

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

SEP 18 9 30 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.
POLITICAL ACTION FOR CANDIDATE ELECTION

ADDRESS (number and street) Check if different than previously reported
750 FIRST STREET, NE, SUITE 700

CITY, STATE and ZIP CODE
WASHINGTON, DC 20002-4241

2. FEC IDENTIFICATION NUMBER
C-000-60-707

3. This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

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

Monthly Report Due On:

- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

- Twelfth day report preceding _____ (Type of Election)
election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
_____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>8/1/98</u> through <u>8/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 530,980.38
(b) Cash on Hand at Beginning of Reporting Period	\$ 604,714.90	
(c) Total Receipts (from Line 19)	\$ 1,112.56	\$ 444,519.43
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 605,827.46	\$ 975,499.81
7. Total Disbursements (from Line 30)	\$ 60,891.00	\$ 430,563.35
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 544,936.46	\$ 544,936.46
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 35,763.31	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Tel Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

Keith Unemoto

Signature of Treasurer

Toby Weismiller, Assistant Treasurer

Toby Weismiller

Date

9-15-98

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 3X

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE		REPORT COVERING PERIOD	
NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC. POLITICAL ACTION FOR CANDIDATE ELECTION		FROM 8/1/98	TO 8/31/98
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			5,000.00
ii. Unitemized	20.00	428,140.55	
iii. Total (add i and ii) >	20.00	433,140.55	
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contributions (add a iii, b and c) >	20.00	433,140.55	
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			87.83
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)	1,092.56	11,291.05	
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	1,112.56	444,519.43	
20. Total Federal Receipts (subtract line 18 from line 19) >	1,112.56	444,519.43	
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share	7.50	86,487.31	
b. Other Federal Operating Expenditures	7.50	86,487.31	
c. Total Operating Expenditures (add a i, a ii, and b) >	7.50	86,487.31	
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees	17,100.00	120,850.00	
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >	43,783.50	223,226.04	
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	60,891.00	430,563.35	
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	60,891.00	430,563.35	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	20.00	433,140.55	
33. Total Contribution Refunds (from line 28d)	-.-	-.-	
34. Net Contributions (other than loans)(subtract line 33 from 32)	20.00	433,140.55	
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	7.50	86,487.31	
36. Offsets to Operating Expenditures (from line 15)	-.-	87.83	
37. Net Operating Expenditures (subtract line 36 from 35) >	20.00	86,399.48	

SCHEDULE A

ITEMIZED RECEIPTS

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

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) NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.
POLITICAL ACTION FOR CANDIDATE ELECTION

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Merrill Lynch 1850 K Street, NW, 7th Floor - Washington, D 20006		8/31/98	1,005.20
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dividends Acct #749-04B65	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
Merrill Lynch 1850 K Street, NW, 7th Floor Washington, DC 20006		8/31/98	84.08
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Dividends Acct #749-07R	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
MJ Whitman Bear, Stearns Securities Corp. One Metrotech Center North Brooklyn, NY 11201-3859		8/28/98	3.28
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Dividends	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)	1,092.56
TOTAL This Period (last page this line number only)	1,092.56

SCHEDULE B

ITEMIZED DISBURSEMENTS

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) NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.
POLITICAL ACTION FOR CANDIDATE ELECTION

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NationsBank P.O. Box 27025 Richmond, VA 23261-7025	Discount fee for credit cards receipts Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/98	7.50
B. 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
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	7.50
TOTAL This Period (last page this line number only)	7.50

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

**NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.
POLITICAL ACTION FOR CANDIDATE ELECTION**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for John Olver for Congress 38 Ivey St., S.E. Washington, DC 20003	MA-1 Campaign Contribution YTD \$1,000.00 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2301 8/3/98	500.00
Citizens for Gilman c/o Frank Cull P.O. Box 735 Pearl River, NY 10965	NY-20 Campaign Contribution YTD \$100.00 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2315 8/20/98	100.00
Dottie Lamm '98 P.O. Box 6617 Denver, CO 80206	SEN-CO Campaign Contribution YTD 5,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2316 8/20/98	5,000.00
Friends of Dan Beville P.O. Box 3165 Jasper, AL 35501	AL-4 Campaign Contribution YTD \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2317 8/20/98	1,000.00
Friends of Bud Cramer 223 Eastside Square Huntsville, AL 35801	AL-5 Campaign Contribution YTD \$500.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2318 8/20/98	500.00
Napolitano for Congress P.O. Box 408 Norwalk, CA 90650	CA-34 Campaign Contribution YTD \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2319 8/20/98	1,000.00
Steve Horn for Congress 3944 Pine Ave. Long Beach, CA 90807	CA-38 Campaign Contribution YTD \$500.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2320 8/20/98	500.00
Friends of Jim Maloney 240 Main St., Suite 3 Danbury, CT 06810	CT-5 Campaign Contribution YTD \$500.00 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2321 8/20/98	500.00
Linder for Congress P.O. Box 942060 Chamblee, GA 31141	GA-11 Campaign Contribution YTD \$500.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2322 8/20/98	1,000.00

SUBTOTAL of Disbursements This Page (optional)

10,100.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full) NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.
POLITICAL ACTION FOR CANDIDATE ELECTION

