

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

AUG 6 12 50 PM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) BERG SERVICE FOR CONGRESS		2. FEC IDENTIFICATION NUMBER C00326934
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. P.O. BOX 293		
CITY, STATE and ZIP CODE DECATUR, IL 62523	STATE/DISTRICT IL/19	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

- April 15 Quarterly Report 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- July 15 Quarterly Report 30-Day Post-Election Report for the _____ (Type of Election) election on _____ in the State of _____
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid-Year Report (Non-election Year Only) 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>1-1-97</u> through <u>6-30-97</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	24 232.72	24 232.72
(b) Total Contribution Refunds (from Line 20(d))		
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	24 232.72	24 232.72
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	17 273.38	17 273.38
(b) Total Offsets to Operating Expenditures (from Line 14)		
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	17 273.38	17 273.38
8. Cash on Hand at Close of Reporting Period (from Line 27)	6 959.34	
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)		

For further information contact:
Federal Election Commission
899 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 BRIAN GILBERT	Date
Signature of Treasurer <i>Brian Gilbert</i>	7/31/97

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

DETAILED SUMMARY PAGE

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

Name of Committee (In Full)		Report Covering the Period:	
BERG SERVICE FOR CONGRESS C00326934		From: 1-1-97	To: 6-30-97
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			
(i) Itemized (use Schedule A) -----	5160.00		11(a)
(ii) Unitemized -----	767.00		11(b)
(iii) Total of contributions from individuals -----	5927.00		11(c)
(b) Political Party Committees -----			
(c) Other Political Committees (such as PACs) -----			
(d) The Candidate -----			
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d)) -----		18 305.72	11(d)
		24 232.72	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----			
13. LOANS:			
(a) Made or Guaranteed by the Candidate -----			
(b) All Other Loans -----			
(c) TOTAL LOANS (add 13(a) and (b)) -----			13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----			
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----			
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----		24 232.72	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES -----		17 273.38	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----			
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate -----			
(b) Of All Other Loans -----			
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----			19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees -----			
(b) Political Party Committees -----			
(c) Other Political Committees (such as PACs) -----			
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----			20(d)
21. OTHER DISBURSEMENTS -----			
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----		17 273.38	22

III. CASH SUMMARY

i. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 0	23
ii. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 24 232.72	24
iii. SUBTOTAL (add Line 23 and Line 24) -----	\$ 24 232.72	25
iv. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 17 273.38	26
v. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 6 959.34	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11(a)(i)

CONTRIBUTIONS from Individuals/Persons Other Than Political Committees

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NAME OF COMMITTEE (In Full)

BERG SERVICE FOR CONGRESS

C00326934

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
KEVIN NUSSBAUM 827 SURREY MEADOWS Ct. BALLWIN, MO 63021	WEISS, YESS & Co. Occupation: CONSULTANT	4/18/97	\$250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JOSEPH A. McCURRICK 3545 RIDER TRAIL S. EARTH CITY, MO 63045-1127	SELF-EMPLOYED Occupation: SALESMAN	4/19/97	\$250
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$250		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
TERENCE HOGAN 1823 N. SEDGWICK CHICAGO, IL 60614	WANGER ASSET MANAGEMENT Occupation: INVESTMENT ADVISOR	6/29/97	\$1000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
M. J. HOGAN 1823 N. SEDGWICK CHICAGO, IL 60614	UNIVERSITY OF CHICAGO Occupation: PEDIATRICIAN	6/29/97	\$1000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JEFFREY LEWIS 119 GRIFFIN AVE. SCARSDALE, NY 10583	DONALDSON, LUFKIN & JEWELRY Occupation: INVESTMENT BANKER	6/21/97	\$500
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$500		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
WEBB R. GILMORE 833 WESTWATER RD. KANSAS CITY, MO 64113	GILMORE & BULL, P.C. Occupation: LAWYER	6/30/97	\$1000
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$1000		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$4000

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 2
FOR LINE NUMBER 11 (a)(i)

CONTRIBUTIONS from Individuals/Persons Other Than Political Committees

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NAME OF COMMITTEE (in Full)

