

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
 Washington Political Action Committee

ADDRESS (number and street) Check if different than previously reported
 444 N. Capitol St., NW Suite 712

CITY, STATE and ZIP CODE
 Washington, DC 20001

RECEIVED
 FEDERAL ELECTION
 COMMISSION

OCT 14 3 26 PM '98

2. FEC IDENTIFICATION NUMBER
 C00138560

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
 12/31/81

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

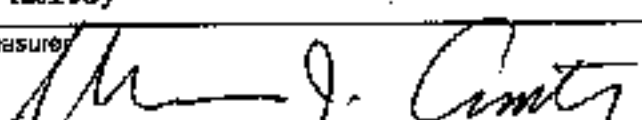
- 12-Day Pre-Election Report for the _____
 (Type of Election)
 election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>7/1/98</u> through <u>9/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 13,780.99
(b) Cash on Hand at Beginning of Reporting Period	\$ 14,435.06	
(c) Total Receipts (from Line 19)	\$ 12,052.10	\$ 80,850.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 26,487.16	\$ 94,631.47
7. Total Disbursements (from Line 30)	\$ 21,948.13	\$ 90,092.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4,539.03	\$ 4,539.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-894-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
 Morris J. Amity

Signature of Treasurer  Date
 10-13-98

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

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

[revised 1/1/91]

NAME OF COMMITTEE		REPORT COVERING PERIOD	
Washington Political Action Committee		FROM 7/1/98	TO 9/30/98
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	\$10,150.	\$72,710.
ii.	Unitemized	\$ 1,882.	\$ 8,042.
iii.	Total (add i and ii) >	\$12,032.	\$80,752.
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contributions (add a iii, b and c) >	\$12,032.	\$80,752.
12.	Transfers From Affiliated/Other Party Committees		
13.	All Loans Received		
14.	Loan Repayments Received		
15.	Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17.	Other Federal Receipts (Dividends, Interest, etc.)	\$ 20.10	\$ 98.48
18.	Transfers from Nonfederal Account for Joint Activity		
19.	Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	\$12,052.10	\$80,850.48
20.	Total Federal Receipts (subtract line 18 from line 19) >	\$12,052.10	\$80,850.48
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share		
ii.	Non-Federal Share		
b.	Other Federal Operating Expenditures	\$ 6,698.13	\$21,292.44
c.	Total Operating Expenditures (add a i, a ii, and b) >	\$ 6,698.13	\$21,292.44
22.	Transfers to Affiliated/Other Party Committees		
23.	Contributions to Federal Candidates/Committees and Other Political Committees	\$15,250.	\$68,800.
24.	Independent Expenditures (use Schedule E)		
25.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 44 1a(d)) (use Schedule F)		
26.	Loan Repayments Made		
27.	Loans Made		
28.	Refunds of Contributions To:		
a.	Individuals/Persons Other Than Political Committees		
b.	Political Party Committees		
c.	Other Political Committees (such as PACs)		
d.	Total Contribution Refunds (add a, b and c) >		
29.	Other Disbursements		
30.	Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	\$21,948.13	\$90,092.44
31.	Total Federal Disbursements (subtract line 21 a ii from line 30) >	\$21,948.13	\$90,092.44
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	\$12,032.	\$80,752.
33.	Total Contribution Refunds (from line 28d)		
34.	Net Contributions (other than loans)(subtract line 33 from 32)	\$12,032.	\$80,752.
35.	Total Federal Operating Expenditures (add 21 a i and 21 b) >	\$ 6,698.13	\$21,292.44
36.	Offsets to Operating Expenditures (from line 15)		
37.	Net Operating Expenditures (subtract line 36 from 35) >	\$ 6,698.13	\$21,292.44

SCHEDULE A ITEMIZED RECEIPTS

Contributions from Individuals

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

PAGE 1 OF 3
FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (in Full)
Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Abe Pollin c/o MCI Center 601 F. Street Washington, DC 20001	Pollin Properties	7/1/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	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
Martin Weiss 1600 Parker Avenue Fort Lee, NJ 07024	Armel Associates	7/2/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chemist	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
Jerry Green 1323 Annapolis Drive Anchorage, AK 99508	David Green & Sons, Inc.	7/3/98	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Office Manager	Aggregate Year-to-Date > \$1000	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Nathan Lewin 11723 Gainsborough Road Potomac, MD 20854	Miller, Cassidy, Larroca, and Lewin	7/5/98	\$250
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
Robert Kadis P.O. Box 10369 Goldsboro, NC 27532	CMA Corp	7/13/98	\$300
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Realtor	Aggregate Year-to-Date > \$300	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Daniel Schaefer 126 Tremont Street Hartford, CT 06105	State of Connecticut	7/21/98	\$350
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$350	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Carol Greenwald 7300 Brennon Lane Chevy Chase, MD 20815	Potomac Investment Co.	7/27/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investment Advisor	Aggregate Year-to-Date > \$500	

SUBTOTAL of Receipts This Page (optional) \$3400

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 3
FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (in Full)

