

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL
OR
TYPE OR PRINT

C00100537 CA/21 092898 N
 JOHN CUMMINGS
 BILL THOMAS CAMPAIGN COMMITTEE
 PO BOX 395
 BAKERSFIELD CA 93302

FEDERAL ELECTION COMMISSION

2. FEC IDENTIFICATION NUMBER
 C00100537
 3. IS THIS REPORT AN AMENDMENT?
 YES NO

4. TYPE OF REPORT

April 15 Quarterly Report
 12-Day Pre-Election Report for the General (Type of Election)
 election on Nov 3, 1998 in the State of California
 July 15 Quarterly Report
 October 15 Quarterly Report
 30-Day Post-Election Report following the General Election
 January 31 Year End Report on _____ in the State of _____
 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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/1/98</u> through <u>10/14/98</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	42,850.00	522,061.83
(b) Total Contribution Refunds (from Line 20(d))	0	1,250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	42,850.00	520,811.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	7,250.00	333,848.61
(b) Total Offsets to Operating Expenditures (from Line 14)	0	1,094.05
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	7,250.00	332,754.56
8. Cash on Hand at Close of Reporting Period (from Line 27)	518,640.90	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	8,000.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:
 Federal Election Commission
 999 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9590
 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
Catherine M. Akumotay
 Signature of Treasurer
 Date
 10/21/98

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (in full)	Report Covering the Period:	
<i>Bill Brown Campaign Committee</i>	From: <i>10/1/98</i>	To: <i>10/14/98</i>
I. RECEIPTS <i>#COX 60529</i>	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) -----	0	0
(ii) Unitemized -----	50.00	0
(iii) Total of contributions from individuals -----	50.00	158,065.83
(b) Political Party Committees -----	0	0
(c) Other Political Committees (such as PACs) -----	42,800.00	367,006.00
(d) The Candidate -----	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) -----	42,850.00	527,061.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate -----	0	0
(b) All Other Loans -----	0	0
(c) TOTAL LOANS (add 13(a) and (b)) -----	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----	0	1,084.05
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----	0	31,730.46
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----	42,850.00	557,876.34
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES -----	2,250.00	229,480.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate -----	0	0
(b) Of All Other Loans -----	0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees -----	0	250.00
(b) Political Party Committees -----	0	0
(c) Other Political Committees (such as PACs) -----	0	1,000.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----	0	1,250.00
21. OTHER DISBURSEMENTS -----	23,000.00	545,400.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----	25,250.00	880,498.01

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 501,640.90	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 42,850.00	24
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 543,890.90	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 25,250.00	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 518,640.90	27

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

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

PAGE 1 OF 4

FOR LINE NUMBER 110

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)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Assn of Nurse Anesthetists PAC 222 North Prospect Avenue Park Ridge, IL 60068		10/6/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code Independent Insurance Agents of America PAC 412 First Street SE #200 Washington, DC 20003		10/13/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code American Express PAC 801 Pennsylvania Ave NW #050 Washington, DC 20004		10/8/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code Hearst-Packard Company 3000 Fenover Street Palo Alto, CA 94304		10/6/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code American Council of Life Insurance PAC 1001 Pennsylvania Avenue NW Washington, DC 20004		10/5/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code National Council of Farmer Cooperatives PAC 50 E Street NW #200 Washington, DC 20001		10/7/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code New York Life PAC 51 Madison Avenue New York, NY 10010		10/7/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

10,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

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

PAGE 2 OF 9

FOR LINE NUMBER 100

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Doreen Good, Post Fund 1148 E Market Street Aurora, OH 44216</i>		<i>10/7/98</i>	<i>1500.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
<i>Akin Group, Strauss, Hauer, 1337 New Hampshire NW #400 Washington, DC 20004</i>	<i>Fed. Civic Action Committee</i>	<i>10/5/98</i>	<i>1000.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
<i>National Beer Wholesaler Assn PAC 1100 S. Washington Street Alexandria, VA 22314</i>		<i>10/6/98</i>	<i>500.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>American Assn of Clinical Urologists PAC 1111 Plaza Drive #550 Rockville, MD 20850</i>		<i>10/6/98</i>	<i>2000.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Beas Creek Corporation PAC PO Box 299 Medford, OR 97501</i>		<i>10/1/98</i>	<i>500.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>American Medical PAC 1101 Herwood Avenue NW Washington, DC 20005</i>		<i>10/1/98</i>	<i>5000.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
<i>Sen Mail, Brown of CA PAC 13525th Bethel Avenue Kearney, VA 93631</i>		<i>10/1/98</i>	<i>1000.00</i>
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