BERG SERVICE FOR CONGRESS C00326934

A. Full Name, Mailing Address and ZIP Code DONALD A. ESTELL 801 S. MERAMEC ST. LOUIS, MO 63105 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer STERN BROTHERS Occupation Investment Banker Aggregate Year-to-Date \$580	Date (month, day, year) 5/12/97	Amount of Each Receipt this Period \$580 IN-KIND (AIR - TRANSPORTATION)
B. Full Name, Mailing Address and ZIP Code Linda L. ESTELL 801 S. MERAMEC ST. LOUIS, MO 63105 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date \$ 580	Date (month, day, year) 5/12/97	Amount of Each Receipt this Period \$580 IN-KIND (AIR - TRANSPORTATION)
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$1160

TOTAL This Period (last page this line number only)

\$5160

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 4
FOR LINE NUMBER 11 (d)

CONTRIBUTIONS FROM THE CANDIDATE

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NAME OF COMMITTEE (In Full)

BERG SERVICE FOR CONGRESS

C00326934

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JERRY BERG R.R. #1, BOX 103 C, CHRIS DRIVE OREANA, IL 62554	PAINWEBBER, INC.	5-28-97	\$ 5000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BANKER Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
(SAME AS ABOVE)		6-30-97	\$ 3000.00
Receipt For: <input checked="" 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
(SAME AS ABOVE)		3-15-97	\$ 244.09 IN-KIND (TELEPHONE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: 4-15-97 Aggregate Year-to-Date > \$		\$ 270.77 IN-KIND (TELEPHONE)
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
(SAME AS ABOVE)		5-15-97	\$ 283.06 IN-KIND (TELEPHONE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: 6-15-97 Aggregate Year-to-Date > \$		\$ 168.82 IN-KIND (TELEPHONE)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
(SAME AS ABOVE)		4-30-97	\$ 276.87 IN-KIND (TELEPHONE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: 1-27-97 Aggregate Year-to-Date > \$		\$ 288.00 IN-KIND (CAMPAIGN SIGNS)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
(SAME AS ABOVE)		6-10-97	\$ 125.41 IN-KIND (TELEPHONE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: 4-21-97 Aggregate Year-to-Date > \$		\$ 166.30 IN-KIND (CANDIDATE PHOTOS)
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
(SAME AS ABOVE)		2-3-97	\$ 232.80 IN-KIND (PRINTING OF CAMPAIGN MATERIALS)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$ 10056.12

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)

CONTRIBUTIONS FROM THE CANDIDATE

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NAME OF COMMITTEE (in Full)

BERG SERVICE FOR CONGRESS

C00326934

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JERRY BERG R.R. #1, BOX 103 C, CHRIS DRIVE OREANA, IL 62554	PAINWEBBER, INC.	2-20-97	\$120.71 IN-KIND (PRINTING OF CAMPAIGN MATERIALS)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BANKER	2-25-97	\$235.64 IN-KIND (PRINTING OF CAMPAIGN MATERIALS)
	Aggregate Year-to-Date	\$	
B. Full Name, Mailing Address and ZIP Code (SAME AS ABOVE)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		5-9-97	\$2.53 IN-KIND (PRINTING OF CAMPAIGN MATERIALS)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	1-15-97	\$210.00 IN-KIND (MAGAZINE SUBSCRIPTION)
	Aggregate Year-to-Date	\$	
C. Full Name, Mailing Address and ZIP Code (SAME AS ABOVE)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		2-28-97	\$423.15 IN-KIND (CANDIDATE PHOTOS)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	3-20-97	\$145.08 IN-KIND (CANDIDATE PHOTOS)
	Aggregate Year-to-Date	\$	
D. Full Name, Mailing Address and ZIP Code (SAME AS ABOVE)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		1-29-97	\$356.51 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	1-31-97	\$56.37 IN-KIND (OFFICE SUPPLIES)
	Aggregate Year-to-Date	\$	
E. Full Name, Mailing Address and ZIP Code (SAME AS ABOVE)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		1-31-97	\$15.93 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	2-14-97	\$5.83 IN-KIND (OFFICE SUPPLIES)
	Aggregate Year-to-Date	\$	
F. Full Name, Mailing Address and ZIP Code (SAME AS ABOVE)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		2-20-97	\$20.64 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	2-28-97	\$29.61 IN-KIND (OFFICE SUPPLIES)
	Aggregate Year-to-Date	\$	
G. Full Name, Mailing Address and ZIP Code (SAME AS ABOVE)	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
		3-1-97	\$46.66 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	3-6-97	\$32.37 IN-KIND (OFFICE SUPPLIES)
	Aggregate Year-to-Date	\$	

