

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

DEC 22 11 51 AM '97

1. NAME OF COMMITTEE (In full) Darden Restaurants, Inc. Employees Good Government Fund	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 5900 Lake Eleanor Drive	2. FEC IDENTIFICATION NUMBER C00100282
CITY, STATE and ZIP CODE Orlando, FL 32809	3. <input checked="" type="checkbox"/> This committee has qualified as a multi-candidate committee. (See FEC FORM 1M)

## 4. TYPE OF REPORT

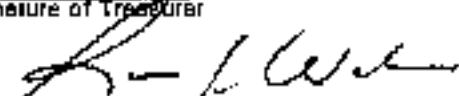
(a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

Monthly Report Due On:  
 February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31

Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_  
in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/01/97</u> through <u>11/30/97</u>		
6. (a) Cash on Hand January 1, 19 <u>97</u>		\$ 35,373.02
(b) Cash on Hand at Beginning of Reporting Period	\$ 50,534.20	
(c) Total Receipts (from line 19)	\$ 5,253.64	\$ 49,649.82
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 55,787.84	\$ 85,022.84
7. Total Disbursements (from Line 30)	\$ 1,000.00	\$ 30,235.00
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 8(d))	\$ 54,787.84	\$ 54,787.84
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	
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 Richard J. Walsh		
Signature of Treasurer 		Date 12/17/97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

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FEC FORM 3X

(Revised 9/93)

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised 11/1/91

NAME OF COMMITTEE <b>Darden Restaurants, Inc. Employees Good Government Fund</b>	REPORT COVERING PERIOD	
	FROM: <b>11/01/97</b>	TO: <b>11/30/97</b>
I. 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).....	885.00	3,704.00
ii. Unitemized.....	4,334.32	45,607.90
iii. Total.....(add i and ii)>	5,219.32	49,311.90
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions.....(add aiii,b and c)>	5,219.32	49,311.90
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	34.32	337.92
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts.....(add 11d,12,13,14,15,16,17,and 18)>	5,253.64	49,649.82
20. Total Federal Receipts.....(subtract line 18 from line 19)>	5,253.64	49,649.82
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	0.00	0.00
b. Other Federal Operating Expenditures.....	0.00	0.00
c. Total Operating Expenditures.....(Add a,i, and b)>	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1,000.00	30,000.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a(f)) (Use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees.....	0.00	0.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds.....(Add a,b, and c)>	0.00	0.00
29. Other Disbursements.....	0.00	235.00
30. Total Disbursements.....(Add 21c,22,23,24,25,26,27,28d, and 29)>	1,000.00	30,235.00
31. Total Federal Disbursements.....(Subtract line 21 all from line 30)>	1,000.00	30,235.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11d).....	5,219.32	49,311.90
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	5,219.32	49,311.90
35. Total Federal Operating Expenditures.....(add 21 a) and 21 b)>	0.00	0.00
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures.....(subtract line 36 from 35)>	0.00	0.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In full)  
**Darden Restaurants, Inc. Employees Good Government Fund**

A. Full Name, Mailing Address and Zip Code <b>STEWART KERCHNER</b> <b>25 SKYLINE DR</b> <b>MECHANICSBURG, PA 17055</b>	Name of Employer <b>Red Lobster</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>DIR OF OPS</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
B. Full Name, Mailing Address and Zip Code <b>KRISTIN SCHEUERMAN</b> <b>2337 GREENBUSH</b> <b>SAGINAW, MI 48603</b>	Name of Employer <b>Red Lobster</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>GEN MGR</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
C. Full Name, Mailing Address and Zip Code <b>ELEANOR HILL</b> <b>102 S INTERLACHEN AV</b> <b>WINTER PARK, FL 32789</b>	Name of Employer <b>Red Lobster</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>VP EMP/TRN/DEV</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
D. Full Name, Mailing Address and Zip Code <b>NORMAN MOLLERUP</b> <b>3153 PENWA CT</b> <b>LONGWOOD, FL 32779</b>	Name of Employer <b>Red Lobster</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>VP OPS ANA CTR</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
E. Full Name, Mailing Address and Zip Code <b>WILLIAM AHO</b> <b>8532 SUMMERVILLE PL</b> <b>ORLANDO, FL 32819</b>	Name of Employer <b>Red Lobster</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  80.00 (\$20.00 Weekly)
	Occupation <b>SR VP STRA PLN</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>960.00</b>		
F. Full Name, Mailing Address and Zip Code <b>BARRY GORDON</b> <b>14 MINORI</b> <b>LAGUNA NIGUEL, CA 92677</b>	Name of Employer <b>Red Lobster</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  20.00 (\$5.00 Weekly)
	Occupation <b>SVP L.A. DIV</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>235.00</b>		
G. Full Name, Mailing Address and Zip Code <b>WYMAN ROBERTS</b> <b>3853 WATERCREST DR</b> <b>LONGWOOD, FL 32779</b>	Name of Employer <b>Red Lobster</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>EVP MKTG</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		

