

REPORT OF RECEIPTS AND DISBURSEMENTS **CERTIFIED MAIL** For An Authorized Committee (Summary Page) **JUL 27 1995**

RECEIVED
 95 AUG -7 AM 9:33
 OFFICE OF THE CLERK
 HOUSE OF REPRESENTATIVES

USE FEC MAILING LABEL
 OR
 TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
 Ewing for Congress Committee

ADDRESS (number and street) ☐ Check if different than previously reported.
 P.O. Box 3305

CITY, STATE and ZIP CODE: STATE/DISTRICT
 Bloomington, Illinois 61702-3305 IL/15

2. FEC IDENTIFICATION NUMBER
 C00250555

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ Twelfth day report preceding election on _____ in the State of _____
- ☐ July 15 Quarterly Report ☐ Thirtieth day report following the General Election on _____ in the State of _____
- ☐ October 15 Quarterly Report
- ☐ January 31 Year End Report
- ☒ July 31 Mid-Year Report (Non-election Year Only) ☐ Termination Report

This report contains activity for ☒ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election


SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
1/1/95 through 6/30/95		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	149,493.88	149,493.88
(b) Total Contribution Refunds (from Line 20(d))	.00	.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	149,493.88	149,493.88
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	53,486.69	53,486.69
(b) Total Offsets to Operating Expenditures (from Line 14)	1,251.63	1,251.63
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	52,235.06	52,235.06
8. Cash on Hand at Close of Reporting Period (from Line 27)	199,164.55	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	.00	

For further information contact:
 Federal Election Commission
 999 E Street, NW
 Washington, DC 20463
 Toll Free 800-424-9530
 Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
 William D. Sulaski

Signature of Treasurer  Date
 7/26/95

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

--	--	--	--	--	--	--	--	--	--

FEC FORM 3
 (revised 4/87)

DETAILED SUMMARY PAGE

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

Name of Committee (in full) Ewing for Congress Committee		C00250555		Report Covering the Period: From: 1/1/95 To: 6/30/95	
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)				35,275.00	
(ii) Unitemized				23,683.00	
(iii) Total of contributions from individuals				58,958.00	58,958.00
(b) Political Party Committees				235.88	235.88
(c) Other Political Committees (such as PACs)				90,300.00	90,300.00
(d) The Candidate00	.00
(e) TOTAL CONTRIBUTIONS (other than loans)(add 11(a)(iii), (b), (c) and (d))				149,493.88	149,493.88
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES					
13. LOANS:					
(a) Made or Guaranteed by the Candidate					
(b) All Other Loans					
(c) TOTAL LOANS (add 13(a) and (b))					
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)				1,251.63	1,251.63
15. OTHER RECEIPTS (Dividends, Interest, etc.)				1,223.28	1,223.28
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)				151,968.79	151,968.79
II. DISBURSEMENTS					
17. OPERATING EXPENDITURES				53,486.69	53,486.69
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES					
19. LOAN REPAYMENTS:					
(a) Of Loans Made or Guaranteed by the Candidate					
(b) Of All Other Loans					
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))					
20. REFUNDS OF CONTRIBUTIONS TO:					
(a) Individuals/Persons Other Than Political Committees					
(b) Political Party Committees					
(c) Other Political Committees (such as PACs)					
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))					
21. OTHER DISBURSEMENTS				7,120.00	7,120.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)				60,606.69	60,606.69
III. CASH SUMMARY					
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD				\$	107,802.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)				\$	151,968.79
25. SUBTOTAL (add Line 23 and Line 24)				\$	259,771.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)				\$	60,606.69
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)				\$	199,164.55

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WILLIAM J ABBOTT 1009 SURREY ROAD MONTICELLO, IL 61856	BILL ABBOTT, INC.	06/15/95	\$ 250.00

Receipt for:
☒ Primary ☐ General
☐ Other(specify):
 Aggregate year-to-date \$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WILLIAM H ARENDS 715 S SANGAMON AVE GIBSON CITY, IL 60936	ARENDS & SONS, INC	06/16/95	\$ 250.00

Receipt for:
☒ Primary ☐ General
☐ Other(specify):
 Aggregate year-to-date \$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JAMES L AYERS 4 OAKVIEW COURT MONTICELLO, IL 61856	SHONKWILER & AYERS	03/14/95	\$ 250.00

Receipt for:
☒ Primary ☐ General
☐ Other(specify):
 Aggregate year-to-date \$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
STEPHEN R AYERS 32 FOOTHILL RD MONTICELLO, IL 61856	AYERS FARMS	06/16/95	\$ 250.00

Receipt for:
☒ Primary ☐ General
☐ Other(specify):
 Aggregate year-to-date \$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
EPHRAIM BATAMBUZE 210 W. WATER ST. PONTIAC, IL 61764	E.W. BATAMBUZE MD., SI	03/21/95	\$ 100.00
		04/24/95	\$ 250.00

Receipt for:
☒ Primary ☐ General
☐ Other(specify):
 Aggregate year-to-date \$ 350.00

SUBTOTAL of receipts this page \$ 1,350.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
JOSEPH W BEARD 4007 LAKE POINT DRIVE CHAMPAIGN, IL 61821	COVENANT MEDICAL CENT	(month, day, year)	
	Occupation:		
	PRESIDENT, CEO	06/15/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
SHARON T BEELER R.R. 1, BOX 104 MCLEAN, IL 61754	STATE FARM	(month, day, year)	
	Occupation:		
	CLAIMS REPRESENTATIVE	01/31/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
FRANK M BRITTINGHAM 415 NORTH GILBERT DANVILLE, IL 61832	BRITTINGHAM & SADLER	(month, day, year)	
	Occupation:		
	ATTORNEY	03/03/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
STUART W BROEREN 602 COUNTRY FAIR DR CHAMPAIGN, IL 61821	BROEREN RUSSO CONST.	(month, day, year)	
	Occupation:		
	PRESIDENT	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
JAMES. BROSSEAU P.O. BOX 947 KANKAKEE, IL 60901	BENNETT & BROSSEAU RO	(month, day, year)	
	Occupation:		
	CONSTRUCTION CONTRACT	01/31/95	\$ 250.00
		03/21/95	\$ 150.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 400.00		

SUBTOTAL of receipts this page \$ 1,400.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
STEVE A CARMICHAEL 2502 APPLEWOOD ROAD CHAMPAIGN, IL 61821	PULMOCARE MEDICAL SUPPLY	03/13/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JAMES E CASPARY 415 E SECOND AVE CLIFTON, IL 60927	FIRST NATIONAL BANK OF	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOHN D CAVENY R.R. 1 BOX 251 MONTICELLO, IL 61856	SOIL STEWARD, INC.	05/18/95	\$ 100.00
		06/15/95	\$ 150.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOHN W CORLEY 1200 N. STATE, PO BOX 253 MONTICELLO, IL 61856	FIRST STATE BANK OF MI	05/18/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CARL J CORTESE R.R. 13, BOX 119 BLOOMINGTON, IL 61704	DR CORTESE FOOT & ANK	03/08/95	\$ 100.00
		06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 350.00	

