

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

AUG 30 11 41 AM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Soglin for Congress		2. FEC IDENTIFICATION NUMBER C00314070
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. PO Box 1643		
CITY, STATE and ZIP CODE Madison, WI 53701	STATEDISTRICT WI/02	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

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)
 Twelfth day report preceding Primary (Type of Election)
 election on 9/10/96 in the State of Wisconsin
 Thirtieth day report following the General Election on _____ in the State of _____
 Termination Report

This report contains activity for Primary Election General Election Special Election Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>7/1/96</u> through <u>8/21/96</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	71,198.02	236,695.18
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	71,198.02	236,685.18
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	83,898.45	153,207.03
(b) Total Offsets to Operating Expenditures (from Line 14)	100.00	4,301.68
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	83,798.45	148,905.35
8. Cash on Hand at Close of Reporting Period (from Line 27)	87,779.83	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2911.15	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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: **Daniel Zimmerman, Assistant Treasurer**
 Signature of Treasurer: *Daniel Zimmerman* Date: **8/25/96**

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

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (or Unit)	Report Covering the Period:		
Soglin for Congress FEC # C00314070	From: 7/1/96	To: 8/21/96	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			11(a)(i)
(i) Itemized (use Schedule A) -----	27,711.15		11(a)(ii)
(ii) Unitemized -----	39,916.92		11(a)(iii)
(ii) Total of contributions from individuals -----	67,628.07	164,676.87	11(b)
(b) Political Party Committees -----	300.00	2,650.00	11(c)
(c) Other Political Committees (such as PACs) -----	8,270.00	69,358.31	11(d)
(d) The Candidate -----			11(e)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(ii), (b), (c) and (d)) -----	71,298.02	236,685.18	
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----			12
13. LOANS:			
(a) Made or Guaranteed by the Candidate -----			13(a)
(b) All Other Loans -----			13(b)
(c) TOTAL LOANS (add 13(a) and (b)) -----			13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----	100.00	4,201.68	14
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----			15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	71,298.02	240,986.86	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES -----	83,898.45	153,207.03	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----			18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate -----			19(a)
(b) Of All Other Loans -----			19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees -----			20(a)
(b) Political Party Committees -----			20(b)
(c) Other Political Committees (such as PACs) -----			20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----			20(d)
21. OTHER DISBURSEMENTS -----			21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	83,898.45	153,207.03	22

(II). CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$	100,380.26	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$	71,298.02	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$	171,678.28	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$	83,898.45	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$	87,779.83	27

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 17

FOR LINE #11(a)(1)

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)

Seclis for Congress REC # C00314070

1. Full Name, Mailing Address and Zip Code	Name of Employer (Partnership)	Date (month, day, year)	Amount of Each Receipt This Period
Weinstein Family Partnership PO Box 44228 Madison, WI 53744		7/17/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a		SPK ATTRIBUTION BELOW
	Aggregate Year-to-Date \$2,000.00		
2. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Evelyn Minkoff 713 Dearholt Road Madison, WI 53711	n/a	7/17/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife		Memo
	Aggregate Year-to-Date \$500.00		
3. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arvin Weinsleib 105 Standish Court Madison, WI 53705		7/17/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		Memo
	Aggregate Year-to-Date \$500.00		
4. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
I. Bernard Weinstein 249 Chestnut Street Englewood, NJ 07631		7/17/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		Memo
	Aggregate Year-to-Date \$500.00		
5. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Laurence Weinstein 4417 Fox Bluff Lane Middleton, WI 53562		7/17/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Business		Memo
	Aggregate Year-to-Date \$500.00		

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

1,000.00

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

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 2 OF 17

FOR LINE #11(a)(1)

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)
Soglin for Congress FEC # 600314070

6. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Susan Ogman 4809 Hillview Terrace Madison, WI 53711	Self-employed	8/4/98	\$1,000.00 New
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		(See Redesignation below)
	Aggregate Year-to-Date \$1,000.00		
7. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Susan Bauman 4809 Hillview Terrace Madison, WI 53711	Self-employed	8/4/98	\$80.00 New
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney		Redesignation
	Aggregate Year-to-Date \$1,080.00		
8. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Paul Hebeiter 341 Riverside Drive Madison, WI 53703	Soglin for Congress	8/20/98	\$2,911.15 New
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Campaign Manager		(postage and newspaper ad expenses to be reimbursed)
	Aggregate Year-to-Date \$2,911.15		
9. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Linda Albers 7008 Companion Lane Middleton, WI 53562		8/1/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date \$250.00		
10. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Fritz Albert 3702 Anchorage Avenue Madison, WI 53705	n/a	8/20/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired		
	Aggregate Year-to-Date \$450.00		

SUBTOTAL of Receipts This Page (optional).....	4,411.15
TOTAL This Period (last page this line number only).....	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 17

FOR LINE #11(a)(1)

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)
Sotiris For Congress PRC # C00314070

11. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jean Anderson 1304 Nishishio Trail Monona, WI 53716	n/a	8/20/96	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$300.00	
12. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Timothy Anderson 2126 Yahara Place Madison, WI 53704	Schreiber-Anderson Assoc.	8/18/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation architect	Aggregate Year-to-Date \$250.00	
13. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frances Appelman 2106 Kenilworth Avenue Los Angeles, CA 90039	n/a	7/10/96	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$200.00	
14. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Linda Balisle 2820 Marshall Court, #1 Madison, WI 53705	Balisle & Roberson, SC	8/7/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$250.00	
15. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Elizabeth Barnhill 111 Virginia Terrace Madison, WI 53706		8/10/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date \$1,000.00	

SUBTOTAL of Receipts This Page (optional)	1,800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 4 OF 17

FOR LINE #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)
 Seglin for Congress FEC # C00314070

