

REPORT OF RECEIPTS AND DISBURSEMENTS

1 / 27

For An Authorized Committee
(Summary Page)

FEDERAL ELECTION COMMISSION
CONNIE ANN MAIL ROOM 4

APR 20 11 30 AM '98

1. NAME OF COMMITTEE (In full) Davis For Congress/Friends of Davis		2. FEC IDENTIFICATION NUMBER C00172818
ADDRESS (number and street) 1255 N. Aust'n Blvd.	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Chicago IL 60651	STATE / DISTRICT IL 17	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (election type) _____ election on _____ in the State of _____
<input type="checkbox"/> July 15 Quarterly Report	
<input checked="" type="checkbox"/> October 15 Quarterly Report	<input checked="" type="checkbox"/> Thirtieth day report following the General Election on <u>03/17/1998</u> in the State of <u>IL</u>
<input type="checkbox"/> January 31 Year End Report	<input type="checkbox"/> Termination report
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	

This report contains activity for: Primary election General election Runoff election Special election

SUMMARY

5. Covering period <u>02/28/1998</u> through <u>03/31/1998</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(e))	44256.59	91476.59
(b) Total Contribution Refunds (from line 20(d))	0.00	1500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	44256.59	89976.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	40276.62	58540.88
(b) Total Offsets to Operating Expenditures (from line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	-40276.62	58540.88
8. Cash on Hand at Close of Reporting Period (from line 27)	77822.65	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	122186.00	

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 Mrs. Vera G. Davis	Date 04/15/1998
Signature of Treasurer 	

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) Davis For Congress/Friends of Davis	Report Covering the Period From: 02/28/1998 To: 03/31/1998	
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)	15125.00	
(ii) Unitemized	12631.59	
(iii) Total of contributions from Individuals	27756.59	54726.59
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	16500.00	38750.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	44256.59	91476.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	44256.59	91476.59
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	40276.62	58640.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	1500.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	1500.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	40276.62	60340.88
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		73842.88
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		44256.59
25. SUBTOTAL (add Line 23 and Line 24)		118099.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		40276.62
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		77822.65

