. BANCORP	03/26/98	50.00
		03/26/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: INV/CORP REL GRP MGR Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	U. S. BANK NATIONAL ASSOC	02/02/98	50.00
		03/26/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: PRES PMNT SYS Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	U. S. BANK NATIONAL ASSOC	03/26/98	50.00
		03/26/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: PRES PMNT SYS Aggregate Year-to-Date > \$ 100.00	
G. Full Name, Mailing Address and ZIP Code	U. S. BANK NATIONAL ASSOC	02/02/98	100.00
		03/26/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC		Occupation: RET PROD GRP EX Aggregate Year-to-Date > \$ 2,050.00	
SUBTOTAL of Receipts this Page (optional)			1,110.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 4  
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHILIP G HEADLRY 18083 BRUZZY PT ROAD WOODLAND, MN 55391	U. S. BANK NATIONAL ASSOC	03/26/98	100.00
		03/26/98	100.00
		03/31/98	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation RET PROD GRP EX	Aggregate Year-to-Date > \$ 3,050.00	
DAVID INGRAHAM 15745 ELODIE LANE MINNETONKA, MN 55345	U. S. BANK NATIONAL ASSOC	02/02/98	35.00
		03/26/98	35.00
		03/26/98	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CUST EQUITY EMPC	Aggregate Year-to-Date > \$ 210.00	
DAVID INGRAHAM 15705 ELADIE LANE MINNETONKA, MN 55345	U. S. BANK NATIONAL ASSOC	03/26/98	35.00
		03/26/98	35.00
		03/31/98	35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CUST EQUITY EMPC	Aggregate Year-to-Date > \$ 210.00	
SUSAN E LESTER 4155 TRILLIUM LANE E MINNETRISTA, MN 55369	U.S. BANCORP	02/02/98	50.00
		03/26/98	50.00
		03/26/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CORP DEV MGR	Aggregate Year-to-Date > \$ 300.00	
SUSAN E LESTER 4155 TRILLIUM LANE E MINNETRISTA, MN 55364	U.S. BANCORP	05/26/98	50.00
		03/26/98	50.00
		03/31/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation CORP DEV MGR	Aggregate Year-to-Date > \$ 300.00	
LEE R MITAU 1908 GIRARD AVENUE SOUTH MINNEAPOLIS, MN 55403	U.S. BANCORP	02/02/98	50.00
		03/26/98	50.00
		03/26/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL COUNSEL	Aggregate Year-to-Date > \$ 300.00	
LEE R MITAU 1908 GIRARD AVENUE SOUTH MINNEAPOLIS, MN 55403	U.S. BANCORP	03/26/98	50.00
		03/26/98	50.00
		03/31/98	50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Occupation GENERAL COUNSEL	Aggregate Year-to-Date > \$ 300.00	
SUBTOTAL of Receipts This Page (optional) .....			1,110.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 3 OF 4  
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
TERRENCE P SANDVIK 3400 BELKIRK DR BURNSVILLE, MN 55337	U. S. BANK NATIONAL ASSOC	02/02/98	50.00
	Occupation BUS TECH EXEC	03/26/98 03/26/98	50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 300.00		
TERRENCE P SANDVIK 3400 BELKIRK DR BURNSVILLE, MN 55337	U. S. BANK NATIONAL ASSOC	05/25/98	50.00
	Occupation BUS TECH EXEC	05/26/98 03/31/98	50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 300.00		
ROBERT H SAYRE 1728 LOGAN AVENUE S MINNEAPOLIS, MN 55403	U.S. BANCORP	02/02/98	50.00
	Occupation ER EXEC	03/26/98 03/26/98	50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 160.00		
ROBERT H SAYRE 1728 LOGAN AVENUE S MINNEAPOLIS, MN 55403	U.S. BANCORP	03/26/98	50.00
	Occupation ER EXEC	03/26/98 03/31/98	50.00 50.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 360.00		
ALAN L SCHOEN 7607 STONEWOOD COURT EDINA, MN 55439	U. S. BANK NATIONAL ASSOC	02/03/98	35.00
	Occupation BUS OPS EXEC	03/26/98 03/26/98	35.00 35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 210.00		
ALAN L SCHOEN 7607 STONEWOOD COURT EDINA, MN 55439	U. S. BANK NATIONAL ASSOC	03/26/98	35.00
	Occupation BUS OPS EXEC	03/26/98 03/31/98	35.00 35.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: GENERAL CONTRIBUTION TO PAC	Aggregate Year-to-Date > \$ 210.00		
C. 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)			870.00