<p>16. Full Name, Mailing Address and Zip Code</p> <p>James Boll PO Box 1231 Madison, WI 53701</p>	<p>Name of Employer</p> <p>MG&E</p>	<p>Date (month, day, year)</p> <p>8/16/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$50.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Attorney</p> <p>Aggregate Year-to-Date \$220.00</p>		
<p>17. Full Name, Mailing Address and Zip Code</p> <p>Agnes Brodio 3709 Council Crest Madison, WI 53711</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>7/17/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>retired</p> <p>Aggregate Year-to-Date \$400.00</p>		
<p>18. Full Name, Mailing Address and Zip Code</p> <p>Calvin Bruce 710 Baltzell Street Madison, WI 53711</p>	<p>Name of Employer</p> <p>Wildwood Family Clinic</p>	<p>Date (month, day, year)</p> <p>7/14/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Physician</p> <p>Aggregate Year-to-Date \$250.00</p>		
<p>19. Full Name, Mailing Address and Zip Code</p> <p>Helen Bruner 8495 Highway 9D Verona, WI 53693</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>8/14/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$50.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>retired</p> <p>Aggregate Year-to-Date \$220.00</p>		
<p>20. Full Name, Mailing Address and Zip Code</p> <p>Michael Carter 2356 West Lawn Avenue Madison, WI 53711</p>	<p>Name of Employer</p> <p>University of Wisconsin</p>	<p>Date (month, day, year)</p> <p>7/5/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Agriculture Professor</p> <p>Aggregate Year-to-Date \$380.00</p>		

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>\$50.00</p>
<p>TOTAL This Period (last page this line number only).....</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 5 OF 17

FOR LINE #11(a)(1)

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)
Soglin for Congress POC # C00314070

<p>21. Full Name, Mailing Address and Zip Code</p> <p>Adrienne Century 1400 E. 55th Place, #903 Chicago, IL 60637</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p> <p>7/13/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Aggregate Year-to-Date \$200.00</p>		
<p>22. Full Name, Mailing Address and Zip Code</p> <p>Dennis Christensen 1 South Park Street, #200 Madison, WI 53715</p>	<p>Name of Employer</p> <p>Self-employed</p>	<p>Date (month, day, year)</p> <p>7/19/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Physician</p> <p>Aggregate Year-to-Date \$1,000.00</p>		
<p>23. Full Name, Mailing Address and Zip Code</p> <p>Michael Christopher 1314 Morrison Street Madison, WI 53703</p>	<p>Name of Employer</p> <p>Christopher Law Offices, SC</p>	<p>Date (month, day, year)</p> <p>7/9/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Attorney</p> <p>Aggregate Year-to-Date \$250.00</p>		
<p>24. Full Name, Mailing Address and Zip Code</p> <p>Andrew Cohn 3210 Lake Mendota Drive Madison, WI 53705</p>	<p>Name of Employer</p> <p>Wisconsin Office of the Attorney General</p>	<p>Date (month, day, year)</p> <p>7/11/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Staff</p> <p>Aggregate Year-to-Date \$250.00</p>		
<p>25. Full Name, Mailing Address and Zip Code</p> <p>Nancy Crabb 1905 West Lawn Avenue Madison, WI 53711</p>	<p>Name of Employer</p> <p>University of Wisconsin</p>	<p>Date (month, day, year)</p> <p>8/19/98</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>System Manager</p> <p>Aggregate Year-to-Date \$200.00</p>		

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>1,700.00</p>
<p>TOTAL This Period (last page this line number only).....</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 6 OF 17

FORM LINE #11(a)(1)

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)
 Soglio for Congress FEC # C0034070

<p>26. Full Name, Mailing Address and Zip Code</p> <p>Andrew Davis 2000 Alameda Padre Serra Santa Barbara, CA 93103</p>	<p>Name of Employer</p> <p>Self-employed</p>	<p>Date (month, day, year)</p> <p>8/1/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Film Producer</p> <p>Aggregate Year-to-Date \$1,000.00</p>		
<p>27. Full Name, Mailing Address and Zip Code</p> <p>Joseph Davis 445 Sidney Street Madison, WI 53705</p>	<p>Name of Employer</p> <p>State of Wisconsin</p>	<p>Date (month, day, year)</p> <p>7/3/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Educational Approval Board</p> <p>Aggregate Year-to-Date \$250.00</p>		
<p>28. Full Name, Mailing Address and Zip Code</p> <p>Carl J De Moor 167 N. Prospect Avenue Madison, WI 53705</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>7/19/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$200.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>retired</p> <p>Aggregate Year-to-Date \$200.00</p>		
<p>29. Full Name, Mailing Address and Zip Code</p> <p>Dennis Dressing 410 Virginia Terrace Madison, WI 53705</p>	<p>Name of Employer</p> <p>University of Wisconsin</p>	<p>Date (month, day, year)</p> <p>8/1/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$50.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Professor</p> <p>Aggregate Year-to-Date \$200.00</p>		
<p>30. Full Name, Mailing Address and Zip Code</p> <p>Frederick Edelman 201 Natchez Trace Madison, WI 53705</p>	<p>Name of Employer</p> <p>Physicians Plus</p>	<p>Date (month, day, year)</p> <p>7/2/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$50.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Physician</p> <p>Aggregate Year-to-Date \$300.00</p>		

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>1550.00</p>
<p>TOTAL This Period (last page this line number only).....</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 7 OF 17

FOR LINE #11(a)(1)

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)
 Senate for Congress FEC # C00314070