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11A1

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)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Carpenters Legislative Improvement Cmte. 101 Constitution Ave. NW Washington DC 20001		02/26/1998	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1000.00	
Blagojevich For Congress 1617 W. Cornelia Chicago IL 60657		02/26/1998	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	
Mr. Eric B. White 314 Mass Ave. NE Washington DC 20002	Nat'l Public Affairs Group	02/26/1998	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Administration	Aggregate Year-to-Date > \$ 500.00	
Mr. Fred Eychaner 1646 W. Fullerton Chicago IL 60614	Nowweb Corp	02/26/1998	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Primary 96	Occupation President	Aggregate Year-to-Date > \$ 2000.00	
Mr. Ignatius McDermott 932 W. Washington Chicago IL 60607	Haymarket Center	02/26/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Primary 96	Occupation Administrator	Aggregate Year-to-Date > \$ 250.00	
Mr. James E. Coston 53 W. Jackson Blvd. Suite 1150 Chicago IL 60604	Coston & Lichtman	02/26/1998	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Primary 96	Occupation Attorney	Aggregate Year-to-Date > \$ 350.00	
Dr. Charles Sweet 1807 Roosevelt Rd. Broadview IL 60153	Private Practice	02/26/1998	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Dentist	Aggregate Year-to-Date > \$ 700.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code Ms. Patricia Rademacher 1860 N. Paulina Chicago IL 60622	Name of Employer Coston & Lichtman Occupation Attorney	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Primary 96	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Mr. C. Vincent Bakeman 222 S. Jefferson Chicago IL 60661	Name of Employer HRDI Occupation CEO	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 650.00 in kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
Full Name, Mailing Address, and ZIP Code Mr. Michael Radzilowsky 1412 W. Norwood St. Chicago IL 60660	Name of Employer Occupation Lawyer	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 100.00 in kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
Full Name, Mailing Address, and ZIP Code Ms. Avis Lavelle Sampson 5337 S. Drexel Ave. Chicago IL 60615	Name of Employer University of Chgo. Hospital Occupation Management	Date (month, day, year) 02/27/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Ms. Cynthia Williams 1255 N. Austin Blvd. Chicago IL 60651	Name of Employer Williams Partners LP Occupation CEO	Date (month, day, year) 02/27/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): P 96	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Mr. Robert Welsabour 1843 N. Dayton Chicago IL 60614	Name of Employer South Shore Bank Occupation Vice President	Date (month, day, year) 02/27/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1500.00		
Full Name, Mailing Address, and ZIP Code Mr. Cecil B. Lucy P.O. Box 4659 Chicago IL 60680	Name of Employer Occupation	Date (month, day, year) 02/27/1998	Amount of Each Receipt this Period 400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code Mr. John H. Johnson 820 S. Michigan Ave. Chicago IL 60605	Name of Employer Johnson Publishing Co.	Date (month, day, year) 02/27/1998	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 Publisher	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Mr. William Moorehead 833 N. Orleans Chicago IL 60610	Name of Employer William Moorehead & Assoc.	Date (month, day, year) 02/27/1998	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 Developer	Aggregate Year-to-Date > \$ 300.00	
Full Name, Mailing Address, and ZIP Code Mr. Anthony C. Oliver 1530 W. 109th Pl Chicago IL 60643	Name of Employer Executive Director	Date (month, day, year) 03/05/1998	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 Streetwise	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Ms. Emmeine A. Clarkston 8216 S. Eberhart Ave. Chicago IL 60619	Name of Employer	Date (month, day, year) 03/05/1998	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	Aggregate Year-to-Date > \$ 25.00	
Full Name, Mailing Address, and ZIP Code Ms. Leola Spann 1315 N. Montrose Chicago IL 60651	Name of Employer Northwest Austin Council	Date (month, day, year) 03/05/1998	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): P 95	Occupation President	Aggregate Year-to-Date > \$ 250.00	
Full Name, Mailing Address, and ZIP Code Mr. Cirilo McSween 20 E. Jackson Blvd. Suite 600 Chicago IL 60604	Name of Employer McDonalds	Date (month, day, year) 03/05/1998	Amount of Each Receipt this Period 700.00 in kind donation of room rental
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$ 0.00	
Full Name, Mailing Address, and ZIP Code Dr. Mohammed Masood Ali 6611 N. Harding Lincolnwood IL 60465	Name of Employer Sinai Family Medical Center	Date (month, day, year) 03/05/1998	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 Medical Doctor	Aggregate Year-to-Date > \$ 250.00	

SUBTOTALS of Receipts This Page (Optional)