11,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

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

PAGE 3 OF 4
FOR LINE NUMBER 1162

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Allstate Insurance Company PAC 2775 Sardin Rd. #401 Northbrook, IL 60062		10/20/98	1800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Realtors PAC 432 N. Michigan Ave. Chicago, IL 60611		10/1/98	5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
CS First Boston 1155 21st Street NW Washington, DC 20037		10/12/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Real Leadership Council PAC 1300 Connecticut Ave #1000 Washington, DC 20004		10/12/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Natl Rifle Assn PAC 11250 Waples Mill Rd. Fairfax, VA 22030		10/12/98	2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Northwestern Mutual Life Federal PAC 320 E. Wisconsin Ave. Milwaukee, WI 53222		10/13/98	1500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Health Insurance PAC 555 13th Street NW #600 East Washington, DC 20004		10/14/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

12,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Contributions from PACs

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

PAGE 4 OF 4
FOR LINE NUMBER 116

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Brown and Williamson Tobacco PAC PO Box 35090 Louisville, KY 40232		10/11/98	1,600.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Florida Fruit & Vegetable Growers PAC PO Box 146195 Orlando, FL 32814		10/9/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" 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
Mass Rental PAC 1295 State Street Springfield, MA 01111		10/6/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Potato Life 9085 E. Mineral Circle Englewood, CO 80112		10/20/98	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Apris Healthcare PAC 5500 Highland Avenue Costa Mesa, CA 92626		10/7/98	5,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Atlantic Research Corporation PAC 5745 Wellington Rd. Annandale, VA 22015		10/13/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

8,900.00

TOTAL This Period (last page this line number only)

42,800.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**
Operating Expenditures

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

PAGE 11 OF 17
 FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Garysner Presents</i> <i>PO Box 211026</i> <i>Bedford, TX 76095</i>	Deposit for Event Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <i>Entertainment</i>	<i>10/7/98</i>	<i>2250.00</i>
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursement(s) This Page (optional)

TOTAL This Period (last page this line number only)

2250.00

SCHEDULE B ITEMIZED DISBURSEMENTS
Other Disbursements

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

PAGE 1 OF 3
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Don Benton for Congress (WA/03) 10713 Northwest Maple Rd. Vancouver, WA 98686	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/98	1000. --
John Lansing for Congress (IN/09) PO Box 43 Batesville, IN 47006	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --
Pat Rooney for Congress (PA/15) 1005 Union Blvd. Allentown, PA 18102	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --
Jo Musser for Congress (WI/02) PO Box 62845 Middleton, WI 53562	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --
Jimmy McKibben for Congress (IA/09) PO Box 305 Marshalltown, IA 50158	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --
Bery Hopmeister for Congress (IN/10) 2511 East 84th Street Indianapolis, IN 46205	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --
Mark Amorello for Congress (MA/02) 50 Lake Avenue Worcester, MA 01604	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --
Mike Ferguson for Congress (NC/06) PO Box 867 Red Bank, NC 27701	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --
Nancy Hollister for Congress (OH/100) PO Box 232 Chillicothe, OH 45601	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1000. --

SUBTOTAL of Disbursements This Page (optional)

9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B ITEMIZED DISBURSEMENTS
Other Disbursements

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

PAGE 1 OF 3
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Frank Green for Congress (WI/08) P.O. Box 13103 Green Bay, WI 54307	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Phil Vignuck for Congress (AR/02) 9710 University Blvd Little Rock, AR 72209	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Bob Frenck for Congress (CO/02) 26 Parker Center Ste. 34 Broomfield, CO 80024	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Ron Stenwood for Congress (PA/16) 10 Bridgewater Pittsburgh, PA 15257	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Paul Ryan for Congress (WI/01) 31 West Milwaukee Street Janesville, WI 53543	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Robert Horne for Congress (MS/04) P.O. Box 23066 Jackson, MS 39225	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Steve Williams for Congress (KY/04) 454 Commonwealth Columbus, KY 40544	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Ernie Fletcher for Congress (KY/02) P.O. Box 4703 Lexington, KY 40544	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00
Robin Hayes for Congress (NC/08) 162 Church Street Columbus, NC 28025	Federal Contribution Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000.00