<p>31. Full Name, Mailing Address and Zip Code Frederick Edelman 201 Natchez Trace Madison, WI 53705</p>	<p>Name of Employer Physicians Plus</p>	<p>Date (month, day, year) 8/18/96</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Physician Aggregate Year-to-Date \$300.00</p>		
<p>32. Full Name, Mailing Address and Zip Code Teresa Bignessal 3722 Nakoma Road Madison, WI 53711</p>	<p>Name of Employer La Collette & Sinykin</p>	<p>Date (month, day, year) 7/27/96</p>	<p>Amount of Each Receipt This Period \$200.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Attorney Aggregate Year-to-Date \$250.00</p>		
<p>33. Full Name, Mailing Address and Zip Code Kathryn Bowers 4833 Sheboygan Avenue, #324 Madison, WI 53705</p>	<p>Name of Employer n/a</p>	<p>Date (month, day, year) 7/20/96</p>	<p>Amount of Each Receipt This Period \$60.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation retired Aggregate Year-to-Date \$205.00</p>		
<p>34. Full Name, Mailing Address and Zip Code Susan Finnan 1 South Rock Road Madison, WI 53706</p>	<p>Name of Employer University of Wisconsin</p>	<p>Date (month, day, year) 8/16/96</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Professor Aggregate Year-to-Date \$200.00</p>		
<p>35. Full Name, Mailing Address and Zip Code Lois Fisher-Svitavsky 2620 Arbor Drive Madison, WI 53711</p>	<p>Name of Employer n/a</p>	<p>Date (month, day, year) 7/18/96</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation retired Aggregate Year-to-Date \$200.00</p>		

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>700.00</p>
<p>TOTAL This Period (last page this line number only).....</p>	

SCHEDULE A ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 6 OF 17

FOR LINE #11(a)(1)

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)
Soglin for Congress FISC # 000314070

36. Full Name, Mailing Address and Zip Code Michael Fox 503 Panther Trail Monona, WI 53116	Name of Employer Fox & Fox Attorneys at Law	Date (month, day, year) 7/12/96	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$500.00	
37. Full Name, Mailing Address and Zip Code Lemuel Fraser 5741 Eider Place Madison, WI 53705	Name of Employer n/a	Date (month, day, year) 7/9/96	Amount of Each Receipt This Period \$300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$300.00	
38. Full Name, Mailing Address and Zip Code Lemuel Fraser 5741 Eider Place Madison, WI 53705	Name of Employer n/a	Date (month, day, year) 8/20/96	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$300.00	
39. Full Name, Mailing Address and Zip Code Raymond Gilliam 6421 Cloverbrook Road Madison, WI 53762	Name of Employer Meriter Hospital/Park	Date (month, day, year) 8/18/96	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date \$100.00	
40. Full Name, Mailing Address and Zip Code Kenneth Golden 2904 Gregory Street Madison, WI 53711	Name of Employer State of Wisconsin	Date (month, day, year) 7/4/96	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Program Administrator	Aggregate Year-to-Date \$250.00	

SUBTOTAL of Receipts This Page (optional).....	1,100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 9 OF 17

FORM LINE #11(a)(1)

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)

Sejira for Congress FEC # C00314070

<p>41. Full Name, Mailing Address and Zip Code</p> <p>Terry Herndon 5831 Timber Ridge Trail Madison, WI 53705</p>	<p>Name of Employer</p> <p>Wisconsin Education Association</p>	<p>Date (month, day, year)</p> <p>8/7/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$300.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>CEO</p> <p>Aggregate Year-to-Date \$300.00</p>		
<p>42. Full Name, Mailing Address and Zip Code</p> <p>Tom Hirsch 14 N. Prospect Avenue Madison, WI 53705</p>	<p>Name of Employer</p> <p>Rearland Properties, Inc.</p>	<p>Date (month, day, year)</p> <p>8/15/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Architect</p> <p>Aggregate Year-to-Date \$250.00</p>		
<p>43. Full Name, Mailing Address and Zip Code</p> <p>Lynn Hobbie 2213 West Lawn Avenue Madison, WI 53711</p>	<p>Name of Employer</p> <p>MG&E</p>	<p>Date (month, day, year)</p> <p>6/18/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>VP-Marketing</p> <p>Aggregate Year-to-Date \$200.00</p>		
<p>44. Full Name, Mailing Address and Zip Code</p> <p>Robert Hodge 4205 Maiden Crescent Madison, WI 53711</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>7/19/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>retired</p> <p>Aggregate Year-to-Date \$250.00</p>		
<p>45. Full Name, Mailing Address and Zip Code</p> <p>Frances Hurst 3972 Plymouth Circle Madison, WI 53705</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>7/18/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>retired</p> <p>Aggregate Year-to-Date \$350.00</p>		

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>1,150.00</p>
<p>TOTAL This Period (last page this line number only).....</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 10 OF 17

FORM LINE #1(a)(1)

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)
Soglin for Congress POC # C00314070

46. Full Name, Mailing Address and Zip Code David Johnson 5806 Anchorage Avenue Madison, WI 53705	Name of Employer n/a	Date (month, day, year) 7/26/96	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$300.00	
47. Full Name, Mailing Address and Zip Code David Johnson 5806 Anchorage Avenue Madison, WI 53705	Name of Employer n/a	Date (month, day, year) 8/18/96	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$300.00	
48. Full Name, Mailing Address and Zip Code Jana Rose Lopez 2802 Midland Street Madison, WI 53704	Name of Employer Madison Community Foundation	Date (month, day, year) 8/3/96	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Program Director	Aggregate Year-to-Date \$200.00	
49. Full Name, Mailing Address and Zip Code Michael May 1912 West Lawn Avenue Madison, WI 53711	Name of Employer Buhr, Suhr, Curry & Fields	Date (month, day, year) 7/1/96	Amount of Each Receipt This Period \$25.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$300.00	
50. Full Name, Mailing Address and Zip Code Michael May 1912 West Lawn Avenue Madison, WI 53711	Name of Employer Buhr, Suhr, Curry & Fields	Date (month, day, year) 7/31/96	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$300.00	

