

Tom Roberg for Congress.

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

North Carolina -- 4th Congressional District

SEP 4 12 25 PM '98

August 31, 1998

Pat Sheppard
Reports Analysis Division
Federal Election Commission
999 E St., NW
Washington, DC 20463

Identification Number: C00327601

Reference: Pre-Primary Report (7/1/98-8/26/98)

Dear Pat:

Please find enclosed the committee's Pre-Primary Report . Also find the committee's best effort letter. Thank you for your assistance and if I can be of further help to you, please feel free to call.

Sincerely,



Jeff Mixon
Records Consultant

Tom Roberg for Congress

North Carolina -- 4th Congressional District

August 31, 1998

Prefix *First/Middle* *Last*
Address
City, *State* *zip*

Dear *Salutation*:

First, let me thank you again for your support of Tom Roberg. The campaign needs your help with another matter. The Federal Election Commission requires that we report the occupation and employer of each contributor who gives greater than \$200 in a calendar year.

Please fill in the information in the blanks listed below.

Occupation _____

Employer _____

Signature _____

I have enclosed a return envelop for your convenience. Thank you for your time and I look forward to hearing from you.

Sincerely,

Jeff Nixon
Records Consultant

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

SEP 4 12 25 PM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

C00327601 NC/04 081098 N HEYDT J PHILBECK ROBERG FOR CONGRESS PO BOX 98509 RALEIGH NC 27624	2. FEC IDENTIFICATION NUMBER C00327601 3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input checked="" type="checkbox"/> 12-Day Pre-Election Report for the <u>Primary</u> (Type of Election) election on <u>9/15/98</u> in the State of <u>NC</u>
<input type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> 30-Day Post-Election Report for the _____ (Type of Election) election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Termination Report
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	

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

SUMMARY

5. Covering Period <u>7/1/98</u> through <u>8/26/98</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))	30,036.00	125,655.67
(b) Total Contribution Refunds (from Line 20(d))	--0--	--0--
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	30,036.00	125,655.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	105,503.03	189,406.84
(b) Total Offsets to Operating Expenditures (from Line 14)	--0--	--0--
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	105,503.03	189,406.84
8. Cash on Hand at Close of Reporting Period (from Line 27)	60,796.04	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--	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	120,000.00	

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 - Records Consultant	
Jeffrey Nixon	Date
	8/31/98

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:	
Tom Roberg for Congress Committee - 98	From: 7/1/98	To: 8/26/98
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)	14,166.00	
(ii) Unitemized	10,560.00	
(iii) Total of contributions from individuals	24,726.00	116,246.67
(b) Political Party Committees	310.00	4,409.00
(c) Other Political Committees (such as PACs)	5,000.00	5,000.00
(d) The Candidate	--0--	--0--
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)iii, (b), (c) and (d))	30,036.00	125,655.67
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	--0--	--0--
13. LOANS:		
(a) Made or Guaranteed by the Candidate	25,000.00	70,000.00
(b) All Other Loans	--0--	--0--
(c) TOTAL LOANS (add 13(a) and (b))	25,000.00	70,000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	--0--	--0--
15. OTHER RECEIPTS (Dividends, Interest, etc.)	--0--	--0--
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	55,036.00	195,655.67
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	105,503.03	189,406.84
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--	--0--
(b) Political Party Committees	--0--	--0--
(c) Other Political Committees (such as PACs)	--0--	--0--
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	--0--	--0--
21. OTHER DISBURSEMENTS	--0--	85.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	105,503.03	189,491.84

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ 111,263.07		23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$ 55,036.00		24
25. SUBTOTAL (add Line 23 and Line 24)	\$ 166,299.07		25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$ 105,503.03		26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$ 60,796.04		27