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NAME OF COMMITTEE (In Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code Mr. Alberto M. Manalo 5411 Cleveland Morton Grove IL 60053 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sinai Family Health Center Occupation Management Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Patricia Yu Benitez 8757 W. 97th St. Palos Hills IL 60465 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sinai Family Health Center Occupation Physician Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/08/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Mr. Donald G. Stewart 8215 S. Oglesby Ave. Chicago IL 60617 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sinai Family Health Center Occupation Management Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Mr. Tariq H. Butt 1143 S. Plymouth Court Apartment 507 Chicago IL 60605 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sinai Family Health Center Occupation Manager Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/08/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Umpathi Reddi Galtamanchi 13000 Seneca Rd Palos Heights IL 60463 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sinai Family Health Center Occupation Physician Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/08/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Dr. Zulfikar Esmail 1516 Forest Park Evanston IL 60201 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sinai Family Health Centers Occupation Medical Doctor Aggregate Year-to-Date > \$ 300.00	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 300.00
Full Name, Mailing Address, and ZIP Code G. Michael Savage 3154 N. Hudson Apt. 3E Chicago IL 60657 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sinai Family Health Center Occupation Administrator Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 500.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (In Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code P Mukundan 119 Oak Ridge Drive East Burr Ridge IL 60521 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sinai Family Health Center Occupation Medical Doctor Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 03/08/1998	Amount of Each Receipt this Period 500.00
Full Name, Mailing Address, and ZIP Code Venkata A. Valkury 1500 Acorn Ct. Lombard IL 60148 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sinai Family Health Center Occupation Medical Doctor Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/08/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Ramalingappa Nagaraju 164 Saddlebrook Dr. Oak Brook IL 60528 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Sinai Family Health Center Occupation Medical Doctor Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/05/1998	Amount of Each Receipt this Period 250.00
Full Name, Mailing Address, and ZIP Code Ms. Grace Lee 3333 W. Arthington St. Chicago IL 60624 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer SAE Young Ind. Complex Occupation Exec. Vice Pres. Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Ms. Elizabeth Lee 3333 W. Arthington Room 120 Chicago IL 60624 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer SAE Young Ind. Complex Occupation PR Manager Aggregate Year-to-Date > \$ 1000.00	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 1000.00
Full Name, Mailing Address, and ZIP Code Dr. Charles Sweet 1807 Roosevelt Rd. Broadview IL 60153 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Private Practice Occupation Dentist Aggregate Year-to-Date > \$ 700.00	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 200.00
Full Name, Mailing Address, and ZIP Code Mr. David M. Fields 1745 Candlestick Lane Newport Beach CA 92660 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer Occupation Attorney Aggregate Year-to-Date > \$ 250.00	Date (month, day, year) 03/07/1998	Amount of Each Receipt this Period 250.00

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code Dr. Gerald Clay 455 Washington Blvd. Oak Park IL 60302	Name of Employer [Blank]	Date (month, day, year) 03/07/1998	Amount of Each Receipt this Period 400.00
	Occupation [Blank]		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code Mr. James Morgan Flagg, III 13802 Northwest Passage, No. 113 Marina Del Rey CA 90292	Name of Employer Flagg & Associates	Date (month, day, year) 03/11/1998	Amount of Each Receipt this Period 250.00
	Occupation Consultant		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Solomon Okoa Okai 150 Schiller Ave. Elmhurst IL 60126	Name of Employer Sinai Family Health Center	Date (month, day, year) 03/13/1998	Amount of Each Receipt this Period 250.00
	Occupation Physician		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Dr. Godwin O. Onyema 2111 E. 171st Pl South Holland IL 60473	Name of Employer Sinai Family Health Center	Date (month, day, year) 03/13/1998	Amount of Each Receipt this Period 250.00
	Occupation Physician		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
Full Name, Mailing Address, and ZIP Code Mr. Donald R. Oder 133 W. Harrison Chicago IL 60607	Name of Employer Retired	Date (month, day, year) 03/17/1998	Amount of Each Receipt this Period 200.00
	Occupation [Blank]		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Primary 99	Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code Ms. Tumia Romero 6335 N. Lakewood Ave., Fl. 2 Chicago IL 60660	Name of Employer HRDI	Date (month, day, year) 03/31/1998	Amount of Each Receipt this Period 100.00 In kind
	Occupation Administrative Asst.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Primary 99	Aggregate Year-to-Date > \$ 100.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

15125.00

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code Intern'l Assn. of Fire Fighters 1750 New York NW Washington DC 20006	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code The Nat'l Assn. of Life Underwriters PAC 1822 F. St., NW Washington IL 20006	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code HARZA PAC Sears Tower 233 S. Wacker Dr. Chicago IL 80806	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 200.00		
Full Name, Mailing Address, and ZIP Code NAPUS PAC FOR POSTMASTERS 8 Herbert St. Alexandria VA 22305	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Marine Engineers Beneficial Assn. Political Ac 444 N. Capitol St., Suite 800 Washington DC 20001	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code National Education Assn. PAC 1201 18th St., NW Washington DC 20036	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Williams & Jensen, PC 1155 21 St Street NW Suite 300 Washington DC 20036	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER:
11C