SUBTOTAL of Receipts This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 11 OF 17

FOR LINE #11(a)(1)

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)
Soglin for Congress FEC # C00014070

51. Full Name, Mailing Address and Zip Code Cassie Neagher 9580 E. Badger Heights Drive Edgerton, WI 53534	Name of Employer Forbes Neagher Music	Date (month, day, year) 8/6/98	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date \$250.00	
52. Full Name, Mailing Address and Zip Code David Mohane 1123 Sunridge Drive Madison, WI 53711	Name of Employer MGAE	Date (month, day, year) 8/19/98	Amount of Each Receipt This Period \$150.00 (specifically attributed to general election)
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Presidential	Aggregate Year-to-Date \$1,150.00	
53. Full Name, Mailing Address and Zip Code George Hesse 36 Glenway Madison, WI 53705	Name of Employer n/a	Date (month, day, year) 7/23/98	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$250.00	
54. Full Name, Mailing Address and Zip Code Judith Munaker 2765 Marilan Road Madison, WI 53711	Name of Employer Dane Co. District Attorney's office	Date (month, day, year) 8/14/98	Amount of Each Receipt This Period \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$310.00	
55. Full Name, Mailing Address and Zip Code Judith Munaker 2765 Marilan Road Madison, WI 53711	Name of Employer Dane Co. District Attorney's office	Date (month, day, year) 8/14/98	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$310.00	

SUBTOTAL of Receipts This Page (optional).....	\$00.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 12 OF 17
FOR LINE #11(a)(1)

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)
Saglin for Congress PRC # C00314070

<p>56. Full Name, Mailing Address and Zip Code Clarice Ostering 106 West Street, #10 Stoughton, WI 53589</p>	<p>Name of Employer n/a</p>	<p>Date (month, day, year) 7/17/98</p>	<p>Amount of Each Receipt This Period \$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation retired</p>	<p>Aggregate Year-to-Date \$300.00</p>	
<p>57. Full Name, Mailing Address and Zip Code Bernard Parslly 750 Dakton Street Evanston, IL 60202</p>	<p>Name of Employer Consulting Planning Development Service</p>	<p>Date (month, day, year) 7/20/98</p>	<p>Amount of Each Receipt This Period \$200.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation President</p>	<p>Aggregate Year-to-Date \$200.00</p>	
<p>58. Full Name, Mailing Address and Zip Code William Pielsticker 8046 Crystal Lake Road Lodi, WI 53055</p>	<p>Name of Employer n/a</p>	<p>Date (month, day, year) 7/15/98</p>	<p>Amount of Each Receipt This Period \$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation student</p>	<p>Aggregate Year-to-Date \$250.00</p>	
<p>59. Full Name, Mailing Address and Zip Code Irving Piliavin 2703 Mason Street Madison, WI 53705</p>	<p>Name of Employer University of Wisconsin</p>	<p>Date (month, day, year) 7/1/98</p>	<p>Amount of Each Receipt This Period \$150.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Professor</p>	<p>Aggregate Year-to-Date \$350.00</p>	
<p>60. Full Name, Mailing Address and Zip Code Robert Piliavin 75 Rockefeller Plaza New York, NY 10019</p>	<p>Name of Employer Century 21</p>	<p>Date (month, day, year) 7/18/98</p>	<p>Amount of Each Receipt This Period \$1,000.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation Realtor</p>	<p>Aggregate Year-to-Date \$1,000.00</p>	

<p>SUMTOTAL of Receipts This Page (optional).....</p>	<p>1,700.00</p>
<p>TOTAL this Period (last page this line number only).....</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 13 OF 17

FOR FINE #11(a)(1)

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)
Soglin for Congress FEC # C00214070

61. Full Name, Mailing Address and Zip Code	Name of Employer City of Madison	Date (month, day, year)	Amount of Each Receipt This Period
E. Jane Richardson 1925 Regent Street Madison, WI 53705		7/2/96	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Mayoral Assistant	Aggregate Year-to-Date \$200.00	
62. Full Name, Mailing Address and Zip Code	Name of Employer Habush, Babush, Davis & Rottler, SC	Date (month, day, year)	Amount of Each Receipt This Period
Daniel Rottler 150 E. Gilman Street Madison, WI 53701		7/10/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date \$500.00	
63. Full Name, Mailing Address and Zip Code	Name of Employer University of Wisconsin	Date (month, day, year)	Amount of Each Receipt This Period
Joseph Salmons 3425 Dawson Street Madison, WI 53714		7/8/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date \$500.00	
64. Full Name, Mailing Address and Zip Code	Name of Employer Madison Metro. School District	Date (month, day, year)	Amount of Each Receipt This Period
Dana Schreiber 1330 E. Wilson Madison, WI 53703		7/1/96	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date \$300.00	
65. Full Name, Mailing Address and Zip Code	Name of Employer Madison Metro. School District	Date (month, day, year)	Amount of Each Receipt This Period
Dana Schreiber 1330 E. Wilson Street Madison, WI 53703		8/14/96	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Teacher	Aggregate Year-to-Date \$300.00	

SUBTOTAL of Receipts This Page (optional).....	1,400.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 14 OF 17

FOR LINE #11(a)(1)

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)
Soglin for Congress FEC # C00314070

