

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION

Oct 17 1 42 PM '98

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Atlantic Research Corporation Political Action Committee (ARC-PAC)		2. FEC IDENTIFICATION NUMBER <b>C00198709</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 5845 Wellington Road		
CITY, STATE and ZIP CODE Gainesville, VA 20155-1633		
3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

Monthly Report Due On:

- February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

- 12-Day Pre-Election Report for the General  
(Type of Election)  
election on Nov. 3 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	10/01/98 through 10/14/98	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	10/01/98 through 10/14/98		
6. (a) Cash on Hand January 1, 19 <u>98</u>			\$ 44,810
(b) Cash on Hand at Beginning of Reporting Period		\$ 38,407	
(c) Total Receipts (from Line 19)		\$ 228	\$ 12,724
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 38,635	\$ 57,534
7. Total Disbursements (from Line 30)		\$ 10,001	\$ 27,900
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 28,634	\$ 29,634
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	For further information contact Federal Election Commission 999 E Street, NW Washington, DC 20468 Toll Free 800-424-9530 Local 202-219-8420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ 0	

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

Type or Print Name of Treasurer: **Thomas D. Haggerty**

Signature of Treasurer



Date

10/14/98

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

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FEC FORM 3X  
(revised 8/93)

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Atlantic Research Corporation Political Action Committee	FROM 10/01/88	TO:	10/14/88
Receipts	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)	0	8,379	11(a)
ii. Unitemized	0	5,577	11(b)
iii. Total (add i and ii) >	0	11,956	11(c)
b. Political Party Committees			11(d)
c. Other Political Committees (such as PACs)			11(e)
d. Total Contributions (add a ii, b and c) >	0	11,956	11(f)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	228	768	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	228	12,724	19
20. Total Federal Receipts (subtract line 18 from line 19) >	228	12,724	20
Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year	
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(a)(i)
ii. Non-Federal Share	1	400	21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	1	400	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	10,000	27,500	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	10,001	27,900	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	10,001	27,900	31
Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year	
32. Total Contributions (other than loans) (from line 11d)	0	11,956	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans) (subtract line 33 from 32)	0	11,956	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	1	400	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	1	400	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 4  
FOR LINE NUMBER 11(a)(i)

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)**

Atlantic Research Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert E. Shenton 24 Chaffee Creek Trail Camden, AR 71701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Vice President Aggregate Year-to-Date \$ 730	payroll deduction	0 (\$40 biweekly)
James R. Sides 11133 Tattersall Trail Oakton, VA 22124 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Chairman & CEO Aggregate Year-to-Date \$ 2000		0
Carlyle C. Ring Jr. 306 Monticello Blvd. Alexandria, VA 22305 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Self Employed Occupation: Legal Consultant Aggregate Year-to-Date \$ 500		0
Jerry L. Fields 633 Wisman Rd., Woodstock, VA 22684 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Vice President Aggregate Year-to-Date \$ 500	payroll deduction	0 (\$25 biweekly)
Patrick J. Jenkins 9708 Counsellor Dr. Vienna, VA 22181 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Vice President Aggregate Year-to-Date \$ 825	payroll deduction	0 (\$50 biweekly)
Boyd F. Rohrback 1113 Pinecrest Dr. Camden, AR 71701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Vice President Aggregate Year-to-Date \$ 250		0
Ernest R. Fiermg 1055 Woodside Dr. Camden, AR 71701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Project Director Aggregate Year-to-Date \$ 200		0
<b>SUBTOTAL of Receipts This Page (optional)</b>			0
<b>TOTAL This Period (last page this line number only)</b>			0

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 4

FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Atlantic Research Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John E. Skidlan 2325 Downs Pass Knoxville, TN 37819	Atlantic Research Corporation		0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Occupation: Vice 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
Byron L. Cockrell 9283 Bayberry Ave., Manassas, VA 22110	Atlantic Research Corporation		0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Occupation: Vice President	Aggregate Year-to-Date > \$ 400	(\$20 biweekly)
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David R. Ewing 658 Graham St., Camden, AR 71701	Atlantic Research Corporation		0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Occupation: Director	Aggregate Year-to-Date > \$ 400	(\$20 biweekly)
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James D. Martin 11113 Lubyary Ct., Manassas, VA 22110	Atlantic Research Corporation		0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Occupation: Vice President	Aggregate Year-to-Date > \$ 300	(\$15 biweekly)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bernie J. Brien 12130 Sangsters Ct., Clifton, VA 20124	Atlantic Research Corporation		0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Occupation: Manager	Aggregate Year-to-Date > \$ 300	(\$15 biweekly)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Shelbe K. Simler 10819 N. La Quinta Dr., Tucson, AZ 85737	Atlantic Research Corporation		0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Occupation: Manager	Aggregate Year-to-Date > \$ 300	(\$15 biweekly)
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Leonard F. Parkinson 6724 Weaver Ave., McLean, VA 22101	Atlantic Research Corporation		0
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Occupation: Project Director	Aggregate Year-to-Date > \$ 288	(\$14 biweekly)

SUBTOTAL of Receipts This Page (optional) .....