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code Cmte. On Political Education, AFL-CIO 815 16th Street, NW Washington DC 20006	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 2000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2000.00		
Full Name, Mailing Address, and ZIP Code American Federation of Teachers Cmte on Politi 555 New Jersey Ave. NW Washington DC 20001	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Seafarers Political Activity 5201 Auth Way Camp Springs MD 20746	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Realtors PAC 430 N. Michigan Ave. Chicago IL 60611	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code National Assn. of Life Underwriters PAC 1922 F St., NW Washington DC 20006	Name of Employer Occupation	Date (month, day, year) 02/26/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Laborer's Political League 905 16th Street NW Washington DC 20008	Name of Employer Occupation	Date (month, day, year) 03/02/1998	Amount of Each Receipt this Period 1500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1500.00		
Full Name, Mailing Address, and ZIP Code First Chicago NBD Corp PAC One First National Plaza Chicago IL 60670	Name of Employer Occupation	Date (month, day, year) 03/02/1998	Amount of Each Receipt this Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 700.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code Commodity Futures Political Fund 30 S. Wacker Dr. Chicago IL 60606	Name of Employer Occupation	Date (month, day, year) 03/02/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code American Nurses Assn. PAC 600 Maryland Avenue SW Suite 100 West Washington DC 20024	Name of Employer Occupation	Date (month, day, year) 03/05/1998	Amount of Each Receipt this Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code The Dominicka Finer Foods, Inc PAC 505 Railroad Ave. Northlake IL 60164	Name of Employer Occupation	Date (month, day, year) 03/06/1998	Amount of Each Receipt this Period 300.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 300.00		
Full Name, Mailing Address, and ZIP Code United Food & Commercial Workers Active Ballot 1775 K Street NW Washington DC 20006	Name of Employer Occupation	Date (month, day, year) 03/11/1998	Amount of Each Receipt this Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code SEIU COPE PAC 1313 L Street NW Washington DC 20005	Name of Employer Occupation	Date (month, day, year) 03/13/1998	Amount of Each Receipt this Period 4000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 4000.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

16500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

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 service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	298.25
Salsedo Press 3139 W. Chicago Chicago IL 60622	Campaign posters Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	2159.00
Piney Bowes P.O. Box 85390 Louisville KY 50285	Postage meter Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	1980.30
Ameritech P.O. Box 4520 Carol Stream IL 60197	Telephone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	298.25
M/HPO 201 N. Wells Chicago IL 60601	Ad Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	1000.00
The First Impression of Chicago 2241 South Indiana Avenue Chicago IL 60616	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	1230.00
First First Impression 2241 S. Indiana Chicago IL 60600	Campaign Literature Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Primary 95	02/26/1998	1000.00
Mrs. Vera G. Davis 1255 N. Austin Blvd. Chicago IL 60661	reimburse for travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	240.00
Mrs. Vera G. Davis 1255 N. Austin Blvd. Chicago IL 60651	Reimburse for postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	02/26/1998	840.00

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mrs. Vera G. Davis 1255 N. Austin Blvd. Chicago IL 60651	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/26/1998	32.00
Mr. G. Vincent Bakeman 222 S. Jefferson Chicago IL 60661	Invitations Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/26/1998	650.00 in kind
Mr. Michael Radzilowsky 1412 W. Norwood St. Chicago IL 60660	Labels Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/26/1998	100.00 in kind
Fluturistic Productions, Inc. 311 N. Central Park Chicago IL 60624	Entertainment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/27/1998	500.00
Yvette Winter Garden 311 S. Wacker Dr. Chicago IL 60606	Fund Raising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/27/1998	1574.00
Signature Catering 1004 S. 5th Ave. Maywood IL 60153	Fund raising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/27/1998	275.00
Yvette Winter Garden 311 S. Wacker Dr. Chicago IL 60606	Fund raising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/03/1998	854.00
Northwest Austin Council 1315 N. Monitor Chicago IL 60651	Campaign office rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/04/1998	1000.00
Signature Catering 1004 S. 5th Ave. Maywood IL 60153	Fund raising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/05/1998	265.00