66. Full Name, Mailing Address and Zip Code Marjorie Shepherd 300 Glen Thistle Court Madison, WI 53705	Name of Employer n/a	Date (month, day, year) 8/15/96	Amount of Each Receipt This Period \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired Aggregate Year-to-Date \$200.00		
67. Full Name, Mailing Address and Zip Code James Shropshire 3719 Tonyawatha Trail Monona, WI 53716	Name of Employer Physicians Plus	Date (month, day, year) 8/7/96	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician Aggregate Year-to-Date \$300.00		
68. Full Name, Mailing Address and Zip Code Andrew Stbler 1815 Summit Avenue Madison, WI 53705	Name of Employer University of Wisconsin	Date (month, day, year) 7/3/98	Amount of Each Receipt This Period \$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor Aggregate Year-to-Date \$200.00		
69. Full Name, Mailing Address and Zip Code David Smith 814 Prospect Place Madison, WI 53703	Name of Employer Four Star Video	Date (month, day, year) 8/14/96	Amount of Each Receipt This Period \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner Aggregate Year-to-Date \$250.00		
70. Full Name, Mailing Address and Zip Code Deborah Soglin 757 De Sole Drive Palo Alto, CA 94303	Name of Employer	Date (month, day, year) 8/4/98	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date \$500.00		

SUBTOTAL of Receipts This Page (optional).....	1,100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 15 OF 17

FOR LINE #11(a)(1)

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)
Soglin for Congress POC # C00314070

71. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rose Soglin 345 N. Ontario Road Santa Barbara, CA 93105	Chancellor Books	7/20/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Co-owner	Aggregate Year-to-Date \$500.00	
72. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Martin Steinberg 345 N. Ontario Road Santa Barbara, CA 93105	University of California	8/2/96	\$800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Professor	Aggregate Year-to-Date \$800.00	
73. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mary Louise Syson 5459 Weaver Road Spring Green, WI 53588	n/a	7/30/96	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation retired	Aggregate Year-to-Date \$500.00	
74. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arnold Tobin 830 Kimballwood Lane Highland Park, IL 60035	self-employed	7/6/96	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation physician	Aggregate Year-to-Date \$200.00	
75. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Motra Ulrich 2717 Mason Street Madison, WI 53706	Self-employed	7/22/96	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Writer	Aggregate Year-to-Date \$225.00	

SUBTOTAL of Receipts This Page (optional).....	2,100.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 16 OF 17

FOR LINE #11(a)(1)

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)
Soglin for Congress FEC # C00314070

<p>76. Full Name, Mailing Address and Zip Code</p> <p>Jewel Vandevender 1831 Van Hise Avenue Madison, WI 53703</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p> <p>7/1/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Aggregate Year-to-Date \$200.00</p>		
<p>77. Full Name, Mailing Address and Zip Code</p> <p>Paula Voos 2710 Willard Madison, WI 53704</p>	<p>Name of Employer</p> <p>University of Wisconsin</p>	<p>Date (month, day, year)</p> <p>8/19/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Professor</p> <p>Aggregate Year-to-Date \$300.00</p>		
<p>78. Full Name, Mailing Address and Zip Code</p> <p>Rebecca Young 639 Crandall Street Madison, WI 53711</p>	<p>Name of Employer</p> <p>Wisconsin State Capitol</p>	<p>Date (month, day, year)</p> <p>7/4/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$75.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>State Representative</p> <p>Aggregate Year-to-Date \$450.00</p>		
<p>79. Full Name, Mailing Address and Zip Code</p> <p>Rebecca Young 639 Crandall Street Madison, WI 53711</p>	<p>Name of Employer</p> <p>Wisconsin State Capitol</p>	<p>Date (month, day, year)</p> <p>8/12/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>State Representative</p> <p>Aggregate Year-to-Date \$450.00</p>		
<p>80. Full Name, Mailing Address and Zip Code</p> <p>James Youngerman 222 S. Hamilton Street Madison, WI 53703</p>	<p>Name of Employer</p>	<p>Date (month, day, year)</p> <p>7/11/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>Attorney</p> <p>Aggregate Year-to-Date \$250.00</p>		

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>775.00</p>
<p>TOTAL This Period (last page this line number only).....</p>	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 17 OF 17

FOR LINE 811(a)(1)

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 (Is Full)

Senate for Congress POC # C03314070

81. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael Zimbrick 2912 Jonathan Circle Madison, WI 53711	Zimbrick, Inc.	8/8/96	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date \$250.00	

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

250.00

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

22,711.15

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 1 OF 1

FOR LINE #11(b)

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)
Solicit for Congress DEC # C00314070

1. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Democratic Congressional Campaign Committee 430 N. Capitol Street Washington, DC 20003 Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	n/a Occupation n/a Aggregate Year-to-Date \$630.00	7/2/98	\$300.00 (18-Bind workbooks, etc.)

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	300.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 2

FORM LINE #11(c)

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)
Soglin for Congress FEC # C00314074

1. Full Name, Mailing Address and Zip Code Bricklayers and Allied Craftsmen 815 Fifteenth Street, NW Washington, DC 20005	Name of Employer n/a	Date (month, day, year) 7/1/96	Amount of Each Receipt This Period \$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a	Aggregate Year-to-Date \$500.00	
2. Full Name, Mailing Address and Zip Code CWA COPE PCC 501 3rd Street, NW Washington, DC 20001	Name of Employer n/a	Date (month, day, year) 7/15/96	Amount of Each Receipt This Period \$5,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a	Aggregate Year-to-Date \$5,000.00	
3. Full Name, Mailing Address and Zip Code Engineers Political Education Committee 1125 Seventeenth Street, NW Washington, DC 20036	Name of Employer n/a	Date (month, day, year) 8/13/96	Amount of Each Receipt This Period \$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a	Aggregate Year-to-Date \$1,500.00	
4. Full Name, Mailing Address and Zip Code The Flakboiner Committee PO Box 1048 Yaleo, OH 43697	Name of Employer n/a	Date (month, day, year) 7/11/96	Amount of Each Receipt This Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a	Aggregate Year-to-Date \$100.00	
5. Full Name, Mailing Address and Zip Code Friends for Santiago Rosas Campaign Account 1321 Elmwood Drive Madison, WI 53714	Name of Employer n/a	Date (month, day, year) 7/29/96	Amount of Each Receipt This Period \$50.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation n/a	Aggregate Year-to-Date \$50.00	