SUBTOTAL of Disbursements This Page (optional)

9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE B ITEMIZED DISBURSEMENTS
Other Disbursements

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

PAGES 3 OF 3
FOR LINE NUMBER 21

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NAME OF COMMITTEE (in Full)

Bill Thomas Campaign Committee #C00100537

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Scott Keable for Congress (NC/12) 480 West Park Drive Salem, NC 28477	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000. --
Thomnie Cook for Congress (UT/02) PO Box 11326 Salt Lake City, UT 84147	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000. --
G. D. Hayswood for Congress (AZ/04) PO Box 14273 Mesa, AZ 85260	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000. --
Ulice Snowberger for Congress (KS/03) PO Box 9001 Wichita, KS 67208	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000. --
Non Chair for Congress 4033 Radiance Ct Henderson, NV 89014	Federal Contributions Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/14/98	1,000. --
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

23,000.00

Debts Owed to the Committee **LOANS**

U.S. DEPARTMENT OF JUSTICE
 FEDERAL BUREAU OF INVESTIGATION

Name of Committee (in Full)

Bill Thomas Campaign Committee #0000015

A. Full Name, Mailing Address and ZIP Code of Loan Source People for Phil English P.O. Box 1940 Erie, PA 16572 Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan \$1,000.-	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period \$1,000.-
Terms: Date Incurred <u>4/17/94</u> Date Due <u>12/31/94</u> Interest Rate <u>0</u> % (year)		Get All Endorsers or Guarantors (if any) to Item A		

1. Full Name, Mailing Address and ZIP Code # C002836060	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		

B. Full Name, Mailing Address and ZIP Code of Loan Source Lindsey Proham for Congress 537 Cypress 123 Seneca, SO 28177 Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan \$1,000.-	Cumulative Payment To Date 0	Balance Outstanding at Close of This Period \$1,000.-
Terms: Date Incurred <u>10/27/94</u> Date Due <u>12/31/95</u> Interest Rate <u>0</u> % (year)		Get All Endorsers or Guarantors (if any) to Item B		

1. Full Name, Mailing Address and ZIP Code # C00292607	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding: \$		

TOTALS This Period This Page (optional)

TOTALS This Period (last page in this form only)

2,000.-

Carry outstanding balances only to LINE 3, Schedule D, for this line if no Schedule D carry forward to appropriate line of summary.

Debts Owed to the Committee LOANS

1/1/95
1/1/95

Name of Committee (in Full)
Bill Thomas Campaign Committee YC0020055

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

Ken Calvert for Congress
2938 Loma Street #110
Berkeley, CA 94707

Original Amount of Loan

\$1,000.00

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

\$1,000.00

Terms: Date Incurred 10/21/94 Date Due 12/31/95 Interest Rate 0%

List All Endorsers or Guarantors (if any) to Item A

Secured

1. Full Name, Mailing Address and ZIP Code

C00257337

Name of Employer

Occupation

Amount Guaranteed Outstanding \$

2. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding \$

3. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding \$

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

Orion Tribune for Congress
400 Geneva Avenue H102
Meriden CT 06450

Original Amount of Loan

\$1,000.00

Cumulative Payment To Date

0

Balance Outstanding at Close of This Period

\$1,000.00

Terms: Date Incurred 10/14/94 Date Due 12/31/95 Interest Rate 0%

List All Endorsers or Guarantors (if any) to Item B

Secured

1. Full Name, Mailing Address and ZIP Code

C00289868

Name of Employer

Occupation

Amount Guaranteed Outstanding \$

2. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding \$

3. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Amount Guaranteed Outstanding \$

TOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

2,000.00

Carry outstanding balance only to LINE 3, Schedule O, for this line. If no Schedule O, carry forward to the appropriate line of the next page.