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Maurice Kraines 1005 No. Crescent Drive Beverly Hills, CA 90210	Kraco Enterprises, Inc.	9/2/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	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
L.J. Hochberg 275 N. Deere Park E. Highland Park, IL 60035	Sportmart, Inc.	9/2/98	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$ 1000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gerald Charnoff 11504 Cushman Road Rockville, MD 20852	Shaw, Pittman	9/6/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
Stanley Benzel 315 N. 27th Street Allentown, PA 18104	Self	9/7/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	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
Eric Ross 206 Crestwood Drive South Orange, NJ 07079		9/8/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Martin Kimmel 130 Taconic Road Taconic, CT 06079	Kimco Corp.	9/14/98	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date > \$ 1000	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Samson Stern 5505 Graystone Street Chevy Chase, MD 20815		9/16/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 500	

SUBTOTAL of Receipts This Page (optional)

\$4500

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 3
FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (In Full)

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joel Hoppenstein 3003 Van Ness Street, NW Washington, DC 20008	The Developing Markets Group, LLC	9/23/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	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
Raymond Zimmerman P.O. Box 150769 Nashville, TN 37215	Service Merchandise	9/25/98	\$1000
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Jonas 5840 Colfax Avenue Alexandria, VA 22311	Patton, Boggs, Blow	9/26/98	\$500
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	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
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	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 (specify):	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 (specify):	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 (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) \$2000

TOTAL This Period (last page this line number only) \$9900

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER
21b

Federal Operating Expenditures

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NAME OF COMMITTEE (In Full)

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	\$1500.
B. Full Name, Mailing Address and ZIP Code Leadership Directories, INC. 104 Fifth Avenue New York, NY 10011	Purpose of Disbursement Reference Material Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8/98	\$276.27
C. Full Name, Mailing Address and ZIP Code Roll Call 900 Second Street, NE Suite 107 Washington, DC 20002	Purpose of Disbursement Reference Material Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8/98	\$423.
D. Full Name, Mailing Address and ZIP Code Minuteman Press 555 New Jersey Avenue, NW Washington, DC 20001	Purpose of Disbursement Newsletter & Printing Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/16/98	\$706.16
E. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	Purpose of Disbursement PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/3/98	\$1500.
F. Full Name, Mailing Address and ZIP Code D.C. Postmaster One Massachusetts Avenue, NW Washington, DC 20001	Purpose of Disbursement Postage Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/7/98	\$201.
G. Full Name, Mailing Address and ZIP Code Morris J. Amitay, P.C. 444 N. Capitol Street, NW #712 Washington, DC 20001	Purpose of Disbursement PAC Administration Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/1/98	\$1500.
H. Full Name, Mailing Address and ZIP Code D.C. Postmaster One Massachusetts Avenue, NW Washington, DC 20001	Purpose of Disbursement Postage Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/28/98	\$257.80
I. Full Name, Mailing Address and ZIP Code Krupin's Catering 4620 Wisconsin Avenue Washington, DC 20096	Purpose of Disbursement Catering Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/98	\$333.90

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

\$6,698.13

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)

Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Bob Livingston 5163 General De Gaulle Drive Suite #210 New Orleans, LA 70131	campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/2/98	\$1000
Bond For Senate 2326 Millpark Drive St. Louis, MO 63043	campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/6/98	\$1500
C. Full Name, Mailing Address and ZIP Code Friends of Harry Reid 245 2nd Street, NE Suite 300 Washington, DC 20002	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98	\$1000
D. Full Name, Mailing Address and ZIP Code Gilman For Congress P.O. Box 3001 Middletown, NY 10940	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98	\$1000
E. Full Name, Mailing Address and ZIP Code Stallings For Congress P.O. Box 205 Pocatello, Idaho 83204	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/27/98	\$500
F. Full Name, Mailing Address and ZIP Code Levin For Congress P.O. Box 1092 Warren, MI 48090-1092	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/24/98	\$250
G. Full Name, Mailing Address and ZIP Code Citizens For Arlen Specter 300 C Street, NE Suite 100 B Washington, DC 20002	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/10/98	\$4000
H. Full Name, Mailing Address and ZIP Code Sneary For Congress Bay City Office P.O. Box 187 Bay City, TX 77404	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/23/98	\$500
I. Full Name, Mailing Address and ZIP Code Friends of Harry Reid 245 2nd Street, NW, Suite 300 Washington, DC 20002	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	\$2000

SUBTOTAL of Disbursements This Page (optional)

\$11,750

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 2 OF 2

FOR LINE NUMBER
23

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NAME OF COMMITTEE (In Full)
Washington Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Merkowski 9B 201 Maryland Avenue, NE Washington, DC 20002	campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	\$500
B. Full Name, Mailing Address and ZIP Code Friends of Jim Saxton P.O. Box 795 Mt. Holly, NJ 08060	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	Amount of Each Disbursement This Period \$500
C. Full Name, Mailing Address and ZIP Code Friends of Christopher J. Dodd 203 G. Street, NE Washington, DC 20002	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/24/98	Amount of Each Disbursement This Period \$1500
D. Full Name, Mailing Address and ZIP Code Baesler For Senate Committee P.O. Box 2147 Lexington, KY 40588	Purpose of Disbursement campaign contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/25/98	Amount of Each Disbursement This Period \$1000
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)

\$3,500

TOTAL This Period (last page this line number only)

\$15,250

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>10-14-98</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>JCH</i> PREPARER	<i>10-14-98</i> DATE PREPARED