SUMMARY of Receipts This Page (optional)

7,150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 2 OF 2

FOR LINE #11(c)

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)
Sogliu For Congress FEC # C00314070

<p>6. Full Name, Mailing Address and Zip Code</p> <p>The Friends of Beverly Hills 4324 Sprecher Road Madison, WI 53704</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>8/30/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>n/a</p>	<p>Aggregate Year-to-Date \$100.00</p>	
<p>7. Full Name, Mailing Address and Zip Code</p> <p>International Association of Fire Fighters 1750 New York Avenue, NW Washington, DC 20006</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>7/25/96</p>	<p>Amount of Each Receipt This Period</p> <p>\$1,600.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>n/a</p>	<p>Aggregate Year-to-Date \$1,600.00</p>	
<p>8. Full Name, Mailing Address and Zip Code</p> <p>SWEA Educators Direct Giver Enterprise 960 N. Washington Street, PO Box 722 Platteville, WI 53818</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt This Period</p> <p>\$20.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>n/a</p>	<p>Aggregate Year-to-Date \$20.00</p>	

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>1,120.00</p>
<p>TOTAL This Period (last page this line number only).....</p>	<p>8,270.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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)
Soglin for Congress HEC # C00314070

<p>1. Full Name, Mailing Address and Zip Code</p> <p>Federal Election Commission Information Access Center 999 E Street, NW Washington, DC 20463</p>	<p>Name of Employer</p> <p>n/a</p>	<p>Date (month, day, year)</p> <p>8/18/98</p>	<p>Amount of Each Receipt This Period</p> <p>100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Occupation</p> <p>n/a</p>	<p>(return of check dated 4/10/95)</p> <p>Aggregate Year-to-Date \$ 100.00</p>	

SUBTOTAL of Receipts This Page (optional).....	100.00
TOTAL This Period (last page this line number only).....	100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules
for each category of the
Detailed Summary Page

PAGE 1 OF 9

FORM LINE #17

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)
Soglin for Congress FEC# C00014870

1. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Democratic Congressional Campaign Committee 430 S. Capitol Street Washington, DC 20003	research materials Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/2/96	\$300.00 In-Kind
2. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Advertising Creations 2618 Industrial Drive Madison, WI 53713	bumperstickers Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/1/96	\$950.06
3. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Aisco Hambleton 7701 Radcliffe Drive Madison, WI 53719	salary Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/1/96	\$1,324.50
4. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Nancy McCarthy 222 S. Carroll Street Madison, WI 53703	salary Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/1/96	\$1,877.00
5. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
The Sinsheimer Group 516 1/2 W. Lane Street Raleigh, NC 27603	consultation Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/1/96	\$3,000.00
6. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
M&I Bank PO Box 8998 Madison, WI 53708	service fee Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/2/96	\$13.75
7. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Investment Realty 3900 Regent Street Madison, WI 53705	monthly rent Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/3/96	\$1,250.00

SUBTOTAL of Disbursements This Page (optional).....	8,717.81
TOTAL This Period (last page this line number only).....	

SCHEDULE B

ITEMIZED DISBURSMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 2 OF 9
FOR LINE #17

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)
Sukler for Congress FEC# C00314070

7. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Almae Hamilton 7701 Radcliffe Drive Madison, WI 53719	reimbursement for office supplies, postage & photo finishing	7/5/96	\$267.33
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
8. Full Name, Mailing Address and Zip Code American of Madison 2404 W. Bellvue Highway Madison, WI 53713	Purpose of Disbursement computer lease	7/5/96	\$275.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
10. Full Name, Mailing Address and Zip Code Americitech PO Box 84000 Columbus, OH 43284	Purpose of Disbursement phone bill	7/5/96	\$129.78
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
11. Full Name, Mailing Address and Zip Code Argyle Agenda PO Box Drawer F Argyle, WI 53504	Purpose of Disbursement subscription	7/5/96	\$11.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
12. Full Name, Mailing Address and Zip Code ATAT PO Box 27-886 Kansas City, MO 64184	Purpose of Disbursement phone bill	7/5/96	\$782.90
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
13. Full Name, Mailing Address and Zip Code Rickman Brown 1350 Connecticut Ave., Suite 208 Washington, DC 20036	Purpose of Disbursement poll - survey	7/5/96	\$12,000.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
14. Full Name, Mailing Address and Zip Code Insty-Prints 3553 University Avenue Madison, WI 53705	Purpose of Disbursement photocopying	7/5/96	\$101.78
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional).....	13,866.80
TOTAL This Period (last page (this line number only)).....	

SCHEDULE B

ITEMIZED DISBURSMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 9

FOR LINE #17

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)
Soglin for Congress FEC# C00014070

15. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Ken Fitch 2002 Fenwall Circle Fitchburg, WI 53711	consultation	7/5/96	\$2,000.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Lited Printing 321 E. Main Street Madison, WI 53703	printing	7/5/96	\$244.76
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Paul Soglin 222 Princeton Avenue Madison, WI 53705	reimbursement for meals, gas & hotel	7/5/96	\$152.10
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Paul Uebelhor 341 Riverside Drive Madison, WI 53704	salary	7/5/96	\$2,204.60
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Susan Bonfield Herschowitz 1741 Lanier Place, NW, Ste 24 Washington, DC 20009	consultation	7/5/96	\$1,240.44
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
The Atwood Community Center 2426 Atwood Avenue Madison, WI 53704	fee for table at Atwood Summerfest	7/5/96	630.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
University of Wisconsin 1210 W. Dayton Street Madison, WI 53706	computer assistance	7/6/96	66.56
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional).....	5,878.55
TOTAL This Period (last page this line number only).....	