SUBTOTAL of Receipts This Page (optional)

\$1701.03

TOTAL This Period (first page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 4
FOR LINE NUMBER 11(d)

CONTRIBUTIONS FROM THE CANDIDATE

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NAME OF COMMITTEE (In Full)

BERG SERVICE FOR CONGRESS

C00326934

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JERRY BERG R.R. #1, BOX 103 C, CHRIS DRIVE OREANA, IL 62554	PAINWEBBER, INC.	3-19-97	\$19.12 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BANKER	3-19-97	\$80.52 IN-KIND (OFFICE SUPPLIES)
	Aggregate Year-to-Date > \$		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
(SAME AS ABOVE)		3-24-97	\$21.25 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	4-5-97	\$121.63 IN-KIND (OFFICE SUPPLIES)
	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
(SAME AS ABOVE)		4-25-97	\$143.63 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5-6-97	\$11.66 IN-KIND (OFFICE SUPPLIES)
	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
(SAME AS ABOVE)		5-11-97	\$48.50 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5-15-97	\$2.91 IN-KIND (OFFICE SUPPLIES)
	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
(SAME AS ABOVE)		5-15-97	\$0.85 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5-19-97	\$6.37 IN-KIND (OFFICE SUPPLIES)
	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
(SAME AS ABOVE)		5-25-97	\$10.93 IN-KIND (OFFICE SUPPLIES)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6-2-97	\$7.42 IN-KIND (OFFICE SUPPLIES)
	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
(SAME AS ABOVE)		5-6-97	\$256.00 IN-KIND (POSTAGE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	3-10-97	\$19.20 IN-KIND (POSTAGE)
	Aggregate Year-to-Date > \$		
SUBTOTAL of Receipts This Page (optional)			\$ 749.99
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 4
FOR LINE NUMBER 11(D)

CONTRIBUTIONS FROM THE CANDIDATE

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NAME OF COMMITTEE (In Full)

BERG SERVICE FOR CONGRESS

C00326934

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
JERRY BERG R.R. #1, BOX 103 C, CHRIS DRIVE OREANA, IL 62554	PAINWEBBER, INC.	3-27-97	\$102.40 IN-KIND (POSTAGE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: BANKER	3-28-97	\$131.00 IN-KIND (POSTAGE)
Aggregate Year-to-Date >		\$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
(SAME AS ABOVE)		4-5-97	\$5.02 IN-KIND (POSTAGE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5-2-97	\$2.71 IN-KIND (POSTAGE)
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
(SAME AS ABOVE)		5-15-97	\$3.21 IN-KIND (POSTAGE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6-4-97	\$2.16 IN-KIND (POSTAGE)
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
(SAME AS ABOVE)		6-12-97	\$1.01 IN-KIND (POSTAGE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6-12-97	\$92.00 IN-KIND (POSTAGE)
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
(SAME AS ABOVE)		4-10-97	\$235.98 IN-KIND (TELEPHONE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	5-10-97	\$353.02 IN-KIND (TELEPHONE)
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
(SAME AS ABOVE)		6-12-97	\$79.17 IN-KIND (TELEPHONE)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	6-30-97	\$2948.48 IN-KIND (TRAVEL - MILEAGE)
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
(SAME AS ABOVE)			\$1742.42 (UN-ITEMIZED IN-KIND CONTRIBUTIONS)
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date >		\$	

SUBTOTAL of Receipts This Page (optional)

\$5798.58

TOTAL This Period (last page this line number only)

\$18305.72

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

OPERATING EXPENDITURES

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NAME OF COMMITTEE (in Full)