SUBTOTAL of receipts this page \$ 1,350.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
HAROLD D COVEY 3 BUCKHURST COURT BLOOMINGTON, IL 61704	STATE FARM	01/31/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
J.H. DEATLEY 1003 HARRINGTON DRIVE CHAMPAIGN, IL 61821	BARBER & DEATLEY, INC	05/18/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DAVID J DOWNEY 505 DEVONSHIRE DR CHAMPAIGN, IL 61824-1460	THE DOWNEY GROUP, INC	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DAVID C EADES 5 LYNDBURST PLACE CHAMPAIGN, IL 61821	REGENCY ASSOCIATES	05/18/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
J. ANDREW EDWARDS 984 COUNTY RD, 1350E TOLONO, IL 61880	SELF	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 1,250.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WILLIAM H EDWARDS 200 S. ALLEN PONTIAC, IL 61764	EDWARDS SOIL SERVICE FERTILIZER MERCHANT	03/21/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CATHERINE F EMANUEL 2407 BRANCH RD CHAMPAIGN, IL 61821	CARLE FOUNDATION ADMINISTRATION	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
SAM L ERWIN 1117 BRISTOL ROAD CHAMPAIGN, IL 61820	ERWIN MARTINKEG ATTORNEY	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
BETTY A FRISCH 21 COUNTRY CLUB PLACE BLOOMINGTON, IL 61701	NONE HOUSEWIFE	03/14/95 03/29/95	\$ 300.00 \$ 150.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 450.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOHN W FRISCH 2103 EAST WASHINGTON STREET BLOOMINGTON, IL 61701-4371	SELF M.D.	01/31/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 1,700.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MICHAEL H FRITZ 1020 W. ARMORY CHAMPAIGN, IL 61821	CARLE FOUNDATION	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WILLIAM E FROELICH, JR. BOX 100, LAKE BLOOMINGTON GRIDLEY, IL 61744	FROELICH MEMORIAL HOM	03/21/95	\$ 150.00
		04/24/95	\$ 225.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 375.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOHN G GAINE 1150 CONNECTICUT AVE.N.W. WASHINGTON, DC 20036	JOHN G. GAINE	04/24/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 1,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ISABEL GARDNER 215 E. WASHINGTON ST, NO 705 PONTIAC, IL 61764	NONE	04/04/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOHN H GARDNER SIX GOOSEBERRY LN DWIGHT, IL 60420	1ST NATL BANK DWIGHT	03/08/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 1,000.00	

SUBTOTAL of receipts this page \$ 2,875.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
GARY R GEMBERLING 2649 - 1475TH AVE ATLANTA, IL 61723	GEMBERLING & ASSOCIAT	03/14/95	\$ 250.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOHN W GERBER, JR RR 1, P.O. BOX 260 FAIRBURY, IL 61739	BLUESTEM NATL BANK	03/03/95	\$ 250.00
		03/29/95	\$ 300.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 550.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ALLAN J HAMILTON 11000 CONLEY RD. HUNTLEY, IL 60142	HAMILTON PARTNERS	03/21/95	\$ 100.00
		05/08/95	\$ 250.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 350.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
THOMAS E HARRINGTON, JR P.O. BOX 140 CHAMPAIGN, IL 61824-0140	DEVONSHIRE REALTY	06/16/95	\$ 250.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 250.00

SUBTOTAL of receipts this page \$ 1,400.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JEFFREY R HARTMAN P.O. BOX 2972 STATION A CHAMPAIGN, IL 61820	JEFFREY R. HARTMAN CO	05/18/95	\$ 250.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MIKE HARTMAN BOX 2756, STATION A CHAMPAIGN, IL 61825	SELF	06/16/95	\$ 250.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
STEPHEN R HARTMAN 700 W GRAND ST JOSEPH, IL 61873	SELF	06/16/95	\$ 250.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WILLIAM L HATCH 115 N NEIL ST CHAMPAIGN, IL 61820	SELF	06/16/95	\$ 250.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
SHARON K HEATON BOX 137 GRAYMONT, IL 61743	HEATON AGENCY	03/14/95	\$ 300.00

Receipt for:

☒ Primary _ General

☐ Other(specify):

Aggregate year-to-date

\$ 300.00

SUBTOTAL of receipts this page \$ 1,300.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full) EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
MICHAEL J HENNEMAN 1001 WILSHIRE COURT CHAMPAIGN, IL 61821	HENNEMAN, RANFEISEN &	(month, day, year)	
	Occupation:		
	PRESIDENT	06/16/95	\$ 750.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 750.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
JAMES E HERMESDORF 49 GOLF AVE. CLARENDON HILLS, IL 60514	TEEPAK, INC.	(month, day, year)	
	Occupation:		
	PRESIDENT AND C.E.O.	03/21/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
RICHARD H HIATT P.R. 2 PONTIAC, IL 61764	PONTIAC NATIONAL BANK	(month, day, year)	
	Occupation:		
	EXECUTIVE	03/08/95	\$ 100.00
		03/29/95	\$ 150.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
DAN HOGAN 29100 N, 3500 E RD BUCKINGHAM, IL 60917	HOGAN FARMS	(month, day, year)	
	Occupation:		
	FARMING	03/03/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
STAN R HOSELTON P.O. BOX 12 CHENOA, IL 61726	HOSELTON BROTHERS PAR	(month, day, year)	
	Occupation:		
	OWNER	03/29/95	\$ 300.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 300.00		

SUBTOTAL of receipts this page	\$ 2,050.00
TOTAL this period (last page this line number only)	

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ROGER W HUDDLESTON 542 RANDOLPH P.O. BOX 781 MAHOMET, IL 61853	ROGER HUDDLESTON HOME	06/16/95	\$ 250.00

Receipt for:
☒ Primary ☐ General
 Other(specify): Aggregate year-to-date \$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JAMES F KAMMER 1234 N. STATE MONTICELLO, IL 61856	SELF	03/03/95	\$ 500.00

Receipt for:
☒ Primary ☐ General
 Other(specify): Aggregate year-to-date \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
BONNIE B KELLEY P.O. BOX 26 URBANA, IL 61801	KELLEY CORPORATION	06/15/95	\$ 250.00

Receipt for:
☒ Primary ☐ General
 Other(specify): Aggregate year-to-date \$ 250.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PARKER KEMP P.O. BOX 98 LEXINGTON, IL 61753	THE PEOPLES BANK	03/08/95	\$ 1,000.00

Receipt for:
☒ Primary ☐ General
 Other(specify): Aggregate year-to-date \$ 1,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
RALPH D KLOPFENSTEIN RR#1, BOX 143JD, 102 BOULDER DR GRIDLEY, IL 61744	SELF	06/22/95	\$ 500.00

Receipt for:
☒ Primary ☐ General
 Other(specify): Aggregate year-to-date \$ 500.00

SUBTOTAL of receipts this page \$ 2,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
CAROL KNAPP 202 W. KRACK ST, BOX 543 FORREST, IL 61741	SELF	(month, day, year)	
	Occupation:		
	KITCHEN BATH DESIGNER	04/04/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
LOUIE D KNAPP BOX 543 FORREST, IL 61741	KNAPP INDUSTRIAL WOOD	(month, day, year)	
	Occupation:		
	MANUFACTURE WOODWORK	04/04/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
E. PHILLIPS KNOX 801 W. VERMONT AVE. URBANA, IL 61801	TUMMELSON, BRYAN & KNOX	(month, day, year)	
	Occupation:		
	ATTORNEY	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
NICK KOMINUS 8215 DONSET DRIVE SPRINGFIELD, VA 22152	US CANE SUGAR REFINER	(month, day, year)	
	Occupation:		
	PRESIDENT	04/24/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
Other(specify):	\$ 1,000.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
DAVE KUHL 101 GREENCROFT DR CHAMPAIGN, IL 61821	BUSEY BANK	(month, day, year)	
	Occupation:		
	PRESIDENT	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
Other(specify):	\$ 250.00		