**SCHEDULE A**

**ITEMIZED RECEIPTS  
EARMARKED CONTRIBUTIONS**

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

PAGE 4 OF 4  
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)  
**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOHN F. GRUNDHOFFER 581 NORTH STREAM ROAD ORONO, MN 55391	FIRST BANK SYSTEM, INC.	03/13/98	1,000.00
Receipt For: <input type="checkbox"/> 00 Primary <input type="checkbox"/> General <input type="checkbox"/> Other: RUD GRAMS FOR SENATE	Occupation CHAIRMAN, PRESIDENT & CEO	Aggregate Year-to-Date > \$ 1,500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOHN F. GRUNDHOFFER 581 NORTH STREAM ROAD ORONO, MN 55391	FIRST BANK SYSTEM, INC.	02/26/98	500.00
Receipt For: <input type="checkbox"/> 98 Primary <input type="checkbox"/> General <input type="checkbox"/> Other: FERRARO FOR SENATE '98	Occupation CHAIRMAN, PRESIDENT & CEO	Aggregate Year-to-Date > \$ 1,500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PHILIP G HEASLEY 18385 BREEZY PT ROAD WOODLAND, MN 55391	U. S. BANK NATIONAL ASSOC	01/08/98	250.00
Receipt For: <input type="checkbox"/> 98 Primary <input type="checkbox"/> General <input type="checkbox"/> Other: LINDA RUNDICK FOR U.S. CONGRESS	Occupation RET PROD GRP EX	Aggregate Year-to-Date > \$ 2,050.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PHILIP G HEASLEY 18385 BREEZY PT ROAD WOODLAND, MN 55391	U. S. BANK NATIONAL ASSOC	05/09/98	200.00
Receipt For: <input type="checkbox"/> 98 Primary <input type="checkbox"/> General <input type="checkbox"/> Other: REPUBLICAN CONGRESSIONAL COMMITTEE	Occupation RET PROD GRP EX	Aggregate Year-to-Date > \$ 2,050.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
PHILIP G HEASLEY 18385 BREEZY PT ROAD WOODLAND, MN 55391	U. S. BANK NATIONAL ASSOC	03/26/98	1,000.00
Receipt For: <input type="checkbox"/> 98 Primary <input type="checkbox"/> General <input type="checkbox"/> Other: A LOT OF PEOPLE SUPPORTING TOM D	Occupation RET PROD GRP EX	Aggregate Year-to-Date > \$ 3,050.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
MARK PAYNTER 5036 VINCENT AVE N MPLS, MN 55430	U.S. BANCORP	01/22/98	50.00
Receipt For: <input type="checkbox"/> 98 Primary <input type="checkbox"/> General <input type="checkbox"/> Other: REPUBLICAN NATIONAL COMMITTEE	Occupation DPE MGR E	Aggregate Year-to-Date > \$ 50.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
RICHARD SOMA 55 ARBOR COURT TONKA BAY, MN 55331	U.S. BANCORP	02/12/98	1,300.00
Receipt For: <input type="checkbox"/> 00 Primary <input type="checkbox"/> General <input type="checkbox"/> Other: RUD GRAMS FOR SENATE	Occupation VICE CHAIRMAN	Aggregate Year-to-Date > \$ 1,000.00	
SUBTOTAL of Receipts This Page (optional) .....			4,000.00
TOTAL This Period (last page this line number only) .....			7,000.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 12

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NAME OF COMMITTEE (in Full)  
**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code US BANCORP PAC - NORTHWEST 111 SW 5TH STREET - SUITE 1770 PORTLAND, OR 97208		Name of Employer	Date (month, day, year)	Amount of Each Receipt THIS Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: TRANSFER FROM AFFILIATED PAC		Occupation	03/30/98	48,730.17
		Aggregate Year-to-Date > \$	48,730.17	
B. Full Name, Mailing Address and ZIP Code US BANCORP PAC - OREGON 111 SW 5TH STREET - SUITE 1770 PORTLAND, OR 97208		Name of Employer	Date (month, day, year)	Amount of Each Receipt THIS Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other: TRANSFER FROM AFFILIATED PAC		Occupation	03/30/98	21,387.91
		Aggregate Year-to-Date > \$	21,387.91	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		Occupation		
		Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt THIS Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		Occupation		
		Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		Occupation		
		Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		Occupation		
		Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:		Occupation		
		Aggregate Year-to-Date > \$		
SUBTOTAL of Receipts This Page (optional) .....				70,118.08
TOTAL This Period (last page this line number only) .....				70,118.08



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 9

FOR LINE NUMBER 23

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**NAME OF COMMITTEE (In Full)**

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BUCK MCKEON FOR CONGRESS P.O. BOX 2071 SANTA CLARA, CA 95050027	BUCK MCKEON U S CONGRESS CA25 Disbursement for: <input type="checkbox"/> RA <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	03/23/98	1,000.00
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) .....

1,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 9

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)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
BANK PAC ABA -- LOCKBOX 1120 CONNECTICUT AVE NW WASHINGTON, DC 20036	FEDERAL POLITICAL ACTION COMTE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other:	03/02/98	500.00
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) .....			500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
MIKE CRAPO FOR SENATE P.O. BOX 1948 BOISE, ID 83721	MIKE CRAPO U S SENATE ID Disbursement for: <input checked="" type="checkbox"/> 98 Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	01/22/98	200.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
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

TOTAL of Disbursements This Page (optional) ..... 200.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 9

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)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
LSE TERRY FOR CONGRESS P.O. BOX 540098 OMAHA, NE 68154	LSE TERRY U S CONGRESSE NE02 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	03/23/98	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
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): ..... 250.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 5 OF 9

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FRIENDS OF SENATOR D'AMATO P.O. BOX 888 ALBANY, NY 11501	ALFONSO D'AMATO U S SENATE NY Disbursement for: <input checked="" type="checkbox"/> 98 <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other:	02/16/98	3,500.00
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) .....