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William J. Terry 10729 Winding Wood Tr. Raleigh NC 27613	Self	7/14/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Photographer	Aggregate Year-to-Date > \$	\$550.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William B. Carraway 39522 Glenn Glade Chapel Hill NC 27514	Tarheel Development	7/14/98	\$100.00 G98
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Builder	Aggregate Year-to-Date > \$	\$1250.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Thomas J. Gibbons 1209 Hedgelawn Way Raleigh NC 27615		8/26/98	\$251.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$251.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ronald T. Conner 6500 Whitted Rd. Fuquay Varina NC 27526	Div. 10 CSI	7/14/98	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Self Employed	Aggregate Year-to-Date > \$	\$400.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ron E. Doggett 1904 Chase Ct. Raleigh NC 27607	Goodmark Foods	7/6/98	\$290.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CEO	Aggregate Year-to-Date > \$	\$415.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert H. Appley 207 Watts St. Durham NC 27701	US Navy	7/3/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$750.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert L. Luddy 1912 Chalks Rd. Wake Forest NC 27587	Captive Air System	7/20/98	\$1000.00 G98
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	\$1000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 6
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert A. Schwager 1534 Dirkson Ct. Cary NC 27511	Retired	8/26/98	\$30.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$315.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert L. Zucker 6829 Greystone Dr. Raleigh NC 27615	Best Efforts	8/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard C. Miller 9933 Kouplea Dr. Raleigh NC 27614	Best Efforts	8/5/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard H. Morgan 12605 Waterman Drive Raleigh NC 27614	Best Efforts	8/26/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Phil Rominger 1002 Willow Dr. Chapel Hill NC 27514	Retired	8/24/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pat H. Gillespie 8605 Highhill Rd. Raleigh NC 27615	Retired	8/20/98	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$400.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael C. Pucci 208 Clafin Ct. Raleigh NC 27614	Marketing executive	8/5/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$250.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **3** OF **6**
FOR LINE NUMBER **11a1**

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NAME OF COMMITTEE (In Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Jane Chandler 214 Brookridge Dr. Cary NC 27511	Retired	7/14/98	\$70.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$210.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kieran J. Shanahan 9113 Kirkhill Dr. Raleigh NC 27615-1960	Patton Boggs Attorney	7/14/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joy Pope 2520 Glenwood Avenue Raleigh NC 27608	Homemaker	8/26/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John B. Parker 513 Annandale Dr. Cary NC 27511	Self Textiles	7/15/98 7/15/98	\$500.00 \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$2000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John F. Milliken 687 Fearrington Post Pittsboro NC 27312	Retired	8/10/98	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$370.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John W. Pope 2520 Glenwood Avenue Raleigh NC 27608	Variety Wholesaler Pres.	8/26/98	\$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jean Pettit Smith 106 Dumbarton Ct. Cary NC 27511	Fonville Morisey VP Sales	7/14/98 8/24/98	\$70.00 \$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$	\$445.00	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 6
 FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James A. Pope 304 Forsyth St. Raleigh NC 27609	Variety Wholesalers	8/26/98 8/26/98	\$500.00 P98 \$500.00 G98
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP	Aggregate Year-to-Date > \$	\$1000.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
I. Allan From 6909 Slade Hill Rd. Raleigh NC 27615	Self	7/14/98	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$400.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Helen Mitchell 3424 Williamsborough Ct. Raleigh NC 27609		7/15/98	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Community volunteer	Aggregate Year-to-Date > \$	\$225.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gregory W. Stafford 68 Carson Ct. Pittsboro NC 27312	Self	7/16/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$	\$250.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
George M. Stephens 3307 Glen Henry Dr. Raleigh NC 27612	Stephens Associate	7/3/98	\$35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$320.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred A. Stone 2801 Lakeview Dr. Raleigh NC 27609	Stone Heavy Duty	7/15/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation business	Aggregate Year-to-Date > \$	\$250.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank J. Turner 2528 White Oak Road Raleigh NC 27609	GJ Turner Co.	8/14/98	\$500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date > \$	\$500.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 6
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Francis C. Bagbey 103 Greenpark Ln. Cary NC 27511	Self	8/5/98	\$75.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Lawyer	Aggregate Year-to-Date > \$	\$300.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fenton N. Hord 317 Cambridge Woods Way Raleigh NC 27608	Carolina Holdings	8/5/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pres.	Aggregate Year-to-Date > \$	\$500.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Edward O. Grieve 100 Citreon Ct. Cary NC 27511	Edge	7/14/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$	\$375.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald Henson 27415 Walker, Governors Club Chapel Hill NC 27514	Self	8/5/98	\$400.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Dentist	Aggregate Year-to-Date > \$	\$600.00
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis L. Moore 1105 Ivy Ln. Raleigh NC 27609	Self	7/14/98	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Software Sales	Aggregate Year-to-Date > \$	\$575.00
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Wolf 105 Countryside Ln. Cary NC 27511-9713	Villard & Assoc.	8/13/98	\$175.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$	\$650.00
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David G. Olmsted 2504 Catalina Ct. Raleigh NC 27607		8/24/98	\$150.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$	\$250.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 6
FOR LINE NUMBER 11a