SCHEDULE B

ITEMIZED DISBURSMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 5

FORM LINE #17

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)
Soglin for Congress C-PC# C09314070

22. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Wells Print & Digital PO Box 1744 Madison, WI 53701	printing Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/5/96	\$826.07
23. Full Name, Mailing Address and Zip Code Investment Realty 3800 Regent Street Madison, WI 53705	Purpose of Disbursement balance of rent for June and July Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/9/96	\$1,000.00
24. Full Name, Mailing Address and Zip Code Paul Soglin 222 Princeton Avenue Madison, WI 53705	Purpose of Disbursement reimbursement for Washington, DC trip & phone expenses Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/12/96	\$763.33
25. Full Name, Mailing Address and Zip Code Kinko's 3908 E. Washington Avenue Madison, WI 53704	Purpose of Disbursement photocopying Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/14/96	\$11.68
26. Full Name, Mailing Address and Zip Code MGE PO Box 1231 Madison, WI 53701	Purpose of Disbursement utility bill Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/15/96	\$70.20
27. Full Name, Mailing Address and Zip Code Norix Weiss PO Box 15415 Washington, DC 20003	Purpose of Disbursement consultation Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/15/96	\$2,500.00
28. Full Name, Mailing Address and Zip Code Renaissance Cleveland Hotel 24 Public Square Cleveland, OH 44113	Purpose of Disbursement hall rental and catering Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/15/96	\$504.00

SUBTOTAL of Disbursements This Page (optional)	5,675.31
TOTAL This Period (last page this line number only)	

SCHEDULE B ITEMIZED DISBURSMENTS

Use separate schedules for each category of the Detailed Summary Page	PAGE 3 OF 9
	FOR LINE #17

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)
Soglis for Congress VEC# C00314070

29. Full Name, Mailing Address and Zip Code Republican Journal 316 Main Street, PO Box 20 Darlington, WI 53530	Purpose of Disbursement subscription	Date (month, day, year) 7/15/98	Amount of Each Receipt This Period \$8.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
30. Full Name, Mailing Address and Zip Code MSI Bank PO Box 8998 Madison, WI 53708	Purpose of Disbursement service fee	Date (month, day, year) 7/17/98	Amount of Each Receipt This Period \$3.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
31. Full Name, Mailing Address and Zip Code Aimee Hamilton 7701 Radcliffe Drive Madison, WI 53719	Purpose of Disbursement reimbursement for postage, photocopying & office supplies	Date (month, day, year) 7/19/98	Amount of Each Receipt This Period \$287.37
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
32. Full Name, Mailing Address and Zip Code Felina 8304 W. Parkland Court Milwaukee, WI 53223	Purpose of Disbursement mail sorting	Date (month, day, year) 7/19/98	Amount of Each Receipt This Period \$10.50
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
33. Full Name, Mailing Address and Zip Code University of Wisconsin 1210 W. Dayton Street Madison, WI 53706	Purpose of Disbursement computer assistance	Date (month, day, year) 7/19/98	Amount of Each Receipt This Period \$25.90
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
34. Full Name, Mailing Address and Zip Code Paul Hebelhor 141 Riverside Drive Madison, WI 53704	Purpose of Disbursement reimbursement for copying, postage & food for volunteers	Date (month, day, year) 7/23/98	Amount of Each Receipt This Period \$918.04
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
35. Full Name, Mailing Address and Zip Code America On-Line 8019 Westwood Center Drive Vienna, VA 22182	Purpose of Disbursement internet service	Date (month, day, year) 7/24/98	Amount of Each Receipt This Period \$73.78
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional).....	726.57
TOTAL This Period (last page this line number only).....	

SCHEDULE D

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 6 OF 9

FOR LINE #17

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 (is Full)
Soglin for Congress PECA 00014670

36. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
The Sinshelmer Group 616 1/2 W. Lane Street Raleigh, NC 27603	consultation	7/24/96	\$4,134.88
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Aimee Hambleton 7701 Radcliffe Drive Madison, WI 53719	reimbursement for postage, photocopying & office supplies	7/29/96	\$396.27
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
38. Full Name, Mailing Address and Zip Code Global Dialog Internet 6135 Duff Drive Madison, WI 53704	Purpose of Disbursement Internet services	7/29/96	\$273.38
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
39. Full Name, Mailing Address and Zip Code Investment Realty 3800 Regent Street Madison, WI 53705	Purpose of Disbursement rent	7/29/96	\$1,750.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
40. Full Name, Mailing Address and Zip Code Wells Print & Digital PO Box 1744 Madison, WI 53701	Purpose of Disbursement printing	7/29/96	\$1,095.10
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
41. Full Name, Mailing Address and Zip Code Aimee Hambleton 7701 Radcliffe Drive Madison, WI 53719	Purpose of Disbursement salary	8/1/96	\$1,324.50
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
42. Full Name, Mailing Address and Zip Code Aimee Hambleton 7701 Radcliffe Drive Madison, WI 53719	Purpose of Disbursement health insurance	8/1/96	\$192.58
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional).....	9,164.71
TOTAL This Period (last page this line number only).....	