SUBTOTAL of receipts this page \$ 2,000.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOSEPH W LANE P.O. BOX 826 PONTIAC, IL 61764	MIDWEST EXCHANGE Occupation: OWNER	03/03/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ALAN LAROCHELLE P.R. 3, BOX 449A LARA TRACE BLOOMINGTON, IL 61704	WESTSIDE FOREST PRODU Occupation: BUSINESS OWNER	03/08/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
BILLIE LEE 806 E. SCOTT JUSCOLA, IL 61953	SELF EMPLOYED Occupation: HOMEMAKER	01/31/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
V.B. LEISTER, JR. 1808 BENTBROOK DRIVE CHAMPAIGN, IL 61821	CARTERS MOVING AND ST Occupation: PRESIDENT	06/16/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CARL A LUND 129 NORTH CENTRAL AVENUE PARIS, IL 61944	STATE OF ILLINOIS Occupation: APPELLATE COURT JUDGE	03/03/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 1,750.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
GREGORY B LYKINS #2 GREENCROFT CHAMPAIGN, IL 61821	BANK ILLINOIS FINANCIAL Occupation:	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
J MICHAEL MARTIN 119 MAYFAIR RD CHAMPAIGN, IL 61821	MCGLADREY PULLEN Occupation:	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
RICHARD E MAXEY P.O. BOX 336 LODA, IL 60948	FEDERATED BANK CORP Occupation:	03/03/95	\$ 100.00
		03/03/95	\$ 150.00
		03/29/95	\$ 150.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 400.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WARD F MCDONALD 69 COUNTY RD. 2000N MAHOMET, IL 61853	LAW OFFICE OF WARD MC Occupation:	06/27/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 1,150.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AUGUST C MEYER, JR 509 S. NEIL ST. CHAMPAIGN, IL 61820	MIDWEST TELEVISION INC.	03/03/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
BETSY D MITCHELL 810 FLORAL PARK DRIVE SAVOY, IL 61874	DEVONSHIRE REALTY	06/15/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WILLIAM A MONTGOMERY 2003 CASTLE AVENUE BLOOMINGTON, IL 61701	STATE FARM	03/03/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JULIE T MORGAN 1701 YORKSHIRE DR CHAMPAIGN, IL 61821	SELF	03/13/95	\$ 300.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 300.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DOROTHY MYERS 406 SOUTH CEDAR STREET LEXINGTON, IL 61753	MYERS, INC.	03/21/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

SUBTOTAL of receipts this page \$ 1,800.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DENNIS R NOONAN 1208 WAVERLY DR. CHAMPAIGN, IL 61821	WORDEN MARTIN GMC TRU	06/15/95	\$ 250.00
Occupation:			
PARTNER			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
L. J. O'BRIEN, JR. 1 LINCOLNSHIRE AVENUE DANVILLE, IL 61832	MODEL STAR LAUNDRY CO	04/24/95	\$ 500.00
Occupation:			
CEO			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DONALD A ORR 2213 WOODFIELD BLOOMINGTON, IL 61701	ROBERSON CORP	05/18/95	\$ 250.00
Occupation:			
MANAGER			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
RICHARD C OUGHTON 404 OLD MORRIS ROAD DWIGHT, IL 60420	1ST NATIONAL BANK OF	03/21/95	\$ 500.00
Occupation:			
RETIRED VICE PRESIDENT			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ROBERT C PARKER, JR 2808 ROBESON PK DR CHAMPAIGN, IL 61821	CARLE CLINIC ASSOCIAT	06/15/95	\$ 250.00
Occupation:			
PHYSICIAN EXECUTIVE			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 1,750.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
J BERGEN PARKHILL 58 CHESTNUT CT, LAKE PARK CHAMPAIGN, IL 61820	PARKHILL MOTOR SALES	06/16/95	\$ 250.00
Occupation:			
PRESIDENT			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOHN W PARROTT, JR. 7 STONEY COURT BLOOMINGTON, IL 61704	PARROTT AND ASSOCIATE	01/31/95	\$ 210.00
Occupation:		03/29/95	\$ 300.00
MANUFACTURS REP WHLSE			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 510.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MARY ANN PEARMAN 228 W. CRAWFORD ST. PARIS, IL 61944	NONE	04/24/95	\$ 250.00
Occupation:			
HOUSEWIFE			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
R (RAY) H PETTIT 801 CAROL CT PONTIAC, IL 61764	RETIRED	01/31/95	\$ 150.00
Occupation:		03/08/95	\$ 100.00
RETIRED			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 1,260.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JANET POPE 1806 MAYNARD CHAMPAIGN, IL 61821	C&V POSTER ADVERTISING	03/21/95	\$ 450.00
Occupation:			
OWNER			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 450.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
KIP POPE PO BOX 746 CHAMPAIGN, IL 61824-0746	C & U POSTER ADVERTISING	06/15/95	\$ 250.00
Occupation:			
PRESIDENT			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ROBERT P POPE 1605 SANDPIPER CT CHAMPAIGN, IL 61821	SELF EMPLOYED	06/15/95	\$ 250.00
Occupation:			
ATTORNEY			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ROGER ROBERSON 1112 COUNTRY LN. CHAMPAIGN, IL 61821	P.F.T./ROBERSON	05/18/95	\$ 250.00
Occupation:			
EXECUTIVE			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ELLEN M ROESSLER 501 NEIPSWAH RANTOUL, IL 61866	ROESSLER CONSTRUCTION	06/15/95	\$ 250.00
Occupation:			
CO-OWNER			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 1,450.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
KENNETH G ROESSLER 514 PARKER PL RANTOUL, IL 61866	ROECO ENTERPRISES	(month, day, year) 06/15/95	\$ 250.00
Occupation: PRESIDENT			
Receipt for: <input checked="" type="checkbox"/> Primary _ General Other(specify):		Aggregate year-to-date \$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
T. ALAN RUSSELL B WATERS EDGE PARIS, IL 61944	NONE	(month, day, year) 03/08/95	\$ 500.00
Occupation: RETIRED			
Receipt for: <input checked="" type="checkbox"/> Primary _ General Other(specify):		Aggregate year-to-date \$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
EDWARD B RUST, JR. Oxford Court Bloomington, IL 61704	STATE FARM INSURANCE	(month, day, year) 01/31/95	\$ 240.00
Occupation: EXECUTIVE			
Receipt for: <input checked="" type="checkbox"/> Primary _ General Other(specify):		Aggregate year-to-date \$ 240.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
JON T SATTERWHITE 1500 N. BOWMAN AVE DANVILLE, IL 61832	SELF	(month, day, year) 03/08/95	\$ 300.00
Occupation: DENTIST			
Receipt for: <input checked="" type="checkbox"/> Primary _ General Other(specify):		Aggregate year-to-date \$ 300.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each Receipt This Period:
RODERICK L SCHMIDT P.O. BOX 1460 CHAMPAIGN, IL 61824-1460	THE DOWNEY GROUP, INS	(month, day, year) 06/16/95	\$ 250.00
Occupation: LIFE INSURANCE SALES			
Receipt for: <input checked="" type="checkbox"/> Primary _ General Other(specify):		Aggregate year-to-date \$ 250.00	

SUBTOTAL of receipts this page \$ 1,540.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JO ANNE SCHWADE 969 S. CHICAGO KANKAKEE, IL 60901	NONE Occupation: HOMEMAKER	03/29/95	\$ 300.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General.		Aggregate year-to-date	
Other(specify):		\$ 300.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PETER D SCULLY P.O. BOX D DOWDIGHT, IL 60420	SCULLY ESTATES Occupation: FARM MGR	03/29/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PAUL W SHAFFER, JR 4004 RIVERKNOLL DR. CHAMPAIGN, IL 61821	PF/ROBERSON Occupation: TREASURER	05/18/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
GEORGE T SHAPLAND BOX 11828 CHAMPAIGN, IL 61826	SHAPLAND MGT CO. Occupation: BUSINESSMAN	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DENNIS D SPICE 5008 W. BLUEBILL ROAD CHAMPAIGN, IL 61821	STATE UNIVERSITIES RE Occupation: EXECUTIVE DIRECTOR	03/03/95 03/03/95	\$ 100.00 \$ 300.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 400.00	