SUB TOTAL of Receipts This Page (Optional).....>	<b>225.00</b>
TOTAL this Period (Last page this line number only).....>	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 2 OF 4  
FOR LINE NUMBER 11 a f

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in full)  
Darden Restaurants, Inc. Employees Good Government Fund

A. Full Name, Mailing Address and Zip Code <b>BRAD BLUM</b> <b>5900 LK ELLENOR DR</b> <b>ORLANDO, FL 32809</b>	Name of Employer <b>The Olive Garden</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period  100.00 (\$20.00 Weekly)
	Occupation <b>PRES OG, N. A.</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>300.00</b>		
B. Full Name, Mailing Address and Zip Code <b>LINDA SAMPERI</b> <b>4011 WELLINGSHIRE</b> <b>DALLAS, TX 75220</b>	Name of Employer <b>The Olive Garden</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>SVP OPS DAL DV</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
C. Full Name, Mailing Address and Zip Code <b>GREGORY MACISAAC</b> <b>6725 E LEAFWOOD DR</b> <b>ANAHEIM, CA 92807</b>	Name of Employer <b>The Olive Garden</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>SVP OPS LA DV</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
D. Full Name, Mailing Address and Zip Code <b>CLAYTON MIDBOE</b> <b>3545 OWASSO STREET</b> <b>SHOREVIEW, MN 55126</b>	Name of Employer <b>The Olive Garden</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>CULINARY MGR</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
E. Full Name, Mailing Address and Zip Code <b>LETITIA LOCKARD</b> <b>6199 E BROADWAY</b> <b>TUCSON, AZ 85741</b>	Name of Employer <b>The Olive Garden</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period  25.00 (\$5.00 Weekly)
	Occupation <b>SALES MANAGER</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>245.00</b>		
F. Full Name, Mailing Address and Zip Code <b>MARK JONES</b> <b>926 CHOKECHERRY CT</b> <b>WINTER SPRING, FL 32708</b>	Name of Employer <b>Darden Restaurants, Inc.</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period  50.00 (\$10.00 Weekly)
	Occupation <b>VP RL EST/MKTD</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>490.00</b>		
G. Full Name, Mailing Address and Zip Code <b>JOE LEE</b> <b>7550 HINSON</b> <b>ORLANDO, FL 32809</b>	Name of Employer <b>Darden Restaurants, Inc.</b>	Date (Month day, Year) Payroll	Amount of Each Receipt this Period  100.00 (\$20.00 Weekly)
	Occupation <b>CHMN, CEO</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>980.00</b>		

SUB TOTAL of receipts This Page (Optional) ..... **350.00**

TOTAL this Period (Last page this line number only) .....

**SCHEDULE A ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In full)  
**Darden Restaurants, Inc. Employees Good Government Fund**