BERG SERVICE FOR CONGRESS

C00326934

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AMERITECH * P.O. BOX 4520 CAROL STREAM, IL 60197	TELEPHONE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2-15-97 4-15-97 5-15-97	\$244.09 (IN KIND) \$270.77 (IN KIND) \$283.06 (IN KIND) (RECEIVED)
AMERITECH * P.O. BOX 4520 CAROL STREAM, IL 60197	TELEPHONE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-15-97	\$148.82 (IN KIND RECEIVED)
B & W PRINTING 209 N. 4TH ST. EFFINGHAM, IL 62401	Printing of Campaign Material Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5-28-97	\$1600
CONSOLIDATED COMMUNICATIONS * P.O. BOX 6193 CAROL STREAM, IL 60197	TELEPHONE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-30-97 5-28-97 6-30-97	\$276.87 (IN KIND RECEIVED) \$200.21 \$200.21
EFFINGHAM SIGNS & GRAPHICS * 1009 S. OAK EFFINGHAM, IL 62401	Campaign Signs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1-27-97 5-8-97	\$288 (IN KIND RECEIVED) \$60
FIRST CELLULAR * 417 S. 42ND ST. MT. VERNON, IL 62864	TELEPHONE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-10-97	\$125.91 (IN KIND RECEIVED)
FOX PHOTO * 1351 E. COLORADO ST. DECATUR, IL 62521	Candidate Photos Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4-21-97	\$166.30 (IN KIND RECEIVED)
METRO DECATUR CHAMBER OF COMMERCE 100 MERCHANT ST. DECATUR, IL 62523	Membership Fees Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-5-97	\$185.00
MODERN MAILING 150 FORREST AVE. SPRINGFIELD, IL 62702	Campaign Mailing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6-4-97	\$2728
SUBTOTAL of Disbursements This Page (optional)			\$6796.74
TOTAL This Period (last page this line number only)			

* IN KIND RECEIVED IS FROM THE CANDIDATE

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

OPERATING EXPENDITURES

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NAME OF COMMITTEE (In Full)

BERG SERVICE FOR CONGRESS

CO0326934

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PATTON PRINTING * 902 W. WABASH EFFINGHAM, IL 62401	Printing of Campaign Materials	2-3-97	\$ 232.80 (In Kind)
		2-20-97	\$ 120.71 (In Kind)
		2-25-97	\$ 235.64 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
PATTON PRINTING * 902 W. WABASH EFFINGHAM, IL 62401	Printing of Campaign Materials	4-1-97	\$ 257.40
		5-9-97	\$ 2.53 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
ROLL CALL * 900 SECOND ST. NE WASHINGTON, DC 20002	Magazine Subscription	1-15-97	\$ 210.00 (In Kind Received)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
RUTHERFORD PHOTOVISUALS * 1060 W. HARRISON AVE. DECATUR, IL 62526	Candidate Photos	2-28-97	\$ 423.15 (In Kind)
		3-20-97	\$ 145.08 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
STAPLES * 900 HICKORY POINT PLAZA FORSYTH, IL 62535	Office Supplies	1-29-97	\$ 356.51 (In Kind)
		1-31-97	\$ 56.37 (In Kind)
		1-31-97	\$ 15.93 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
STAPLES * 900 HICKORY POINT PLAZA FORSYTH, IL 62535	Office Supplies	2-14-97	\$ 5.83 (In Kind)
		2-20-97	\$ 20.64 (In Kind)
		2-28-97	\$ 29.61 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
STAPLES * 900 HICKORY POINT PLAZA FORSYTH, IL 62535	Office Supplies	3-1-97	\$ 46.66 (In Kind)
		2-6-97	\$ 32.37 (In Kind)
		3-19-97	\$ 19.12 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
STAPLES * 900 HICKORY POINT PLAZA FORSYTH, IL 62535	Office Supplies	3-19-97	\$ 80.52 (In Kind)
		3-24-97	\$ 21.25 (In Kind)
		4-5-97	\$ 121.63 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			
STAPLES * 900 HICKORY POINT PLAZA FORSYTH, IL 62535	Office Supplies	4-25-97	\$ 143.63 (In Kind)
		5-6-97	\$ 11.66 (In Kind)
		5-11-97	\$ 48.50 (In Kind)
Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify)			