SUBTOTAL of receipts this page \$ 1,700.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
A.W. SPILLMAN 418 W. MADISON STREET PARIS, IL 61944	SELF		
	Occupation:		
	RETIRED AUCTIONEER	01/31/95	\$ 150.00
		03/08/95	\$ 100.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DEANE STEWART 107 E. SHERWIN DR URBANA, IL 61801	TRI-STAR MKTG		
	Occupation:		
	PRESIDENT	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MONATHON D STEWART 807 LA SELL DR CHAMPAIGN, IL 61820	TRISTAR MARKETING, IN		
	Occupation:		
	EXECUTIVE VICE PRESID	04/04/95	\$ 300.00
		06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 550.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
W DONALD SULLIVAN 6 SMOKEY CT BLOOMINGTON, IL 61704	STATE FARM INSURANCE		
	Occupation:		
	EXECUTIVE	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

SUBTOTAL of receipts this page \$ 1,550.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full) C00250555
EWING FOR CONGRESS COMMITTEE

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MICHAEL THOMPSON 4011 LAKEPOINT CHAMPAIGN, IL 61821	SELF		
	Occupation:		
	THOMPSON LUMBER	06/15/95	\$ 250.00
Receipt for:	Aggregate year-to-date		
<input checked="" type="checkbox"/> Primary _ General	\$ 250.00		
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
GEORGE T TIMMONS P.O. BOX 230 DE LAND, IL 61839	SELF EMPLOYED		
	Occupation:		
	FARMER	05/18/95	\$ 250.00
Receipt for:	Aggregate year-to-date		
<input checked="" type="checkbox"/> Primary _ General	\$ 250.00		
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
VINCENT J TROSINO R.R. 16, BOX 538 BLOOMINGTON, IL 61704	STATE FARM INSURANCE		
	Occupation:		
	EXECUTIVE VICE PRESID	01/31/95	\$ 250.00
		03/08/95	\$ 100.00
Receipt for:	Aggregate year-to-date		
<input checked="" type="checkbox"/> Primary _ General	\$ 350.00		
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JAMES G TURNER 2602 APPLEWOOD RD CHAMPAIGN, IL 61821	PROSPECT MITSUBISHI		
	Occupation:		
	BUSINESS OWNER	06/15/95	\$ 250.00
Receipt for:	Aggregate year-to-date		
<input checked="" type="checkbox"/> Primary _ General	\$ 250.00		
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JEFF WANDELL 3000 W. SPRINGFIELD CHAMPAIGN, IL 61821	PRAIRIE GARDENS, INC.		
	Occupation:		
	CEO	06/16/95	\$ 250.00
Receipt for:	Aggregate year-to-date		
<input checked="" type="checkbox"/> Primary _ General	\$ 250.00		
<input type="checkbox"/> Other(specify):			

SUBTOTAL of receipts this page \$ 1,350.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
JOSEPH F WARNER 12 KENT DRIVE NORMAL, IL 61761	HERITAGE ENTERPRISES,	03/03/95	\$ 250.00
Occupation:			
EXECUTIVE			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
BILL D WILLIAMS 803 W MICHIGAN URBANA, IL 61801	PRINTEC PRESS	03/03/95	\$ 300.00
Occupation:			
OWNER			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 300.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CHARLES R WRIGHT 10 SPENCER LEXINGTON, IL 61753	STATE FARM INSURANCE	01/31/95	\$ 250.00
Occupation:			
EXECUTIVE			
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page	\$ 800.00
TOTAL this period (last page this line number only)	\$ 35,275.00

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This
			Period:
NATL REPUBLICAN CONG COMM			
320 FIRST STREET SE	Occupation:	04/04/95	\$ 98.50
WASHINGTON, DC 20003			

Receipt for:
☒ Primary _ General
☐ Other(specify):
Aggregate year-to-date
\$ 98.50 (In kind)

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This
			Period:
REPUBLICAN NATIONAL COMMITTEE			
310 FIRST STREET SOUTHEAST	Occupation:	02/22/95	\$ 137.38
WASHINGTON, DC 20003			

Receipt for:
☒ Primary _ General
☐ Other(specify):
Aggregate year-to-date
\$ 137.38 (In kind)

SUBTOTAL of receipts this page \$ 235.88

TOTAL this period (last page this line number only) \$ 235.88

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
A. E. STALEY PAC 2200 EAST ELDORADO STREET DECATUR, IL 62521		04/04/95	\$ 2,500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 2,500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
RAIN-NURSERY INDUSTRY PAC 1250 I STREET, NW. STE 500 WASHINGTON, DC 20005		03/14/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 1,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
ACTION COMM FOR RURAL ELEC PAC 1800 MASSACHUSETTS AVE NW WASHINGTON, DC 20036		03/21/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 1,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
ADM PAC P.O. BOX 1470 DECATUR, IL 62525		04/24/95	\$ 1,000.00
		05/08/95	\$ 500.00
		06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 2,000.00	

SUBTOTAL of receipts this page \$ 6,500.00

TOTAL this period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS
FOR THE PERIOD FROM 01/01/95 TO 06/30/95Page 2 of 21
Line Number 11(c)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
AG PAC 9330 ZIONSVILLE ROAD INDIANAPOLIS, IN 46268	Occupation:	04/24/95 06/22/95	\$ 1,000.00 \$ 500.00
Receipt for:		Aggregate year-to-date	
<input checked="" type="checkbox"/> Primary _ General		\$ 1,500.00	
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
AGC PAC 1957 EAST STREET, N.W. WASHINGTON, DC 20006	Occupation:	06/16/95	\$ 500.00
Receipt for:		Aggregate year-to-date	
<input checked="" type="checkbox"/> Primary _ General		\$ 500.00	
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
ALABAMA FARMERS FEDERATION PAC P.O. BOX 11023 MONTGOMERY, AL 36198	Occupation:	06/16/95	\$ 1,000.00
Receipt for:		Aggregate year-to-date	
<input checked="" type="checkbox"/> Primary _ General		\$ 1,000.00	
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
ALLSTATE INSURANCE COMPANY PAC ALLSTATE PLAZA NORTHBROOK, IL 60062	Occupation:	06/22/95	\$ 500.00
Receipt for:		Aggregate year-to-date	
<input checked="" type="checkbox"/> Primary _ General		\$ 500.00	
<input type="checkbox"/> Other(specify):			

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
AM ASSN OF CROP INSURERS PAC 1 MASSACHUSETTS AVE NW STE 800 WASHINGTON, DC 20001	Occupation:	04/04/95	\$ 1,000.00
Receipt for:		Aggregate year-to-date	
<input checked="" type="checkbox"/> Primary _ General		\$ 1,000.00	
<input type="checkbox"/> Other(specify):			

SUBTOTAL of receipts this page \$ 4,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AM SUGARBEET GROWERS ASSN PAC			
1156 15TH ST. N.W. SUITE 1101			
WASHINGTON, DC 20005	Occupation:	03/21/95	\$ 500.00
		04/24/95	\$ 500.00
		06/16/95	\$ 500.00

Receipt for:

☒ Primary _ General
☐ Other(specify):

Aggregate year-to-date
 \$ 1,500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AM. COMMERCIAL LINES INC. PAC			
P.O. BOX 610			
JEFFERSONVILLE, IN 47130	Occupation:	06/22/95	\$ 500.00

Receipt for:

☒ Primary _ General
☐ Other(specify):

Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AM. MOVERS CONFERENCE PAC			
1611 DUKE STREET			
ALEXANDERIA, VA 22314	Occupation:	06/22/95	\$ 500.00

Receipt for:

☒ Primary _ General
☐ Other(specify):

Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AMER PEANUT SHELLERS ASSOC PAC			
P.O. BOX 70157			
ALBANY, GA 31708-0157	Occupation:	06/22/95	\$ 2,000.00
		06/22/95	\$ 500.00

Receipt for:

☒ Primary _ General
☐ Other(specify):

Aggregate year-to-date
 \$ 2,500.00

SUBTOTAL of receipts this page \$ 5,000.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AMER SUGAR CANE LEAGUE (PAC)			
P.O. DRAWER 938			
THIBODAUX, LA 70302	Occupation:	06/16/95	\$ 1,000.00
		06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AMERICAN CRYSTAL SUGAR PAC			
101 N. THIRD ST.			
MOORHEAD, MN 56560	Occupation:	04/24/95	\$ 500.00
		06/27/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,000.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AMERICAN HOSPITAL ASSOC. PAC			
1 N. FRANKLIN			
CHICAGO, IL 60606	Occupation:	06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 250.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
AMERICAN MARITIME OFF PAC			
650 FOURTH AVENUE			
BROOKLYN, NY 11232	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

SUBTOTAL of receipts this page \$ 3,250.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
AMERICAN MEAT INSTITUTE PAC 1700 N. MOORE STREET SUITE 1600 ARLINGTON, VA 22209		06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
AMERICAN PRESIDENT COMP. PAC 1111 BROADWAY OAKLAND, CA 94607		06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
AMERICAN TRUCKING PAC 430 FIRST ST S.E. WASHINGTON, DC 20003		06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
AUCTION MARKET PAC 141 W. JACKSON BLVD. CHICAGO, IL 60604		04/04/95 06/30/95	\$ 1,000.00 \$ 2,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 3,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
BANC ONE PAC 100 E. BROAD STREET COLUMBUS, OH 43271-0251		06/16/95	\$ 250.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 250.00	

SUBTOTAL of receipts this page \$ 4,750.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
BEEF-PAC 5501 WEST I-40 AMARILLO, TX 79106	Occupation:	06/16/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
BROWN & WILL. TOBACCO CORP PAC P.O. BOX 35090 LOUISVILLE, KY 40232	Occupation:	06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
CAMPAIGN AMERICA PAC 900 SECOND ST., N.E. SUIT 118 WASHINGTON, DC 20002	Occupation:	06/16/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
CAROLINA'S PEANUT PAC 412-1ST ST S.E. STE. 40 WASHINGTON, DC 20003	Occupation:	04/04/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
CATERPILLAR COMM EFF GVT PAC 100 NE ADAMS STREET PEORIA, IL 61629-1430	Occupation:	06/22/95	\$ 2,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 2,000.00		

SUBTOTAL of receipts this page \$ 4,000.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CF INDUSTRIES EMP GGF (PAC) ONE SALEM LAKE DRIVE LONG GROVE, IL 60047	Occupation:	06/27/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CHRYSLER POLITICAL SUPPORT PAC 12000 CHRYSLER DRIVE HIGHLAND PARK, MI 48288-0001	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CIBA-GEIGY EMP GOOD GVMT (PAC) 444 SAW MILL RIVER ROAD ARDSLEY, NY 10502-2600	Occupation:	04/04/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
COMM THOROUGH AG POL ED (PAC) P.O. BOX 1330 SAN ANTONIO, TX 78295	Occupation:	04/24/95	\$ 1,000.00
		06/27/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
COMMODITY FUTURES POL FD (PAC) 30 S. WACKER DR. CHICAGO, IL 60606	Occupation:	04/24/95	\$ 1,000.00
		06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,500.00		

SUBTOTAL of receipts this page \$ 4,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CONAGRA GOOD GOVMT ASSOC (PAC) ONE CONAGRA DRIVE OMAHA, NE 68102-5001			

Occupation:	03/21/95	\$ 1,000.00
-------------	----------	-------------

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CONSOLIDATED RAIL PAC 900 L'ENFANT PLAZA SOUTH WASHINGTON, DC 20024			

Occupation:	06/27/95	\$ 500.00
-------------	----------	-----------

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CSX TRANSPORTATION COMM (PAC) 1331 PENNSYLVANIA AVE., N.W. WASHINGTON, DC 20004			

Occupation:	06/27/95	\$ 500.00
-------------	----------	-----------

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DEERE & COMPANY PAC JOHN DEERE ROAD MOLINE, IL 61265			

Occupation:	06/16/95	\$ 500.00
-------------	----------	-----------

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DESERT GRAPE GROWERS LEAG PAC 74-090 EL PASEO, SUITE 102 PALM DESERT, CA 92260			

Occupation:	04/24/95	\$ 1,000.00
-------------	----------	-------------

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

SUBTOTAL of receipts this page \$ 3,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DIAL GOOD GOVOMNT PROJECT PAC DIAL TOWER PHOENIX, AZ 85077-2212	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
DYER ELLIS JOSEPH MILLS PAC 600 NEW HAMPSHIRE AVE, N.W. WASHINGTON, DC 20037	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ELECTRICAL CONSTRUCTION PAC 13 BETHESEDA METRO CENTER BETHESDA, MD 20814-5372	Occupation:	06/22/95	\$ 1,000.00
Receipt for:			
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,000.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ERNST & YOUNG PAC 1225 CONNECTICUT AVE NW STE600 WASHINGTON, DC 20036	Occupation:	05/18/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ESOP PAC 1726 M STREET, N.W., STE. 501 WASHINGTON, DC 20036	Occupation:	06/16/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

SUBTOTAL of receipts this page \$ 3,000.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FARM CREDIT PAC 50 F STREET, N.W. SUITE 900 WASHINGTON, DC 20001		04/24/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FEDERAL EXPRESS PAC 2005 CORPORATE AVE. MEMPHIS, TN 38132		06/27/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,000.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FLORIDA CITRUS MUTUAL PAC P.O. BOX 89 LAKELAND, FL 33802		06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FLORIDA FRUIT & VEG. ASSOC PAC P.O. BOX 140155 ORLANDO, FL 32814-0155		06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FLORIDA SUGAR CANE LEAGUE PAC 115 SOUTH LOPEZ STREET CLEWISTON, FL 33440		05/08/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,000.00		

SUBTOTAL of receipts this page \$ 3,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FMC CORP. GOOD GOV'T PAC 200 E. RANDOLPH DR. CHICAGO, IL 60601		05/18/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 1,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FOOD MARKETING INSTITUTE PAC 800 CONNECTICUT AVE. NW STE500 WASHINGTON, DC 20006-2701		04/04/95	\$ 1,000.00
		06/16/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 1,500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FOODVIP(FOOD DIST. VOICE PAC) 201 PARK WASHINGTON COURT FALLS CHURCH, VA 22046		04/04/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
FUTURE INDUSTRY POLITICAL PAC 2001 PENNSYLVANIA AVE. NW 600 WASHINGTON, DC 20006		06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
GEORGIA PEANUT PRDCRS ASS.PAC 1408 THIRD AVE ALBANY, GA 31707		04/24/95	\$ 2,500.00
		06/22/95	\$ 2,500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 5,000.00	

SUBTOTAL of receipts this page \$ 8,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
GRT LAKES SUGAR BEET GRW PAC			
485 PLAZA NORTH			
SAGINAW, MI 48604	Occupation:	06/30/95	\$ 500.00