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Harry Hunt 8041 S. Parmell Chicago IL 60620	Entertainment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/05/1998	300.00
Mr. Cirilo McSween 20 E. Jackson Blvd. Suite 800 Chicago IL 60604	Room rental for fund raiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/05/1998	700.00 in kind
Signature Catering 1004 S. 5th Ave. Maywood IL 60159	Fund raising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/08/1998	275.00
Postmaster 433 W. Van Buren Chicago IL 60607	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/06/1998	500.00
Map Co. 10057 S. Wabash Chicago IL 60628	Literature Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/08/1998	300.00
David L. Andriakitis, Inc. 50 E Street SE Washington DC 20003	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/09/1998	691.00
National Democratic Club 30 Ivy Street SE Washington DC 20003	Fund Raising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/09/1998	98.78
National Democratic Club 30 Ivy Street SE Washington DC 20003	Fund Raising Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/09/1998	729.18
Resident Journal 916 S. Wabash Chicago IL 60605	Ad Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/08/1998	205.00

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

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 60187	Telephone services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/10/1998	257.00
Hartman Publishing Co. 401 N. Wabash Chicago IL 60611	Campaign Literature Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/10/1998	10600.00
Ameritech P.O. Box 4520 Carol Stream IL 60197	telephone services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/10/1998	257.08
Chicago Daily Defender 2400 S. Michigan Ave. Chicago IL 60616	ad Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/10/1998	894.25
Community Bank of Lawndale 1111 South Homan Ave. Chicago IL 60624	 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/10/1998	894.25
Mr. Clarence Barry 3414 W. Monroe Chicago IL 60624	Campaign day expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/12/1998	1000.00
Mr. Hassan Muhammad 133 S. Wacker Chicago IL 60644	Campaign day expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/13/1998	1000.00
Quality Inn Motel One South Halsted Chicago IL 60661	Campaign victory party Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/16/1998	560.00
Mr. Harry Reese 2714 W. Maypole Chicago IL 60612	Get out the vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	1160.00

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mr. Floyd Thomas 643 N. Mayfield Chicago IL 60644	Get out the vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	1500.00
Mr. Larry Shapiro 949 N. Lombard Chicago IL 60602	Get out the vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	500.00
Mr. Tom Hozler 5045 N. North Ave. Chicago IL 60639	Get out the vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	500.00
Ms. Charita Hogan 3525 W. Monroe Chicago IL 60624	Get out the vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	500.00
Mr. Hassan Muhammad 133 S. Waller Chicago IL 60644	Get out the vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	1300.00
Carol Martin 1128 N. Mason chicago IL 60651	Food for campaign volunteers Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	300.00
Mr. Tim Mahogany 1341 W. 13th St. Chicago IL 60607	Get Out the Vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	300.00
Ms. Cherita Logan 3525 W. Monroe Chicago IL 60624	Get Out the Vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	500.00
Mr. Clayton Boyd 5730 W. Division St. Chicago IL 60651	Get Out the Vote Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	03/17/1998	800.00

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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FOR LINE NUMBER
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NAME OF COMMITTEE (In Full):
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Peoples Gas & Coke Co. 130 E. Randolph St. Chicago IL 60601	Utilities Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/22/1998	311.83
Edna's Restaurant 3200 W. Madison St. Chicago IL 60624	Food for Election Day Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/24/1998	450.00
Ms. Tumbia Romero 6335 N. Lakewood Ave., Fl. 2 Chicago IL 60660	Consultant services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Primary 98	03/31/1998	100.00 In kind
Community Bank of Lawndale 1111 South Homan Ave. Chicago IL 60624	Banking fees Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/1998	15.00

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

39280.15

SCHEDULE C

LOANS

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(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER
10

NAME OF COMMITTEE (In Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 5000.00	Cumulative Payment to Date 2500.00	Balance Outstanding at Close of This Period 2500.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 433		

TERMS: Date incurred: 12/01/1983 Date Due: 19991201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan:

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 10000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 10000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 444		

TERMS: Date incurred: 02/05/1986 Date Due: 19991201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan:

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

SUBTOTALS This Period This Page (Optional)

TOTALS This Period (last page this line number only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C

LOANS

(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER
10

NAME OF COMMITTEE (In Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code of Loan Source
Mr. Danny K. Davis
1255 N. Austin Blvd.