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Boswell for Congress Campaign Committee 207 W First Ave. Indianola, IA 50125	IA-3 Campaign Contribution YTD \$500.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK 2323 8/20/98	500.00
B. Full Name, Mailing Address and ZIP Code Debbie Stabenow for Congress P.O. Box 4945 East Lansing, MI 48826	MI-6 Campaign Contribution YTD \$4,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2324 8/20/98	2,000.00
C. Full Name, Mailing Address and ZIP Code Shows for Congress 415 Yazoo Street, Suite #203 Jackson, MS 39201	MS-4 Campaign Contribution YTD \$500.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2325 8/20/98	500.00
D. Full Name, Mailing Address and ZIP Code Friends of Maurice Hinchey P.O. Box 4497 Kingston, NY 12402	NY-26 Campaign Contribution YTD \$1,000.00 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2326 8/20/98	1,000.00
E. Full Name, Mailing Address and ZIP Code David Wu for Congress 921 SW Morrison, Suite 208A Portland, OR 97205	OR-1 Campaign Contribution YTD \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2327 8/20/98	1,000.00
F. Full Name, Mailing Address and ZIP Code Casey for Congress P.O. Box 1494 Scranton, PA 18501	PA-10 Campaign Contribution YTD \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2328 8/20/98	1,000.00
G. Full Name, Mailing Address and ZIP Code Jane Frederick for Congress Committee P.O. Box 505 Beaufort, SC 29901	SC-2 Campaign Contribution YTD \$1,000.00 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2329 8/20/98	1,000.00
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)	7,000.00
TOTAL This Period (last page this line number only)	17,100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.
POLITICAL ACTION FOR CANDIDATE ELECTION

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution/Non-federal	Date (month, day, year)	Amount of Each Disbursement This Period
Colorado PACE c/o Colorado Chapter, NASW 6500 E. Evans, BLDG. 1, Suite 121 Denver, CO 80222	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2302 8/3/98	2,842.68
B. Full Name, Mailing Address and ZIP Code Connecticut PACE c/o Connecticut Chapter, NASW 2139 Silas Deane Highway, Suite 205 Rocky Hill, CT 06067	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2303 8/3/98	4,437.00
C. Full Name, Mailing Address and ZIP Code New York State PACE c/o New York State Chapter, NASW 188 Washington Avenue Albany, NY 12210	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2304 8/3/98	15,298.43
D. Full Name, Mailing Address and ZIP Code Alabama PACE c/o Alabama Chapter, NASW Governors Park II 2921 Marti Lane, Suite G Montgomery, AL 36116	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2305 8/5/98	990.00
E. Full Name, Mailing Address and ZIP Code Minnesota PACE c/o Minnesota Chapter, NASW 480 Concordia Avenue St. Paul, MN 55103	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2306 8/5/98	2,445.75
F. Full Name, Mailing Address and ZIP Code North Carolina PACE c/o North Carolina Chapter, NASW P.O. Box 27582 Raleigh, NC 27611-7582	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2307 8/5/98	4,000.00
G. Full Name, Mailing Address and ZIP Code Iowa PACE c/o Iowa Chapter, NASW 4211 Grand Avenue, Level 3 Des Moines, IA 50312	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2308 8/20/98	1,482.75
H. Full Name, Mailing Address and ZIP Code Indiana PACE c/o Indiana Chapter, NASW 1100 WEST 42nd Street, Suite 316 Indianapolis, IN 46208	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2309 8/20/98	3,708.79
I. Full Name, Mailing Address and ZIP Code Mississippi PACE c/o Mississippi Chapter, NASW P.O. Box 4228 Jackson, MS 39216	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2310 8/20/98	639.00

SUBTOTAL of Disbursements This Page (optional)

35,844.60

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 2
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full) NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC.
POLITICAL ACTION FOR CANDIDATE ELECTION

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ohio PACE c/o Ohio Chapter, NASW 118 E. Main St., Suite 3 West Columbus, OH 43215	Contribution/Non-federal Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2311 8/20/98	4,746.15
B. Full Name, Mailing Address and ZIP Code Oklahoma PACE c/o Oklahoma Chapter, NASW 116 East Sheridan, Ste. #210 Oklahoma City, OK 73104-2419	Contribution/Non-federal Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2312 8/20/98	1,275.75
C. Full Name, Mailing Address and ZIP Code Utah PACE c/o Utah Chapter, NASW University of Utah Graduate School of Social Work Salt Lake City, UT 84112	Contribution Non-federal Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2313 8/20/98	1,376.55
D. Full Name, Mailing Address and ZIP Code Vermont PACE c/o Vermont Chapter, NASW P.O. Box 1348 Montpelier, VT 05601	Contribution Non-federal Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	CK #2314 8/20/98	540.45
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)

7,938.90

TOTAL This Period (last page this line number only)

43,783.50

SCHEDULE D
 (Revised 3/80)

DEBTS AND OBLIGATIONS
 Excluding Loans

Name of Committee (In Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
NATIONAL ASSOCIATION OF SOCIAL WORKERS, INC. POLITICAL ACTION FOR CANDIDATE ELECTION				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor NASH PACE INVESTMENT ACCOUNT MERRILL LYNCH ACCOUNT #749-04E18 1850 K STREET, NW, 7th FLOOR WASHINGTON, DC 20006	35,211.51	(1) 687.80	(2) 136.00	35,763.31
Nature of Debt (Purpose): TESTAMENTARY REQUEST FROM ALFRED B. TAYLOR				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor (1) Dividends (2) Unrealized depreciation in value of investment				
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)				35,763.31
2) TOTALS This Period (last page in this line only)				35,763.31
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				35,763.31

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>9-18-98</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>See</i> PREPARER	<i>9-18-98</i> DATE PREPARED