SCHEDULE B ITEMIZED DISBURSMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 7 OF 9

FOR LINE #17

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)
 Soglin for Congress PROF 000314078

43. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Connie Richard 230 N. Meadows Lane Madison, WI 53705	salary	8/1/96	\$551.87
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
44. Full Name, Mailing Address and Zip Code Independent Insurance 2984 Triverton Pike Drive Madison, WI 53711	Purpose of Disbursement worker's compensation insurance	8/1/96	\$406.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
45. Full Name, Mailing Address and Zip Code Insty-Prints 3553 University Avenue Madison, WI 53705	Purpose of Disbursement photocopying	8/1/96	\$609.78
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
46. Full Name, Mailing Address and Zip Code IRS Kansas City, Mo 64999	Purpose of Disbursement federal tax withholding	8/1/96	\$2,112.20
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
47. Full Name, Mailing Address and Zip Code Kent Fitch 2682 Penwell Circle Pitchburg, WI 53711	Purpose of Disbursement consultation	8/1/96	\$2,500.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
48. Full Name, Mailing Address and Zip Code Nancy McCarthy 222 S. Carroll Street Madison, WI 53703	Purpose of Disbursement final salary	8/1/96	\$1,457.92
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
49. Full Name, Mailing Address and Zip Code Noris Weiss PO Box 15418 Washington, DC 20003	Purpose of Disbursement consultation	8/1/96	\$2,500.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional).....	10,106.77
TOTAL This Period (last page this line number only).....	

SCHEDULE B ITEMIZED DISBURSMENTS

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)
Soglin for Congress PFC# 000314070

50. Full Name, Mailing Address and Zip Code Paul Soglin 222 Princeton Avenue Madison, WI 53705	Purpose of Disbursement reimbursement for gas & food expenses	Date (month, day, year) 8/1/96	Amount of Each Receipt This Period \$54.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
51. Full Name, Mailing Address and Zip Code PAUL Gebelher 341 Riverside Drive Madison, WI 53704	Purpose of Disbursement salary	Date (month, day, year) 8/1/96	Amount of Each Receipt This Period \$2,204.60
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
52. Full Name, Mailing Address and Zip Code The Accountability Group 5002 Sheboygan Avenue, #203 Madison, WI 53705	Purpose of Disbursement research	Date (month, day, year) 8/1/96	Amount of Each Receipt This Period \$713.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
53. Full Name, Mailing Address and Zip Code WI Dept. of Revenue 4638 University Avenue Madison, WI 53705	Purpose of Disbursement state tax withholding	Date (month, day, year) 8/1/96	Amount of Each Receipt This Period \$448.80
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
54. Full Name, Mailing Address and Zip Code M&I Bank PO Box 8998 Madison, WI 53708	Purpose of Disbursement wire transfer fee	Date (month, day, year) 8/8/96	Amount of Each Receipt This Period \$15.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
55. Full Name, Mailing Address and Zip Code The Campaign Group Media Account 1600 Locust Street Philadelphia, PA 19103	Purpose of Disbursement advance for media buys	Date (month, day, year) 8/8/96	Amount of Each Receipt This Period \$20,000.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
56. Full Name, Mailing Address and Zip Code Paul Soglin 222 Princeton Avenue Madison, WI 53705	Purpose of Disbursement reimbursement for phone expenses	Date (month, day, year) 8/9/96	Amount of Each Receipt This Period \$393.30
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

SUBTOTAL of Disbursements This Page (optional).....	23,738.70
TOTAL This Period (last page this line number only).....	

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 9 OF 9

FOR LINE #17

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)
Soglin for Congress FEC# C00314070

57. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Receipt This Period
Paul Ueblicher 341 Riverside Drive Madison, WI 53704	reimbursement for postage	8/13/96	\$2,310.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
58. Full Name, Mailing Address and Zip Code Ameritech PO Box 84000 Columbus, OH 43284	Purpose of Disbursement phone bill	8/18/96	\$619.08
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
59. Full Name, Mailing Address and Zip Code AT&T PO Box 27-806 Kansas City, MO 64184	Purpose of Disbursement phone bill	8/18/96	\$852.02
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
60. Full Name, Mailing Address and Zip Code JUNE Lopez 2802 Moland Madison, WI 53704	Purpose of Disbursement reimbursement for food expenses for fundraiser	8/18/96	\$184.90
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
61. Full Name, Mailing Address and Zip Code Littell Printing 321 E. Main Street Madison, WI 53703	Purpose of Disbursement Printing	8/18/96	\$344.00
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
62. Full Name, Mailing Address and Zip Code Wells Print & Digital PO Box 1744 Madison, WI 53701	Purpose of Disbursement printing	8/18/96	\$1,586.71
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
63. Full Name, Mailing Address and Zip Code MG&F PO Box 1231 Madison, WI 53701	Purpose of Disbursement utility bill	8/20/96	\$95.53
	Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		

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

6,023.23

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

83,898.45

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

PAGE 1 OF 1 FOR LINE #10
(Use separate schedules for each numbered line)

NAME OF COMMITTEE (If Full) Saglin for Congress PDC #000314070	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
--	---	-----------------------------	---------------------	---

1. Full Name, Mailing Address and Zip Code Investment Realty 3533 University Avenue Madison, WI 53705	500.00	0	500.00	0
Nature of Debt (Purpose): Balance of June rent				
2. Full Name, Mailing Address and Zip Code Hickman Brown 1350 Connecticut Ave, NW Washington, DC 20036	12,000.00	0	12,000.00	0
Nature of Debt (Purpose): poll/survey				
3. Full Name, Mailing Address and Zip Code Paul Uebelhoer 341 Riverside Drive Madison, WI 53704	0	2,911.15	0	2,911.15
Nature of Debt (Purpose): reimbursement for costs of newspaper ad and postage				

1) SUBTOTALS This Period This Page (optional)	2,911.15
2) TOTALS This Period (last page this line only)	2,911.15
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	2,911.15

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 8/26/96
<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
<i>JMN</i>	8/30/96
PREPARER	DATE PREPARED