Original Amount of Loan
5000.00

Cumulative Payment to Date
0.00

Balance Outstanding at Close of This Period
5000.00

Chicago IL 60651
Election: Primary General Other (specify):

REF-ID: 446

TERMS: Date Incurred: 03/01/1996 Date Due: 19981201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code of Loan Source
Mr. Danny K. Davis
1255 N. Austin Blvd.

Original Amount of Loan
10000.00

Cumulative Payment to Date
0.00

Balance Outstanding at Close of This Period
10000.00

Chicago IL 60651
Election: Primary General Other (specify):

REF-ID: 446

TERMS: Date Incurred: 03/13/1996 Date Due: 19981201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

SUBTOTALS This Period This Page (Optional)

TOTALS This Period (last page this line number only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C

LOANS

20 / 27

(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER 10

NAME OF COMMITTEE (In Full)
 Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 5000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 5000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 450		

TERMS: Date Incurred: 03/14/1998 Date Due: 19991201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 8000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 8000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 452		

TERMS: Date Incurred: 03/18/1998 Date Due: 19991201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

SUBTOTALS This Period This Page (Optional)

TOTALS This Period (last page this line number only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C

LOANS

(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER 10

NAME OF COMMITTEE (in Full)
 Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 22000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 22000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 454		

TERMS: Date incurred: 03/19/1996 Date Due: 19991201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 5000.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 5000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 456		

TERMS: Date incurred: 03/15/1996 Date Due: 19981201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

SUBTOTALS This Period This Page (Optional)

TOTALS This Period (last page this line number only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C

LOANS

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(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER
10

NAME OF COMMITTEE (In Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code of Loan Source

Mr. Danny K. Davis
1255 N. Austin Blvd.

Chicago IL 60651

Election: Primary General Other (specify):

Original Amount of Loan

5000.00

REF-ID: 459

Cumulative Payment to Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS: Date Incurred: 05/17/1996

Date Due: 19961201

Interest Rate(%) = .0500

Secured

List of Endorsers / Guarantors for the Above Loan:

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code of Loan Source

Mr. Danny K. Davis
1255 N. Austin Blvd.

Chicago IL 60651

Election: Primary General Other (specify):

Original Amount of Loan

2000.00

REF-ID: 719

Cumulative Payment to Date

0.00

Balance Outstanding at Close of This Period

2000.00

TERMS: Date Incurred: 01/13/1998

Date Due: 19991201

Interest Rate(%) = .0500

Secured

List of Endorsers / Guarantors for the Above Loan:

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

SUBTOTALS This Period This Page (Optional)

TOTALS This Period (last page this line number only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C

LOANS

(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER
10

NAME OF COMMITTEE (in Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code of Loan Source
Mr. Danny K. Davis
1255 N. Austin Blvd.

Original Amount of Loan
3000.00

Cumulative Payment to Date
0.00

Balance Outstanding at Close of This Period
3000.00

Chicago IL 60651
Election: Primary General Other (specify):

REF-ID: 721

TERMS: Date Incurred: 01/20/1996 Date Due: 19961201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code

Employer
Occupation
Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer
Occupation
Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer
Occupation
Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code of Loan Source
Mr. Danny K. Davis
1255 N. Austin Blvd.