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David A. Rendleman 321 Cambridge Woods Way Raleigh NC 27608	Self	8/24/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		
	Aggregate Year-to-Date > \$	\$250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles W. Gaddy PO Box 19307 Raleigh NC 27619	Gaddy Real Estate	7/15/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Realtor		
	Aggregate Year-to-Date > \$	\$250.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ben M. Meares 412 Drummond Drive Raleigh NC 27609		8/26/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician		
	Aggregate Year-to-Date > \$	\$250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Audrey O. Heiser 225 Kentview Dr. Pittsboro NC 27312-5876		8/26/98	\$60.00 G98
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$60.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Arthur P. Reimers 5321 North Hills Dr. Raleigh NC 27612		8/20/98	\$60.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$	\$275.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allyson L. Pass 1155 Club Lake Rd. Roxboro NC 27573	Poyner & Assoc.	7/15/98	\$250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Real Estate		
	Aggregate Year-to-Date > \$	\$250.00	
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)

TOTAL This Period (last page this line number only)

14,166.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11b

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NAME OF COMMITTEE (In Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Bryant for Senate Committee PO Box 488 Raleigh NC 27602-0488	Non Federal Cand.	7/15/98	\$35.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$35.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Republican Women of Chatham Coun 564 Fearrington Post Pittsboro NC 27312		8/24/98	\$200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$200.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Wake County Republican Women's C 3109 Woodgreen Drive Raleigh NC 27607		8/26/98	\$75.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	\$75.00
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

310.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nat. Fed. of Ind. Business SAFB Trust 600 Maryland Ave. S.W. Suite 700 Washington DC 20024	Trust	8/26/98	\$5000.00 G
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 5000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

5,000.00

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tom Roberg 2108 Prescott Pl. Raleigh, NC 27624 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Loan from Personal Funds Occupation: VP/Global Software Aggregate Year-to-Date > \$ 70,000.00	8/26/98	25,000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

25,000.00

LOANS

Name of Committee (in Full) Tom Roberg for Congress Committee - 98			
A. Full Name, Mailing Address and ZIP Code of Loan Source Tom Roberg **personal funds** 2108 Prescott Place Raleigh, NC 27624	Original Amount of Loan 25,000.00	Cumulative Payment To Date --0--	Balance Outstanding at Close of This Period 25,000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred <u>8/26/98</u> Date Due <u>n/a</u> Interest Rate <u>n/a</u> % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	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			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Terms: Date Incurred _____ Date Due _____ Interest Rate _____ % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	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: \$		
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line only)			120,000.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

NO FURTHER ENTRIES ON THIS PAGE

LOANS

Name of Committee (in Full) Tom Roberg for Congress Committee - '98				
A. Full Name, Mailing Address and ZIP Code of Loan Source Tom Roberg **personal Funds** 2108 Prescott Pl. Raleigh, NC 27624		Original Amount of Loan 20,000.00	Cumulative Payments To Date --0--	Balance Outstanding at Close of This Period 20,000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Terms: Date Incurred <u>6/25/98</u> Date Due <u>n/a</u> Interest Rate <u>n/a</u> % (apr)		<u>n/a</u> Secured
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code	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 Tom Roberg **personal Funds** 2108 Prescott Pl. Raleigh, NC 27624		Original Amount of Loan 25,000.00	Cumulative Payment To Date --0--	Balance Outstanding at Close of This Period 25,000.00
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Terms: Date Incurred <u>3/30/98</u> Date Due <u>n/a</u> Interest Rate <u>n/a</u> % (apr)		<u>n/a</u> Secured
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code	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: \$			

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

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

LOANS

Name of Committee (in Full)

- Tom Roberg for Congress Committee - '98

A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Tom Roberg **Personal Funds** 2108 Prescott Pl. Raleigh, NC 27624 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	25,000.00	--0--	25,000.00

Terms: Date Incurred 12/23/97 Date Due n/a Interest Rate n/a % (app) n/a Secured

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

1. Full Name, Mailing Address and ZIP Code	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	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Tom Roberg **Personal Funds** 2108 Prescott Pl. Raleigh, NC 27624 Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	25,000.00	--0--	25,000.00