<p>A. Full Name, Mailing Address and Zip Code <b>KENNETH FOWLE</b> <b>603 WATER OAK LANE</b> <b>LONGWOOD, FL 32779</b></p>	<p>Name of Employer <b>Darden Restaurants, Inc.</b></p> <p>Occupation <b>VP MK DEV/IA</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>25.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>245.00</b></p>		<p><b>(\$5.00 Weekly)</b></p>
<p>B. Full Name, Mailing Address and Zip Code <b>WALTER MONROE</b> <b>2241 LK CRESCENT CT</b> <b>WINDERMERE, FL 34786</b></p>	<p>Name of Employer <b>Darden Restaurants, Inc.</b></p> <p>Occupation <b>VP ENVIR REL</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>25.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>245.00</b></p>		<p><b>(\$5.00 Weekly)</b></p>
<p>C. Full Name, Mailing Address and Zip Code <b>DANIEL LYONS</b> <b>2152 ALAQUA DR</b> <b>LONGWOOD, FL 32779</b></p>	<p>Name of Employer <b>Darden Restaurants, Inc.</b></p> <p>Occupation <b>SR VP PERSONNL</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>25.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>245.00</b></p>		<p><b>(\$5.00 Weekly)</b></p>
<p>D. Full Name, Mailing Address and Zip Code <b>RICK VAN WARNER</b> <b>620 PINETREE ROAD</b> <b>WINTER PARK, FL 32789</b></p>	<p>Name of Employer <b>Darden Restaurants, Inc.</b></p> <p>Occupation <b>VP MEDIA/COMM</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>40.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>384.00</b></p>		<p><b>(\$8.00 Weekly)</b></p>
<p>E. Full Name, Mailing Address and Zip Code <b>RICHARD WALSH</b> <b>2401 NORFOLK RD</b> <b>ORLANDO, FL 32803</b></p>	<p>Name of Employer <b>Darden Restaurants, Inc.</b></p> <p>Occupation <b>SR VP CORP REL</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>100.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>630.00</b></p>		<p><b>(\$20.00 Weekly)</b></p>
<p>F. Full Name, Mailing Address and Zip Code <b>BLAINE SWEATT III</b> <b>9140 POINT CYPRESS D</b> <b>ORLANDO, FL 32836</b></p>	<p>Name of Employer <b>New Business</b></p> <p>Occupation <b>PRES NEW BUS</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>50.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>490.00</b></p>		<p><b>(\$10.00 Weekly)</b></p>
<p>G. Full Name, Mailing Address and Zip Code <b>ELOY RODRIGUEZ</b> <b>3802 CARAVALLE PKWY</b> <b>CORPUS CHRSTI, TX 78415</b></p>	<p>Name of Employer <b>The Olive Garden</b></p> <p>Occupation <b>GEN MGR</b></p>	<p>Date (Month day, Year)</p> <p><b>Payroll</b></p> <p><b>Deduction</b></p>	<p>Amount of Each Receipt this Period</p> <p><b>15.00</b></p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Aggregate Year-to-date &gt; \$ <b>215.00</b></p>		<p><b>(\$5.00 Weekly)</b></p>

SUB TOTAL of Receipts This Page (Optional).....> **280.00**

TOTAL this Period (Last page this line number only).....>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)  
**Darden Restaurants, Inc. Employees Good Government Fund**

A. Full Name, Mailing Address and Zip Code <b>TERRI DEAN</b> <b>7344 BLACK OAK WAY</b> <b>CITRUS HGHS, CA 95621</b>	Name of Employer <b>The Olive Garden</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  <b>15.00</b>
	Occupation <b>SVC MGR</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>215.00</b>		(\$5.00 Weekly)
B. Full Name, Mailing Address and Zip Code <b>ROGER CHAPIN</b> <b>974 B E MICHIGAN ST</b> <b>ORLANDO, FL 32806</b>	Name of Employer <b>Darden Restaurants, Inc.</b>	Date (Month day, Year)  Payroll	Amount of Each Receipt this Period  <b>15.00</b>
	Occupation <b>DIR GOVT REL</b>	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ <b>215.00</b>		(\$5.00 Weekly)
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	Deduction	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	<b>30.00</b>
TOTAL this Period (Last page this line number only).....>	<b>885.00</b>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in full)  
**Darden Restaurants, Inc. Employees Good Government Fund**

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
<b>SunBank Orlando, FL</b>		<b>11/30/97</b>	<b>34.32</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$		<b>337.92</b>	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$			
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$			
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$			
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$			
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$			
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$			

SUB TOTAL of Receipts This Page (Optional).....>	<b>34.32</b>
TOTAL this Period (Last page this line number only).....>	<b>34.32</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE	OF
1	1
FOR LINE NUMBER	
23	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)  
**Darden Restaurants, Inc. Employee Good Government Fund**

A. Full Name, Mailing Address and Zip Code <b>John Mica for Congress</b> <b>P.O. Box 181546</b> <b>Casselberry, FL 32718</b>	Purpose of Disbursement <b>John Mica, U.S. HOUSE 7th FL</b>  Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	Date (Month day, Year) <b>11/21/97</b>	Amount of Each Disb. this Period <b>500.00</b>
B. Full Name, Mailing Address and Zip Code <b>Friends of Clay Shaw</b> <b>2929 E. Commercial Blvd.</b> <b>Suite 409</b> <b>Ft. Lauderdale, FL 33308</b>	Purpose of Disbursement <b>Clay Shaw, U.S. HOUSE 22nd FL</b>  Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	Date (Month day, Year) <b>11/10/97</b>	Amount of Each Disb. this Period <b>500.00</b>
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period


SUB TOTAL of Disbursements this page (Optional).....>	<b>1,000.00</b>
TOTAL this Period (Last page this line number only).....>	<b>1,000.00</b>



Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>12-22-97</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	<i>12-22-97</i> DATE PREPARED