SCHEDULE C

Revised 1/80

Debts Owed to the Committee **LOANS**

5 4
 1994
 9
 1994

Name of Committee (or Full)

Bill Thomas Campaign Committee #00101955

A. Full Name, Mailing Address and ZIP Code of Loan Source JC Watts for Congress PO Box 720361 Durham, NC 27071 Election: Primary General Other (specify)		Original Amount of Loan \$1,000.00	Cumulative Payment To Date \$	Balance Outstanding at Close of This Period \$1,000.00
Terms: Date Incurred <u>10/27/94</u> Date Due <u>12/31/94</u> Interest Rate <u>0</u> % (apr)		Secured		

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code # C00294145	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		

B. Full Name, Mailing Address and ZIP Code of Loan Source Jack Prescott for Congress 2111 8th Avenue West #A205 Everett, WA 98204 Election: Primary General Other (specify)		Original Amount of Loan \$1,000.00	Cumulative Payment To Date \$	Balance Outstanding at Close of This Period \$1,000.00
Terms: Date Incurred <u>10/27/94</u> Date Due <u>12/31/94</u> Interest Rate <u>0</u> % (apr)		Secured		

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code # C00287201	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		

BTOTALS This Period This Page (optional)

-ALS This Period (last page of this line only)

7,000

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

SCHEDULE C

(Revised 3/81)

Debt Owed to the Committee **LOANS**

1986
 1987
 1988
 1989
 1990
 1991
 1992
 1993
 1994
 1995
 1996
 1997
 1998
 1999
 2000
 2001
 2002
 2003
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 2018
 2019
 2020
 2021
 2022
 2023
 2024
 2025

Name of Committee (in Full)
Bill Thomas Campaign Committee #C0014051

A. Full Name, Mailing Address and ZIP Code of Loan Source <i>Bob Ehrlich for Congress</i> <i>1577 York Road</i> <i>Jacksonville, MO 64503</i> Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan <i>\$1,000.00</i>	Cumulative Payment To Date <i>0</i>	Balance Outstanding at Close of This Period <i>\$1,000.00</i>
Terms: Date Incurred <i>10/27/94</i> Date Due <i>12/31/96</i> Interest Rate <i>0</i> % (APR) Secured <input type="checkbox"/>		List All Endorsers or Guarantors (if any) to Item A.		

1. Full Name, Mailing Address and ZIP Code <i>#C00286943</i>		Name of Employer	[Shaded]	[Shaded]
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer	[Shaded]	[Shaded]
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer	[Shaded]	[Shaded]
		Occupation		
		Amount Guaranteed Outstanding: \$		

B. Full Name, Mailing Address and ZIP Code of Loan Source <i>John Fox for Congress</i> <i>36 Skippack Pike</i> <i>Rowley, PA 19088</i> Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Original Amount of Loan <i>\$1,000.00</i>	Cumulative Payment To Date <i>0</i>	Balance Outstanding at Close of This Period <i>\$1,000.00</i>
Terms: Date Incurred <i>9/30/96</i> Date Due <i>10/31/96</i> Interest Rate <i>0</i> % (APR) Secured <input type="checkbox"/>		List All Endorsers or Guarantors (if any) to Item B.		

1. Full Name, Mailing Address and ZIP Code		Name of Employer	[Shaded]	[Shaded]
		Occupation		
		Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code		Name of Employer	[Shaded]	[Shaded]
		Occupation		
		Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code		Name of Employer	[Shaded]	[Shaded]
		Occupation		
		Amount Guaranteed Outstanding: \$		

TOTALS This Period This Page (optional) *2,000.00*
 TOTALS This Period (last page in this form only) *2,000.00*
 Carry outstanding balance only to LINE 3, Schedule D, for this year. If no Schedule D, carry interest to your personal tax return.

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

FORM 1120-SS
LINE NUMBER 7
Use separate schedules
for each numbered line

Name of Committee (in Full) #C00100537 Bill Thomas Campaign Committee	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				0
2) TOTALS This Period (last page in this line only)				0
3) TOTAL OUTSTANDING LOANS from Schedule G (last page only)				\$ 000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				\$ 000.00

owed to Committee

\$ 000.00
\$ 000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>10-22-98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>KAT</i> PREPARER	<i>10-22-98</i> DATE PREPARED