1,500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS  
EARMARKED CONTRIBUTIONS**

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

PAGE 6 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
REPUBLICAN CONGRESSIONAL COMMITTEE P.O. BOX 90488 WASHINGTON, DC 20090488	NATIONAL POLITICAL PARTY Disbursement for: <input checked="" type="checkbox"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General Other: ERNE PHILIP S HEASLEY	03/09/98	200.00
B. Full Name, Mailing Address and ZIP Code REPUBLICAN NATIONAL COMMITTEE 310 FIRST STREET SE WASHINGTON, DC 20077	NATIONAL POLITICAL PARTY DC Disbursement for: <input checked="" type="checkbox"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General Other: BRUK MARK PRYNTER	01/22/98	50.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General 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"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General 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"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General 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"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General 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"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General 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"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General 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"/> SB <input type="checkbox"/> Primary <input type="checkbox"/> General Other:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ..... 250.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS  
EARMARKED CONTRIBUTIONS**

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

PAGE 7 OF 9  
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
ROD GRAMS FOR SENATE P.O. BOX 1029 ANOKA, MN 55303	ROD GRAMS U S SENATE MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other: ERICK JOHN F. GRUNDHOFFER	08/12/98	1,000.00
ROD GRAMS FOR SENATE P.O. BOX 1029 ANOKA, MN 55303	ROD GRAMS U S SENATE MN Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other: ERICK RICHARD EDNA	02/12/98	1,000.00
LINDA RUNBECK FOR U.S. CONGRESS P.O. BOX 291 CIRCLE PINES, MN 55014	LINDA RUNBECK U S CONGRESS MN06 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other: ERICK PHILIP G HEASLEY	01/08/98	250.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General 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 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 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 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 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 Other:	Date (month, day, year)	Amount of Each Disbursement this Period
SUBTOTAL of Disbursements This Page (optional)			2,250.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS  
EARMARKED CONTRIBUTIONS**

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

PAGE 8 OF 9

FOR LINE NUMBER  
23

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
FERRARO FOR SENATE '98 373 PARK AVENUE SOUTH 9TH FLOOR NEW YORK, NY 10016	GERALDINE FERRARO U S SENATE NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other: BRMK JCGN F. GRUNDROFFER	02/26/98	530.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General 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 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 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 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 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 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 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 Other:	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ..... 500.00



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS  
EARMARKED CONTRIBUTIONS**

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

PAGE 9 OF 9

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
A LOT OF PEOPLE SUPPORTING TOM CASCHKE 424 C STREET NE FIRST FLOOR WASHINGTON, DC 20002	TOM CASCHKE U S SENATE SD Disbursement for: <input type="checkbox"/> Other: <input checked="" type="checkbox"/> ERIC PHILIP C HAZLEY	03/26/98	1,000.00
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)	1,000.00
TOTAL This Period (last page this line number only)	7,450.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

**U.S. BANCORP POLITICAL PARTICIP. PROGRAM**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement this Period
NEERASKAYS FOR JON CHRISTENSEN FOR GOVERNOR P.O. BOX 540277 OMAHA, NE 68154	JON CHRISTENSEN GOVERNOR NE Disbursement for: <input checked="" type="checkbox"/> 96 Primary <input type="checkbox"/> General Other: <input type="checkbox"/>	03/23/98	1,000.00
HEINEMAN FOR STATE TREASURER 2724 EAST TENTH STREET FREMONT, NE 68025	DAVID HEINEMAN TREASURER OF STATE NE Disbursement for: <input checked="" type="checkbox"/> 98 Primary <input type="checkbox"/> General Other: <input type="checkbox"/>	01/28/98	500.00
DAVE MAURSTAD FOR LT. GOVERNOR 1039 K STREET LINCOLN, NE 68504	DAVE MAURSTAD LT GOVERNOR NE Disbursement for: <input checked="" type="checkbox"/> 98 Primary <input type="checkbox"/> General Other: <input type="checkbox"/>	03/23/98	250.00
STEVE WACKER FOR STATE AUDITOR 9155 PIONEER COURT LINCOLN, NE 68520	STEVE WACKER AUDITOR OF STATE NE Disbursement for: <input checked="" type="checkbox"/> 90 Primary <input type="checkbox"/> General Other: <input type="checkbox"/>	03/23/98	250.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General Other: <input type="checkbox"/>	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 Other: <input type="checkbox"/>	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 Other: <input type="checkbox"/>	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 Other: <input type="checkbox"/>	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 Other: <input type="checkbox"/>	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) .....	2,000.00
TOTAL This Period (last page this line number only) .....	2,000.00