0

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 4

FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (in Full)**

Atlantic Research Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phillip A Wade 31 Chaffee Creek, Camden, AR 71701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Manager Aggregate Year-to-Date > \$ 280	payroll deduction	0 (\$14 biweekly)
Mark N. Director 5313 Black Oak Dr. Fairfax, VA 22032 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Project Director Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
David G. Dodge 5722 Greenview Lane Warrenton, VA 20187 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Project Director Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
Richard S. Wade 8012 Whiting Dr., Manassas, VA 22111 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Project Director Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
Bryan M. Waltz 9294 Bayberry Ave. Manassas, VA 20110 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Manager Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
Mary V. Jones 3137 Stratford Ct. Dalton, VA 22124 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Manager Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
Robert B. Daklone 14108 Rock Canyon Dr. Centerville, VA 22020 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Manager Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)

SUBTOTAL of Receipts This Page (optional) .....

0

TOTAL This Period (last page this line number only) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 4 OF 4

FOR LINE NUMBER 11(a)(1)

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**NAME OF COMMITTEE (In Full)**

Atlantic Research Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert C. Weidmann 1006 Austin St. Camden, AR 71701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Manager Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
Donald W. Renfro 2701 Woodson Dr., Knoxville, TN 37920 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Engineer Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
James W. Charlee 7561 Cannonbeer Ct. Warrenton, VA 22185 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Not Applicable	Atlantic Research Corporation Occupation: Project Director Aggregate Year-to-Date > \$ 200	payroll deduction	0 (\$10 biweekly)
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) .....

0

TOTAL This Period (last page this line number only) .....

0

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

Atlantic Research Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
First Virginia Bank PO Box 88 Falls Church, VA 22040 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest Income	Not Applicable Occupation:	10/7/98 Aggregate Year-to-Date \$ 768	228
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation:	Date (month, day, year) Aggregate Year-to-Date \$	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation:	Date (month, day, year) Aggregate Year-to-Date \$	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation:	Date (month, day, year) Aggregate Year-to-Date \$	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation:	Date (month, day, year) Aggregate Year-to-Date \$	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation:	Date (month, day, year) Aggregate Year-to-Date \$	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation:	Date (month, day, year) Aggregate Year-to-Date \$	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

228

TOTAL This Period (last page this line number only)

228

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**  
Atlantic Research Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bob Wise For Congress Committee PO Box 5338 Charleston, WV 25361	Bob Wise Candidate For Congress (WV 2nd) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
B. Full Name, Mailing Address and ZIP Code Congressman Julian Dixon Committee 1591 Roxbury Drive Los Angeles, CA 90035	Julian C. Dixon Candidate For Congress (CA 32nd) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
C. Full Name, Mailing Address and ZIP Code Friends of John LaFalce PO Box 383 Niagara Falls, NY 14302	John LaFalce Candidate For Congress (NY 29th) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
D. Full Name, Mailing Address and ZIP Code Baleman For Congress PO Box 5871 Arlington, VA 22205	Herbert Baleman Candidate For Congress (VA 1st) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
E. Full Name, Mailing Address and ZIP Code Moran For Congress 205 West Uhler Terrace Alexandria, VA 22301	Jen Moran Candidate For Congress (VA 8th) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
F. Full Name, Mailing Address and ZIP Code Buck McKee For Congress 27225 Camp Plenty Road, Suite 2 Santa Clarita, CA 91351	Howard P. McKee Candidate For Congress (CA 25th) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
G. Full Name, Mailing Address and ZIP Code Bill Thomas Campaign Committee PO Box 395 Bakersfield, CA 93302	William M. Thomas Candidate For Congress (CA 21st) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
H. Full Name, Mailing Address and ZIP Code Bill Jenkins For Congress PO Box 840 Rogersville, TN 37857	William L. Jenkins Candidate For Congress (TN 1st) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
I. Full Name, Mailing Address and ZIP Code Duncan For Congress PO Box 2846 Knoxville, TN 37901	John T. Duncan Candidate For Congress (TN 2nd) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500

SUBTOTAL of Disbursements This Page (optional)

4,500

TOTAL This Period (last page this line number only)



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER 23.

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NAME OF COMMITTEE (In Full)  
Atlantic Research Corporation Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chel Edwards For Congress PO Box 23273 Waco, TX 76702	Chel Edwards Candidate For Congress (TX 11th) Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	500
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Robert C. Byrd 1211 Commerce Ave, NW #700 Washington, DC 20038	Robert C. Byrd Candidate For Senate (WV) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	1,000
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tennesseeans For Thompson 1808 West End Ave. Nashville, TN 37203	Fred Thompson Candidate For Senate (TN) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	1,000
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Frist 4205 Hillsboro Road, Suite 306 Nashville, TN 37215	Bill Frist Candidate For Senate (TN) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	1,000
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Asa Hutchinson For Senate PO Box 888 Rogers, AR 72757	Asa Hutchinson Candidate For Senate (AR) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	1,000
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ted Stevens For Senate PO Box 1755 Washington, DC 20013	Ted Stevens Candidate For Senate (AK) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	1,000
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 (specify)		
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 (specify)		
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 (specify)		

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

5,500


TOTAL This Period (last page this line number only) .....

10,000

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 10/15/98
<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	
 PREPARER	10/17/98 DATE PREPARED