Receipt for:
☒ Primary _ General
 Other(specify): Aggregate year-to-date \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
HAWAIIAN SUGAR PLANTERS PAC			
99-193 AIEA HTS. DRIVE			
AIEA, HI 96701	Occupation:	04/24/95	\$ 500.00

Receipt for:
☒ Primary _ General
 Other(specify): Aggregate year-to-date \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
HOLLAND & KNIGHT COMM. (PAC)			
2100 PENNSYLVANIA AVE. STE 400			
WASHINGTON, DC 20037	Occupation:	04/04/95	\$ 500.00
		06/22/95	\$ 500.00

Receipt for:
☒ Primary _ General
 Other(specify): Aggregate year-to-date \$ 1,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ILLINOIS POWER FEDERAL PAC			
550 N EDWARD ST			
DECATUR, IL 62522	Occupation:	06/22/95	\$ 1,500.00

Receipt for:
☒ Primary _ General
 Other(specify): Aggregate year-to-date \$ 1,500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
INDEPENDENT BANKERS PAC			
1 THOMAS CIRCLE N.W. SUITE 950			
WASHINGTON, DC 20005	Occupation:	06/16/95	\$ 500.00

Receipt for:
☒ Primary _ General
 Other(specify): Aggregate year-to-date \$ 500.00

SUBTOTAL of receipts this page \$ 4,000.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
LABORER'S POLITICAL LEAGUE PAC 905-16TH ST N.W. WASHINGTON, DC 20006	Occupation:	06/30/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
CLORILLARD PUBLIC AFFRS COM PAC PARK AVENUE 18TH FLOOR NEW YORK, NY 10016-5895	Occupation:	05/18/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MCDERMOTT, WILL & EMERY PAC 1200-18TH ST, N.W. 8TH FLOOR WASHINGTON, DC 20036-2506	Occupation:	04/24/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MCDONALDS PAC ONE MCDONALDS PLAZA OAK BROOK, IL 60521	Occupation:	06/27/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MID-AM DAIRYMEN/DEPAC 3253 E. CHESTNUT EXPRESSWAY SPRINGFIELD, MO 65802	Occupation:	04/04/95	\$ 500.00
		06/22/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

SUBTOTAL of receipts this page \$ 3,000.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
MINN-DAK FARMERS COOP PAC 7525 RED RIVER ROAD WAHPETON, ND 58075	Occupation:	04/04/95	\$ 1,000.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NAII PAC 2600 RIVER ROAD DES PLAINES, IL 60018	Occupation:	06/16/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NATIONAL BEER WHOLESALERS PAC 1100 S. WASHINGTON STREET ALEXANDRIA, VA 22314	Occupation:	06/16/95	\$ 1,000.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NATL CATTLEMENS ASSOC PAC 5420 S. QUEBEC ST. PO BOX 3460 GREENWOOD VILL., CO 80155	Occupation:	05/08/95	\$ 1,000.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NATL COUN OF FARMERS COOPS PAC 50 F STREET N.W. SUITE 900 WASHINGTON, DC 20001	Occupation:	04/04/95	\$ 1,000.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

SUBTOTAL of receipts this page \$ 4,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NATL PEST CONTROL ASSN. PAC 8100 OAK STREET DUNN LORING, VA 22027	Occupation:	03/21/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 1,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NATL ROOFING CONTRACTORS PAC 10255 W HIGGINS RED RD 600 ROSEMONT, IL 60018-5607	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NESTLE USA, INC. PAC 30003 BAINBRIDGE ROAD OLON, OH 44139-2290	Occupation:	05/08/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 1,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
NORWEST CORPORATION PAC 6TH & MARQUETTE NORWEST CTR. MINNEAPOLIS, MN 55479	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PATRICK MEDIA GROUP PAC-PATPAC 737 N. MICHIGAN AVE. STE 1300 CHICAGO, IL 60611	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
<input type="checkbox"/> Other(specify):		\$ 500.00	

SUBTOTAL of receipts this page \$ 3,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PEANUTPAC OF ALABAMA P.O. BOX 1706 DOTHAN, AL 36302		04/04/95	\$ 2,000.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 2,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PEPSI-COLA BTLRS PAC 5501 ALGONQUIN RD. ROLLING MEADOWS, IL 60008		04/04/95	\$ 1,500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PEPSICO CONCERNED CIT FUND PAC CONCERNED CITIZENS FUND PURCHASE, NY 10577		06/27/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PHILIP MORRIS PAC 120 PARK AVENUE-25TH FLR NEW YORK, NY 10017		05/08/95	\$ 1,000.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
PORK PAC BOX 10383 DES MOINES, IA 50306		03/29/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

SUBTOTAL of receipts this page \$ 5,500.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
POTATO POLITICAL ACTION COMM.		(month, day, year)	Receipt This Period:
5690 DTC BLVD., #230E ENGLEWOOD, CO 80111-3200	Occupation:	06/27/95	\$ 300.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 300.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
PROF INSURANCE AGENTS PAC		(month, day, year)	Receipt This Period:
400 NORTH WASHINGTON ALEXANDRIA, VA 22314	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
R.R. DONNELLY & SONS CO. PAC		(month, day, year)	Receipt This Period:
77 WEST WACKER DRIVE CHICAGO, IL 60601-1696	Occupation:	06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
REALTORS PAC		(month, day, year)	Receipt This Period:
430 N. MICHIGAN AVE CHICAGO, IL 60611	Occupation:	06/16/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,000.00		

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
RJR POLITICAL ACTION COMM.		(month, day, year)	Receipt This Period:
P.O. BOX 718 WINSTON-SALEM, NC 27102	Occupation:	05/18/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,000.00		

SUBTOTAL of receipts this page \$ 3,300.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
ROADWAY SERVICES, INC-REXPAC			
P.O. BOX 88			
AKRON, OH 44309	Occupation:	06/16/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
SNACKPAC			
1711 KING STREET, SUITE ONE			
ALEXANDRIA, VA 22314	Occupation:	06/16/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
SOC OF AMERICAN FLORISTS PAC			
1601 DUKE STREET			
ALEXANDRIA, VA 22314	Occupation:	06/22/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
SOUTHERN MINN SUGAR COOP PAC			
P.O. BOX 500			
RENVILLE, MN 56284	Occupation:	04/04/95	\$ 1,000.00
		06/22/95	\$ 500.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,500.00

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
TEAM AMERITECH PAC			
1401 H STREET, N.W.			
WASHINGTON, DC 20038-7768	Occupation:	06/22/95	\$ 1,000.00

Receipt for:
☒ Primary _ General
☐ Other(specify):
 Aggregate year-to-date
 \$ 1,000.00

SUBTOTAL of receipts this page \$ 4,000.00

TOTAL this period (last page this line number only)

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
THE SOUTHWEST PEANUT PAC 412 FIRST ST. S.E. SUITE 100 WASHINGTON, DC 20003	Occupation:	04/04/95	\$ 1,000.00
		06/22/95	\$ 3,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 4,000.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
THE TOBACCO INSTITUTE PAC 1875 EYE ST., NW, SUITE 800 WASHINGTON, DC 20006	Occupation:	05/18/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
UNITED AIRLINES INC. PAC P.O. BOX 66423 CHICAGO, IL 60666	Occupation:	06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
UNITED EGG PROD. PAC (EGGPAC) 1303 HIGHTOWER TRAIL STE 200 ATLANTA, GA 30350	Occupation:	06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 500.00		

Full Name, Address, and ZIP:	Name of Employer:	Date (month, day, year)	Amount of Each Receipt This Period:
UNITED FRESH FRUIT & VEG PAC 727 N. WASHINGTON ST. ALEXANDRIA, VA 22314	Occupation:	04/04/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General	Aggregate year-to-date		
<input type="checkbox"/> Other(specify):	\$ 1,000.00		

SUBTOTAL of receipts this page	\$ 6,500.00
TOTAL this period (last page this line number only)	

Any information copied from such reports or 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.