SUBTOTAL of Disbursements This Page (optional)

\$ 2637.54

TOTAL This Period (last page this line number only)

441144

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SCHEDULE B

ITEMIZED DISBURSEMENTS

OPERATING EXPENDITURES

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

PAGE 3 OF 4
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

BERG SERVICE FOR CONGRESS

C00326934

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
STAPLES * 900 HICKORY POINT PLAZA FORSYTH, IL 62535	Office Supplies	5-15-97	\$ 2.91 (In-kind)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5-15-97	\$.85 (In-kind)
	<input type="checkbox"/> Other (specify)	5-19-97	\$ 6.37 (In-kind)
STAPLES * 900 HICKORY POINT PLAZA FORSYTH, IL 62535	Office Supplies	5-25-97	\$ 10.93 (In-kind)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	6-2-97	\$ 7.42 (In-kind)
	<input type="checkbox"/> Other (specify)		(Received)
U.S. POSTMASTER * ALTAMONT, IL 62411	POSTAGE	5-6-97	\$ 256.00 (In-kind)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		(Received)
	<input type="checkbox"/> Other (specify)		
U.S. POSTMASTER * DECATUR, IL 62523	POSTAGE	3/10/97	\$ 19.20 (In-kind)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/27/97	\$ 102.40 (In-kind)
	<input type="checkbox"/> Other (specify)	3/28/97	\$ 131.00 (In-kind)
U.S. POSTMASTER * DECATUR, IL 62523	POSTAGE	4/5/97	\$ 5.02 (In-kind)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5/2/97	\$ 2.71 (In-kind)
	<input type="checkbox"/> Other (specify)	5/15/97	\$ 3.21 (In-kind)
U.S. POSTMASTER * DECATUR, IL 62523	POSTAGE	6/4/97	\$ 2.16 (In-kind)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	6/12/97	\$ 1.01 (In-kind)
	<input type="checkbox"/> Other (specify)	6/12/97	\$ 92.00 (In-kind)
DONALD A. ESTELL (CONTRIBUTOR) 801 S. MERAMEC ST. LOUIS, MO 63105	AIR TRANSPORTATION	5/12/97	\$ 580 (IN-KIND RECEIVED)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
Linda L. ESTELL (CONTRIBUTOR) 801 S. MERAMEC ST. LOUIS, MO 63105	AIR TRANSPORTATION	5/12/97	\$ 580 (IN-KIND RECEIVED)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
CELLULAR ONE * P.O. Box 2545 Decatur, IL 62525	TELEPHONE	4/10/97	\$ 235.98 (In-kind)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5/10/97	\$ 353.02 (In-kind)
	<input type="checkbox"/> Other (specify)	6/12/97	\$ 79.17 (In-kind)

SUBTOTAL of Disbursements This Page (optional)

\$2571.36

TOTAL This Period (last page this line number only)

* IN KIND RECEIVED IS FROM THE CANDIDATE

SCHEDULE B **ITEMIZED DISBURSEMENTS**
OPERATING EXPENDITURES

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

PAGE 4 OF 4
FOR LINE NUMBER
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NAME OF COMMITTEE (in full) BERG SERVICE FOR CONGRESS CO0326934

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period (In-kind Received)
Jerry R. Berg (contributor) RRI Box 103C, Chris Drive Orana, IL 62554	Travel - Mileage	6/30/97	2,948.48
B. Full Name, Mailing Address and ZIP Code Unitemized Disbursements In-kind Received from Candidate	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 1,742.42
C. Full Name, Mailing Address and ZIP Code Unitemized Disbursements Direct Payments	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 576.84
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 Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 5,267.74

TOTAL This Period (last page this line number only) 17,273.38

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 7-31-97
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> Received from the House Office of Records and Registration	DATE OF RECEIPT 8-6-97
<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>SJS</i> PREPARER	8-6-97 DATE PREPARED