Original Amount of Loan
1000.00

Cumulative Payment to Date
0.00

Balance Outstanding at Close of This Period
1000.00

Chicago IL 60651
Election: Primary General Other (specify):

REF-ID: 723

TERMS: Date incurred: 01/01/1996 Date Due: 19961201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code

Employer
Occupation
Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer
Occupation
Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer
Occupation
Amount Guaranteed Outstanding
0.00

SUBTOTALS This Period This Page (Optional)

TOTALS This Period (last page this line number only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C

LOANS

(Revised 3/80)

Use separate schedule(s) for each numbered line

FOR LINE NUMBER
10

NAME OF COMMITTEE (In Full)
Davis For Congress/Friends of Davis

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 950.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 950.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 725		

TERMS: Date incurred: 01/29/1996 Date Due: 19961201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

Full Name, Mailing Address, and ZIP Code of Loan Source Mr. Danny K. Davis 1255 N. Austin Blvd. Chicago IL 60651	Original Amount of Loan 4100.00	Cumulative Payment to Date 0.00	Balance Outstanding at Close of This Period 4100.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	REF-ID: 727		

TERMS: Date incurred: 12/01/1983 Date Due: 19991201 Interest Rate(%) = .0500 Secured

List of Endorsers / Guarantors for the Above Loan :

Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00
Full Name, Mailing Address, and ZIP Code	Employer
	Occupation
	Amount Guaranteed Outstanding 0.00

SUBTOTALS This Period This Page (Optional)

TOTALS This Period (last page this line number only)

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE C**LOANS**

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[Revised 3/80]

Use separate schedule(s)
for each numbered lineFOR LINE NUMBER
10**NAME OF COMMITTEE (in Full)**
Davis For Congress/Friends of DavisFull Name, Mailing Address, and ZIP Code of Loan Source
Mr. Danny K. Davis
1255 N. Austin Blvd.

Chicago IL 60651Original Amount of Loan

15000.00Cumulative Payment
to Date

0.00Balance Outstanding
at Close of This Period

15000.00Election: Primary General Other (specify):

REF-ID: 733

TERMS: Date incurred: 12/07/1995

Date Due: 19961207

Interest Rate(%) = .0975

 Secured**List of Endorsers / Guarantors for the Above Loan:**

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00

Full Name, Mailing Address, and ZIP Code

Employer

Occupation

Amount Guaranteed Outstanding
0.00**SUBTOTALS** This Period This Page (Optional)**TOTALS** This Period (last page this line number only)

98550.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary

SCHEDULE D

(Revised 3/80)

DEBTS AND OBLIGATIONS**Excluding Loans**Use separate schedule(s)
for each numbered line

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FOR LINE NUMBER
10**NAME OF COMMITTEE (In Full)**

Davis For Congress/Friends of Davis

	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Ron Lester Association 1010 Wisconsin Ave NW Washington DC 20007	10000.00	0.00	0.00	10000.00
Nature of Debt (purpose): Polling				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Dandridge Hardware 326 N. Central Avenue Chicago IL 60651	2350.00	0.00	0.00	2350.00
Nature of Debt (purpose): Hardware supplies				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Ms. Turnia Romero 6335 N. Lakewood Ave., FL 2 Chicago IL 60660	100.00	0.00	100.00	0.00
Nature of Debt (purpose): Media Consulting				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor First First Impression 2241 S. Indiana Chicago IL 60600	1000.00	0.00	1000.00	0.00
Nature of Debt (purpose): Printing				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Mr. John Gooden 5825 W. Chicago Ave. Chicago IL 60651	500.00	0.00	0.00	500.00
Nature of Debt (purpose):				
Full Name, Mailing Address, and Zip Code of Debtor or Creditor Ms. Sharon Lewis 939 N. Pine St. Chicago IL 60651	2700.00	0.00	0.00	2700.00
Nature of Debt (purpose): Political consulting				
1) SUBTOTALS This Period This Page (Optional)				
2) TOTALS This Period (last page this line number only)				
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)				

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
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<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	
 E.S.	 4/20/98
PREPARER	DATE PREPARED