Name of committee (in full)
EWING FOR CONGRESS COMMITTEE

C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
UNITED STATES SUGAR CORP PAC P.O. DRAWER 1207 CLEWISTON, FL 33440		06/30/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
UPS PAC 55 GLENLAKE PARKWAY, N.E. ATLANTA, GA 30328		04/24/95	\$ 1,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 1,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
USTEAM PAC 1825 1 ST.N.W. SUITE 400 WASHINGTON, DC 20006		06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
VIRGINIA CAROLINA'S PEANUT PAC 412-1ST ST, S.E. STE 40 WASHINGTON, DC 20003		06/22/95	\$ 2,000.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 2,000.00	

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This Period:
WINE & SPIRITS WHOLESALERS PAC 1023 15TH ST, NW, 4TH FLOOR WASHINGTON, DC 20005		06/22/95	\$ 500.00
Receipt for:			
<input checked="" type="checkbox"/> Primary _ General		Aggregate year-to-date	
Other(specify):		\$ 500.00	

SUBTOTAL of receipts this page \$ 4,500.00

TOTAL this period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS
FOR THE PERIOD FROM 01/01/95 TO 06/30/95Page 21 of 21
Line Number 11(c)

Any information copied from such reports or 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.

Name of committee (in full) EWING FOR CONGRESS COMMITTEE C00250555

Full Name, Address, and ZIP:	Name of Employer:	Date	Amount of Each
		(month, day, year)	Receipt This
			Period:
YELLOW FREIGHT SYSTEM PAC			
10777 BARKLEY			
OVERLAND PARK, KS 66211-1162	Occupation:	06/16/95	\$ 500.00

Receipt for:

☒ Primary _ General Aggregate year-to-date

☐ Other(specify): \$ 500.00

SUBTOTAL of receipts this page \$ 500.00

TOTAL this period (last page this line number only) \$ 90,300.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER
14

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code WCIA 3 509 South Neil Street Champaign, IL 61824-0020	Name of Employer Refund - TV advertising	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	3/8/95	1,179.78
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 1,179.78

TOTAL This Period (last page this line number only) 1,179.78

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 15

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code Pontiac National Bank 223 North Mill Street Pontiac, IL 61764 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Interest	1/4/95	
	Occupation		
Aggregate Year-to-Date > \$			175.45
B. Full Name, Mailing Address and ZIP Code "	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	"	2/4/95	
	Occupation		
Aggregate Year-to-Date > \$			166.07
C. Full Name, Mailing Address and ZIP Code "	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	"	3/1/95	
	Occupation		
Aggregate Year-to-Date > \$			156.34
D. Full Name, Mailing Address and ZIP Code "	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	"	4/4/95	
	Occupation		
Aggregate Year-to-Date > \$			218.22
E. Full Name, Mailing Address and ZIP Code "	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	"	5/3/95	
	Occupation		
Aggregate Year-to-Date > \$			214.97
F. Full Name, Mailing Address and ZIP Code "	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	"	6/7/95	
	Occupation		
Aggregate Year-to-Date > \$ 1,223.28			292.23
G. Full Name, Mailing Address and ZIP Code "	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)	1,223.28
TOTAL This Period (last page this line number only)	1,223.28

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 13
FOR LINE NUMBER
17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code Sulaski and Webb, CPA'S 207 W. Jefferson, Ste. 203 Bloomington, IL 61701	Purpose of Disbursement <u>Accounting and reporting services</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/10/95	Amount of Each Disbursement This Period 752.18
B. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/8/95	Amount of Each Disbursement This Period 1,203.50
C. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/15/95	Amount of Each Disbursement This Period 601.16
D. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/21/95	Amount of Each Disbursement This Period 800.00
E. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/22/95	Amount of Each Disbursement This Period 500.00
F. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/15/95	Amount of Each Disbursement This Period 1,400.94
G. Full Name, Mailing Address and ZIP Code AT&T P.O. Box 27-866 Kansas City, MO 64184-0866	Purpose of Disbursement <u>Telephone service</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/10/95	Amount of Each Disbursement This Period 111.70
H. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/31/95	Amount of Each Disbursement This Period 50.10
I. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/10/95	Amount of Each Disbursement This Period 108.50

SUBTOTAL of Disbursements This Page (optional)

5,528.08

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 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT&T P.O. Box 27-866 Kansas City, MO 64184-0866	Telephone service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/95	104.30
B. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/95	151.19
C. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/95	57.76
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Pontiac Illinois 61764	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/10/95	152.80
E. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/95	128.00
F. Full Name, Mailing Address and ZIP Code "	Permit fees Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/7/95	290.00
G. Full Name, Mailing Address and ZIP Code "	Bulk mailing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/7/95	85.00
H. Full Name, Mailing Address and ZIP Code "	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/14/95	160.00
I. Full Name, Mailing Address and ZIP Code "	Bulk mail permit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/95	1,689.43

SUBTOTAL of Disbursements This Page (optional)

2,818.48

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 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster Pontiac Illinois 61764	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/17/95	100.00
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/28/95	224.00
"	BRE deposit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	100.00
"	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	366.00
"	Postage meter Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	200.00
"	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/95	320.00
"	BRE Permit Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/95	100.00
"	Postage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/95	500.00
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/14/95	238.00

SUBTOTAL of Disbursements This Page (optional)

2,148.00

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 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barbara Gillis P.O. Box 88 Cornell, IL 61319	Consulting services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/13/95	583.33
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/95	583.33
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/95	583.33
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/28/95	583.33
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/95	583.33
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Reim: mileage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/95	57.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Consulting services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/95	583.33
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/14/95	583.33
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/95	583.33

SUBTOTAL of Disbursements This Page (optional)

4,723.64

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 5 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barbara Gillis P.O. Box 88 Cornell, IL 61319	Reim: Travel and mileage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/5/95	362.82
B. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement Consulting services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/95	583.33
C. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/95	583.33
D. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/95	583.33
E. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement Reim: Mileage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/95	73.85
F. Full Name, Mailing Address and ZIP Code Beth Defenbaugh Rural Route Blackstone, IL 61313	Purpose of Disbursement Consulting services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/13/95	201.50
G. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/95	260.00
H. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement Reim: Mileage Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/95	2.24
I. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement Consulting services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/95	318.50

SUBTOTAL of Disbursements This Page (optional)

2,968.90

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 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Beth Defenbaugh Rural Route Blackstone, IL 61313	Consulting services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/28/95	227.50
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/95	364.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/95	240.50
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/14/95	182.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/28/95	208.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/95	260.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/31/95	156.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/16/95	286.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
McKeon & Associates 653 Glenwood Avenue Joliet, IL 60435-7009	Consulting services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/95	10,000.00

SUBTOTAL of Disbursements This Page (optional)

11,924.00

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 7 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cellular One - Central IL P.O. Box 2545 Decatur, IL 62525-2545	Telephone service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	1/31/95	68.31
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	55.68
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/21/95	28.83
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/29/95	42.16
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/95	48.35
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/95	46.16
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/95	42.24
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/95	31.09
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/16/95	52.81

SUBTOTAL of Disbursements This Page (optional)