Terms: Date Incurred 7/2/97 Date Due n/a Interest Rate n/a % (app) n/a Secured

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

1. Full Name, Mailing Address and ZIP Code	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:
			\$

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

95,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 6
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CLG, Inc. 3001 Spring Forest Road Raleigh, NC 27616	Computer Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$158.00
B. Full Name, Mailing Address and ZIP Code Darren G. Friedlein & Associates, Inc. P.O. Box 32216 Raleigh, NC 27622-2216	Computer Work Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$125.56
C. Full Name, Mailing Address and ZIP Code The Copy Center 2800 Spring Forest Rd. Raleigh, NC 27616	Copying Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$233.20
D. Full Name, Mailing Address and ZIP Code Brownstone Hotel 1707 Hillsborough Street Raleigh, NC 27605	Event Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$4,817.28
E. Full Name, Mailing Address and ZIP Code Holiday Inn 4810 Page Road Durham, NC 27703	Event Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/13/98	\$1,520.04
F. Full Name, Mailing Address and ZIP Code Rotterman & Associates PO Box 99667 Raleigh, NC 27624	Event Expenses Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$108.20
G. Full Name, Mailing Address and ZIP Code Ruefferts 902 W. Vernon Ave. Kinston, NC 28501	Event Photography Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$388.72
H. Full Name, Mailing Address and ZIP Code Todd Strunk 131 Waltons Creek Road Morrisville, NC 27560	Food - Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$8.99
I. Full Name, Mailing Address and ZIP Code Rotterman & Associates PO Box 99667 Raleigh, NC 27624	Fundraising Consulting Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98 7/31/98	\$3,000.00 \$3,000.00

SUBTOTAL of Disbursements This Page (optional)

\$13,368.41

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 6

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Carolina Fiber Comm. 3812-E Tarheel Drive Raleigh, NC 27609	Install Phone System Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98	\$351.50
B. Full Name, Mailing Address and ZIP Code Sains & Associates 1366 Startown Road Lincolnton, NC 28082	Purpose of Disbursement Internal Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/24/98	Amount of Each Disbursement This Period \$315.00
C. Full Name, Mailing Address and ZIP Code AT & T P.O. Box 78225 Phoenix, AZ 85062	Purpose of Disbursement Long Distance Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/31/98	Amount of Each Disbursement This Period \$18.31
D. Full Name, Mailing Address and ZIP Code Sid Fish 449 Oak Manor Lane Fuquay-Varina, NC 27526	Purpose of Disbursement Lumber Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/5/98	Amount of Each Disbursement This Period \$378.00
E. Full Name, Mailing Address and ZIP Code ASAP Direct Mail 2424 Atlantic Ave. Raleigh, NC 27604	Purpose of Disbursement Mail Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/1/98 7/1/98	Amount of Each Disbursement This Period \$3,051.96 \$185.02
F. Full Name, Mailing Address and ZIP Code ASAP Direct Mail 2424 Atlantic Ave. Raleigh, NC 27604	Purpose of Disbursement Mail Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/10/98 8/20/98	Amount of Each Disbursement This Period \$1,001.39 \$891.72
G. Full Name, Mailing Address and ZIP Code Locke Foundation 1304 Hillsborough Street Raleigh, NC 27605	Purpose of Disbursement Meal Expense Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/2/98	Amount of Each Disbursement This Period \$15.00
H. Full Name, Mailing Address and ZIP Code Rotterman & Associates Media Placement Account PO Box 99887 Raleigh, NC 27624	Purpose of Disbursement Media Placement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/13/98 7/15/98 7/17/98	Amount of Each Disbursement This Period \$3,834.20 \$2,090.00 \$1,333.78
I. Full Name, Mailing Address and ZIP Code Rotterman & Associates Media Placement Account PO Box 99887 Raleigh, NC 27624	Purpose of Disbursement Media Placement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/20/98 7/20/98 7/21/98	Amount of Each Disbursement This Period \$38,171.35 \$2,190.00 \$990.00

SUBTOTAL of Disbursements This Page (optional)

\$54,715.21

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 6
FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rotterman & Associates Media Placement Account PO Box 59667 Raleigh, NC 27624	Media Placement	7/21/98	\$800.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	7/23/98	\$1,050.00
	<input type="checkbox"/> Other (specify)	7/31/98	\$5,000.00
Rotterman & Associates PO Box 59667 Raleigh, NC 27624	Media Placement	7/31/98	\$500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	8/1/98	\$4,500.00
	<input type="checkbox"/> Other (specify)	8/18/98	\$3,780.00
Rotterman & Associates PO Box 59667 Raleigh, NC 27624	Media Placement	8/19/98	\$1,000.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
Todd Strunko 131 Wallons Creek Road Morrisville, NC 27560	Mileage	7/31/98	\$68.16
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	8/20/98	\$75.60
	<input type="checkbox"/> Other (specify)		
Carolina Clipping Service 1115 Hillsborough St. Raleigh, NC 27603	News Clips	7/1/98	\$117.94
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		
Office Depot 4500 Falls of Neuse Road Raleigh, NC 27608	Office Supplies	7/13/98	\$77.01
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	8/3/98	\$10.23
	<input type="checkbox"/> Other (specify)	8/10/98	\$21.50
Paychex 4825 Creekstone Drive Durham, NC 27709	Payroll	7/1/98	\$81.60
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	8/3/98	\$76.15
	<input type="checkbox"/> Other (specify)		
Paychex 4825 Creekstone Drive Durham, NC 27709	Payroll Taxes	7/3/98	\$670.82
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	7/17/98	\$419.38
	<input type="checkbox"/> Other (specify)	7/31/98	\$416.64
Paychex 4825 Creekstone Drive Durham, NC 27709	Payroll Taxes	8/1/98	\$409.38
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) \$10,868.41