415.63

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 8 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code GTE North 107 Pleasantview Plymouth, WI 53073	Purpose of Disbursement <u>Telephone service</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/31/95	Amount of Each Disbursement This Period 120.11
B. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/1/95	Amount of Each Disbursement This Period 135.16
C. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/29/95	Amount of Each Disbursement This Period 207.76
D. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/21/95	Amount of Each Disbursement This Period 269.88
E. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/22/95	Amount of Each Disbursement This Period 148.46
F. Full Name, Mailing Address and ZIP Code American Aadvantage-Citibank P.O. Box 6702 Sioux Falls, SD 57188	Purpose of Disbursement <u>Credit card payment</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 1/31/95	Amount of Each Disbursement This Period 238.32
G. Full Name, Mailing Address and ZIP Code Outback Steakhouse 4821 North First Street Arlington, VA 22203 Individual vendor over \$200	Purpose of Disbursement <u>Dinner for workers</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 12/14/94	Amount of Each Disbursement This Period 238.32 (memo)
H. Full Name, Mailing Address and ZIP Code Heaton Agency, Inc. P.O. Box 381 Pontiac, IL 61764	Purpose of Disbursement <u>Business owners insurance</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/1/95	Amount of Each Disbursement This Period 250.00
I. Full Name, Mailing Address and ZIP Code Pontiac National Bank 223 North Mill Street Pontiac, IL 61764	Purpose of Disbursement <u>Federal income tax</u> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/1/95	Amount of Each Disbursement This Period 596.00

SUBTOTAL of Disbursements This Page (optional)

1,965.69

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 9 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Illinois Department of Revenue P.O. Box 19008 Springfield, IL 62794-9008	State income tax Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	213.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
River Building Trust 119 210 West Water Street Pontiac, IL 61764	Rent Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/6/95	275.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/95	275.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/1/95	275.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	" Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/1/95	275.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Printing Craftsmen of Pontiac P.O. Box 106 Pontiac, IL 61764	Envelopes, invitations, letterhead Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/6/95	1,860.35
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	Invitations and envelopes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/95	756.25
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
"	Business cards and envelopes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/15/95	196.95
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Congressional Institute 316 Pennsylvania Ave., S.E. Suite 403 Washington, DC 20003-1146	Conference fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/1/95	250.00

SUBTOTAL of Disbursements This Page (optional)

4,376.55

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 10 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chart House 1 Cameron Street Alexandria, VA 22314	Deposit for dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/95	200.00
B. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement Dinner for fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/6/95	2,650.90
C. Full Name, Mailing Address and ZIP Code Printec Press 2602 N. Mattis Champaign, IL 61821	Purpose of Disbursement Printing of candi- date bio Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/15/95	297.00
D. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement " Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/95	194.00
E. Full Name, Mailing Address and ZIP Code Mayflower Hotel 1127 Connecticut Ave. NW Washington, DC 20036	Purpose of Disbursement Labor and food for reception Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/31/95	236.00
F. Full Name, Mailing Address and ZIP Code "	Purpose of Disbursement Labor and food for reception Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/22/95	32.56
G. Full Name, Mailing Address and ZIP Code American Cafe 227 Massachusetts Ave. NW Washington, DC 20002	Purpose of Disbursement Food for fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/7/95	700.00
H. Full Name, Mailing Address and ZIP Code LaFonda Catering 1639 R St. NW Washington, DC 20009-6420	Purpose of Disbursement Food, staff, flowers, rental for fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/12/95	1,085.70
I. Full Name, Mailing Address and ZIP Code National Republican Congressional Committee 320 First Street, SE Washington, DC 20003	Purpose of Disbursement Audio recording and cassette Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/21/95	48.15

SUBTOTAL of Disbursements This Page (optional)

5,444.31

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 11 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code Xerox Corporation P.O. Box 8137 Park Ridge, IL 60068	Purpose of Disbursement Copier Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/22/95	Amount of Each Disbursement This Period 1,772.49
B. Full Name, Mailing Address and ZIP Code Premium Specialties 789 South McMullen Drive Kankakee, IL 60901	Purpose of Disbursement Lapel pins Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/15/95	Amount of Each Disbursement This Period 393.44
C. Full Name, Mailing Address and ZIP Code Congressional Club Cookbooks 2001 New Hampshire Ave., NW Washington, DC 20009	Purpose of Disbursement Cookbooks, postage and handling Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/15/95	Amount of Each Disbursement This Period 290.00
D. Full Name, Mailing Address and ZIP Code Michael's Catering 720 South Neil Street Champaign, IL 61820	Purpose of Disbursement Food and labor for fundraiser Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 6/15/95	Amount of Each Disbursement This Period 2,679.02
E. Full Name, Mailing Address and ZIP Code United Mileage Plus Card-Visa P.O. Box 15098 Wilmington, DE 19886	Purpose of Disbursement Credit card payment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/1/95	Amount of Each Disbursement This Period 356.40
F. Full Name, Mailing Address and ZIP Code U.S. House of Representatives Gift Shop Washington, DC Individual vendor over \$200	Purpose of Disbursement Tote bags and key chains Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/30/95	Amount of Each Disbursement This Period 356.40 (memo)
G. Full Name, Mailing Address and ZIP Code United Mileage Plus Card-Visa P.O. Box 15098 Wilmington, DE 19886	Purpose of Disbursement Credit card payment Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/12/95	Amount of Each Disbursement This Period 289.00
H. Full Name, Mailing Address and ZIP Code National Travel 218 W. Madison Street Pontiac, IL 61764 Individual vendor over \$200	Purpose of Disbursement Air fare Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/30/95	Amount of Each Disbursement This Period 289.00 (memo)
I. Full Name, Mailing Address and ZIP Code Thomas W. Ewing 310 West Lincoln Pontiac, IL 61764	Purpose of Disbursement Reim: Travel, supplies, misc., meals Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/21/95	Amount of Each Disbursement This Period 1,424.73

SUBTOTAL of Disbursements This Page (optional)

7,205.08

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 12 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code Thomas W. Ewing 310 West Lincoln Pontiac, IL 61764	Purpose of Disbursement Reim: Travel, gift, meals, repairs, cards Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 5/22/95	Amount of Each Disbursement This Period 1,497.29
B. Full Name, Mailing Address and ZIP Code U.S. Air, Inc. 2345 Crystal Drive Arlington, VA 22227 Individual vendor over \$200	Purpose of Disbursement Reim: Plane fare Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/16/95	Amount of Each Disbursement This Period 275.00 (memo)
C. Full Name, Mailing Address and ZIP Code Capitol Hill Club 300 1st St. SE Washington, DC 20003 Individual vendor over \$200	Purpose of Disbursement Reim: Dues, meals Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/19/95	Amount of Each Disbursement This Period 248.87 (memo)
D. Full Name, Mailing Address and ZIP Code Illinois Republican Party 330 South Fourth Street Springfield, IL 62701	Purpose of Disbursement Voter file list Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 3/1/95	Amount of Each Disbursement This Period 792.48
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)

2,289.77

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 13 OF 13
FOR LINE NUMBER 17

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code Republican National Committee 310 First Street SE Washington, DC 20003	Purpose of Disbursement Media services Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 2/22/95	Amount of Each Disbursement This Period 137.38 (In kind)
B. Full Name, Mailing Address and ZIP Code National Republican Congressional Committee 320 First Street, SE Washington, DC 20003	Purpose of Disbursement Media production Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 4/4/95	Amount of Each Disbursement This Period 98.50 (In kind)
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)

235.88

TOTAL This Period (last page this line number only)

52,044.01

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21

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)

Ewing for Congress Committee

C00250555

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Illinois Lincoln Series 127 West Aurora Avenue Naperville, IL 60540	Non federal contribution Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	2/15/95	500.00
B. Full Name, Mailing Address and ZIP Code National Republican Congressional Committee 320 First Street SE Washington, DC 20003	Contribution - federal party Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	3/1/95	6,500.00
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)

7,000.00

TOTAL This Period (last page this line number only)

7,000.00