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 6
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BellSouth P.O. Box 70607 Charlotte, NC 28272-0607	Phone Service	7/1/98 7/31/98	\$307.56 \$364.51
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Roteman & Associates PO Box 96667 Raleigh, NC 27624	Phone Service	7/31/98	\$21.73
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Roteman & Associates PO Box 96667 Raleigh, NC 27624	Polling	7/13/98	\$4,533.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Jeff Nixon 105 Kingsley Wood Circle Durham, NC 27703	Postage	7/18/98	\$12.64
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
U.S. Postmaster Post Office Raleigh, NC 27624	Postage	7/2/98 7/20/98 7/24/98	\$64.00 \$67.00 \$64.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
U.S. Postmaster Post Office Raleigh, NC 27624	Postage	8/5/98 8/11/98 8/17/98	\$6.36 \$30.00 \$96.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Triad Graphics 2013-K New Hope Church Rd. Raleigh, NC 27604	Printing	7/1/98	\$248.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
CN Investors, LLC c/o Anthony & Co. P.O. Box 10810 Raleigh, NC 27605-0810	Rent	7/1/98 7/31/98	\$1,364.54 \$1,362.54
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
Todd Stumke 131 Walkers Creek Road Morrisville, NC 27560	Salary	7/3/98 7/17/98 7/31/98	\$1,226.96 \$951.25 \$951.25
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$5,821.99

TOTAL This Period (last page this line number only)

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Todd Strunka 131 Walters Creek Road Morrisville, NC 27560	Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/98	\$651.25
B. Full Name, Mailing Address and ZIP Code Eddie Hendley 551 Sage Field Drive Henderson, NC 27538	Purpose of Disbursement Signs Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/4/98	\$1,650.00
C. Full Name, Mailing Address and ZIP Code Ace Hardware 8198 Falls of Neuse Road Raleigh, NC 27609	Purpose of Disbursement Staple Guns Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/98	\$59.90
D. Full Name, Mailing Address and ZIP Code Todd Strunka 131 Walters Creek Road Morrisville, NC 27560	Purpose of Disbursement Supplies - Reimbursement Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/98	\$20.89
E. Full Name, Mailing Address and ZIP Code Videofonics 1610 Midtown Place Raleigh, NC 27609	Purpose of Disbursement Video Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/17/98 7/31/98 8/3/98	\$182.47 \$2,671.80 \$84.48
F. Full Name, Mailing Address and ZIP Code Videofonics 1610 Midtown Place Raleigh, NC 27609	Purpose of Disbursement Video Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/6/98 8/17/98 8/18/98	\$16.90 \$856.80 \$140.00
G. Full Name, Mailing Address and ZIP Code Videofonics 1610 Midtown Place Raleigh, NC 27609	Purpose of Disbursement Video Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/98	\$32.86
H. Full Name, Mailing Address and ZIP Code Videofonics 1610 Midtown Place Raleigh, NC 27609	Purpose of Disbursement Video Services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/21/98	\$16.96
I. Full Name, Mailing Address and ZIP Code K-Mart 8200 Capital Boulevard Raleigh, NC 27619	Purpose of Disbursement Video Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/98	\$18.48

SUBTOTAL of Disbursements This Page (optional)

\$12,432.31

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 6 OF 6
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Tom Roberg for Congress Committee - 98

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Wal-Mart 6600 Glenwood Avenue Raleigh, NC 27612	Video Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/3/98	\$31.72
B. Full Name, Mailing Address and ZIP Code Dick Ellis 905 7th Ave., 36-D Gamer, NC 27529	Voice Talent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/14/98	\$100.00
C. Full Name, Mailing Address and ZIP Code Rainbow Water 3534 Wortham Street Durham, NC 27705	Water Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/98	\$9.54
D. Full Name, Mailing Address and ZIP Code TNT Internet Express P.O. Box 522 Denver, NC 28037	Web Access Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/1/98 7/31/98	\$105.00 \$15.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$296.70


TOTAL This Period (last page this line number only)

\$105,509.00

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 8-31-98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	9-4-98 DATE PREPARED