

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Fowler for Congress		2. FEC IDENTIFICATION NUMBER C00270058
ADDRESS (number and street) Post Office Box 380087	<input type="checkbox"/> Check if different than previously reported.	
CITY, STATE and ZIP CODE Jacksonville, FL 32205	STATE/DISTRICT FL 4	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

JUL 30 12 34 PM '99

4. TYPE OF REPORT

- | | |
|--|---|
| <input type="checkbox"/> April 15 Quarterly Report

<input type="checkbox"/> July 15 Quarterly Report

<input type="checkbox"/> October 15 Quarterly Report

<input type="checkbox"/> January 31 Year End Report

<input checked="" type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only) | <input type="checkbox"/> Twelfth day report preceding _____
(Type of Election)
election on _____ in the State of _____

<input type="checkbox"/> Thirtieth day report following the General Election on _____
in the State of _____

<input type="checkbox"/> 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
01/01/99 through 06/30/99		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$2082.23	\$2082.23
(b) Total Contribution Refunds (From Line 20(d))	\$0.00	\$0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	\$2082.23	\$2082.23
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$18413.96	\$18413.96
(b) Total Offsets to Operating Expenditures (from Line 14)	\$800.00	\$800.00
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))	\$17613.96	\$17613.96
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$413507.19	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$0.00	

For further information:
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 R. Travis Storey	Date 7/23/99
Signature of Treasurer <i>R. Travis Storey</i>	

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

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FEC FORM 3
(Revised 4/87)

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

Name of Committee (in full) Fowler for Congress	Report Covering the Period:	
	From:	To:
	01/01/99	08/30/99
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)	\$0.00	
(ii) Unitemized	\$0.00	
(iii) Total of contributions from individual	\$0.00	\$0.00
(b) Political Party Committees	\$82.23	\$82.23
(c) Other Political Committees (such as PACs)	\$2000.00	\$2000.00
(d) The Candidate	\$0.00	\$0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d))	\$2082.23	\$2082.23
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) All Other Loans	\$0.00	\$0.00
(c) TOTAL LOANS (add 13(a) and (b))	\$0.00	\$0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	\$800.00	\$800.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	\$12895.87	\$12895.87
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	\$15777.90	\$15777.90
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	\$18413.98	\$18413.98
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	\$0.00	\$0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	\$0.00	\$0.00
(b) Of All Other Loans	\$0.00	\$0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	\$0.00	\$0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	\$0.00	\$0.00
(b) Political Party Committees	\$0.00	\$0.00
(c) Other Political Committees (such as PACs)	\$0.00	\$0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	\$0.00	\$0.00
21. OTHER DISBURSEMENTS	\$32000.00	\$32000.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	\$50413.98	\$50413.96
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$448233.25
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$15777.90
25. SUBTOTAL (add Line 23 and Line 24)		\$464011.15
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 16)		\$50413.96
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$413597.19

SCHEDULE A

ITEMIZED RECEIPTS

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)
 Fowler for Congress

Full Name, Mailing Address and Zip Code National Republican Congressional Comm. Incumbent Support Fund 320 First Street SE Washington, DC 20003-	Name of Employer Occupation	Date (month, day, year) 01/19/99	Amount of Each Receipt this Period \$23.60
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$23.60	IN-KIND
Full Name, Mailing Address and Zip Code National Republican Congressional Comm. Incumbent Support Fund 320 First Street SE Washington, DC 20003-	Name of Employer Occupation	Date (month, day, year) 02/03/99 Satellite Feed	Amount of Each Receipt this Period \$18.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$41.60	IN-KIND
Full Name, Mailing Address and Zip Code National Republican Congressional Comm. Incumbent Support Fund 320 First Street SE Washington, DC 20003-	Name of Employer Occupation	Date (month, day, year) 03/04/99 Satellite Feed	Amount of Each Receipt this Period \$26.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$67.60	IN-KIND
Full Name, Mailing Address and Zip Code National Republican Congressional Comm. Incumbent Support Fund 320 First Street SE Washington, DC 20003-	Name of Employer Occupation	Date (month, day, year) 03/24/99	Amount of Each Receipt this Period \$14.63
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->	\$82.23	IN-KIND
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code ,	Name of Employer Occupation	Date (month, day, year) / /	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$82.23
TOTAL This Period (last page this line number only)	\$82.23

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary page	PAGE	OF
	1	1
FOR LINE NUMBER		11 (C)

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NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full Name, mailing address and zip code Assoc. of American Railroads Pac Ms. Karen B. Phillips, Chairman RAILPAC Washington, DC 20001- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 05/30/99 \$1000.00	Amount of each Receipt this Period \$1000.00
Full Name, mailing address and zip code Harris FEPAC Mr. Raymond M. White, VP Harris Corporation Alexandria, VA 22314- Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 05/10/99 \$1000.00	Amount of each Receipt this Period \$1000.00
Full Name, mailing address and zip code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
Full Name, mailing address and zip code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
Full Name, mailing address and zip code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
Full Name, mailing address and zip code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period
Full Name, mailing address and zip code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	\$2000.00
TOTAL This Period (last page this line number only)	\$2000.00

SCHEDULE A

ITEMIZED RECEIPTS

Any information supplied 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 collect contributions from such committee.

NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full Name, Mailing Address and Zip Code National Republican Congressional Comm. Incumbent Support Fund 320 First Street SE Washington, DC 20003-	Name of Employer Reimbursement Occupation	Date (month, day, year) 04/08/99	Amount of each Receipt this Period \$800.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date -> \$800.00		
Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (month, day, year) / /	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (month, day, year) / /	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (month, day, year) / /	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (month, day, year) / /	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (month, day, year) / /	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		
Full Name, Mailing Address and Zip Code	Name of Employer Occupation	Date (month, day, year) / /	Amount of each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ->		

SUBTOTAL of Receipts This Page (optional)	\$800.00
TOTAL This Period (last page this line number only)	\$800.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Fowler for Congress

Full Name, Mailing Address and zip code	Name of Employer	Date (month, day, year)	Amount of each Receipt this Period
NationsBanc Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194	Interest	01/31/99	\$1268.68
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$1268.68	
NationsBanc Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194	Interest	02/28/99	\$1255.14
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$2523.82	
NationsBanc Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194	Interest	03/31/99	\$1110.30
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$3634.12	
NationsBanc Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194	Interest	04/30/99	\$1229.56
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$4863.68	
NationsBanc Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194	Interest	05/31/99	\$1137.05
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$6000.73	
NationsBanc Investments, Inc 9550 Regency Square Blvd. Jacksonville, FL 32225-8194	Interest	06/30/99	\$1146.19
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$7146.92	
SunTrust Bank No. FL NA Mr. Vaughn Sharp PO Box 2611 Jacksonville, FL 32203-2611	Interest	06/10/99	\$5748.75
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation		
	Aggregate Year-to-Date ->	\$5748.75	

SUBTOTAL of Receipts This Page (optional) \$12895.67

TOTAL This Period (last page this line number only) \$12895.67

SCHEDULE B

ITEMIZED DISBURSEMENTS

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bank of America Credit Card PO Box 85580 Louisville, KY 40285-5580	Internet Fee, Stationary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/99	\$290.57
Bank of America Credit Card PO Box 85580 Louisville, KY 40285-5580	Travel Rep. Retreat, Internet Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/19/99	\$1452.43
Bank of America Credit Card PO Box 85580 Louisville, KY 40285-5580	Business Expenses; Travel; Fed Ex. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/16/99	\$390.85
Bank of America Credit Card PO Box 85580 Louisville, KY 40285-5580	Internet Monthly Fee/Travel Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/03/99	\$410.90
Bank of America Credit Card PO Box 85580 Louisville, KY 40285-5580	Internet, Campaign Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/28/99	\$74.85
Bank of America Credit Card PO Box 85580 Louisville, KY 40285-5580	Internet Connection Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/18/99	\$16.25
Bell South PO Box 33009 Charlotte, NC 28243-0001	Local Phone Svc. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/18/99	\$112.13

SUBTOTAL of Disbursements This Page (optional)	\$2747.98
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
 Fowler for Congress

Full Name, Mailing Address and Zip Code Bell South PO Box 33009 Charlotte, NC 28243-0001	Purpose of Disbursement Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/03/99	Amount of Each Disbursement This Period \$114.44
Full Name, Mailing Address and Zip Code Bell South PO Box 33009 Charlotte, NC 28243-0001	Purpose of Disbursement Local Phone Svc. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 03/15/99	Amount of Each Disbursement This Period \$110.18
Full Name, Mailing Address and Zip Code Bell South PO Box 33009 Charlotte, NC 28243-0001	Purpose of Disbursement Phone Service Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 04/16/99	Amount of Each Disbursement This Period \$111.36
Full Name, Mailing Address and Zip Code Bell South PO Box 33009 Charlotte, NC 28243-0001	Purpose of Disbursement Telephone Svc. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 02/10/99	Amount of Each Disbursement This Period \$110.96
Full Name, Mailing Address and Zip Code Bell South PO Box 33009 Charlotte, NC 28243-0001	Purpose of Disbursement Local Phone Svc. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/10/99	Amount of Each Disbursement This Period \$114.13
Full Name, Mailing Address and Zip Code Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	Purpose of Disbursement April Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 05/01/99	Amount of Each Disbursement This Period \$602.92
Full Name, Mailing Address and Zip Code Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	Purpose of Disbursement December Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 01/06/99	Amount of Each Disbursement This Period \$602.92

SUBTOTAL of Disbursements This Page (optional)	\$1766.91
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	February Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$602.92
Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	January Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/01/99	\$602.92
Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	May Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/99	\$602.92
Mrs. Nancy O. Burrows 4635 Verona Avenue Jacksonville, FL 32210-	March Salary Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/99	\$602.92
Capitol Hill Club 300 First Street S.E. Washington, D.C., 20003-	Dues 1999 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/22/99	\$300.00
Chowder & Marching 15109 Bitter Root Way Rockville, MD 20853-	50th Anniversary Gala Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/20/99	\$250.00
Danka 9150 Phillips Highway Jacksonville, FL 32255-	Fax Toner Cartridge Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/19/99	\$106.45

SUBTOTAL of Disbursements This Page (optional)	\$3068.13
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Fowler for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Danka 9150 Phillips Highway Jacksonville, FL 32256-	Cartridges for Fax Machine Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/19/99	\$195.32
Internal Revenue Service Atlanta, GA 39901-	1998 Federal Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/15/99	\$3527.40
Internal Revenue Service Atlanta, GA 39901-	Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/15/99	\$1072.39
Internal Revenue Service Atlanta, GA 39901-	Federal Unemployment Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/30/99	\$57.60
Internal Revenue Service Atlanta, GA 39901-	Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/24/99	\$318.33
Nations Bank 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/08/99	\$294.16
Nations Bank 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$294.16

SUBTOTAL of Disbursements This Page (optional)	\$5759.38
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Nations Bank 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/99	\$294.16
Nations Bank 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	05/01/99	\$294.16
Nations Bank 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes for January Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/01/99	\$294.16
Nations Bank 50 N. Laura Street Jacksonville,, FL 32202-	Employee Taxes Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	04/07/99	\$294.16
Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Office Rent - April Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	03/31/99	\$211.27
Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Office Rent - February Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	02/01/99	\$211.27
Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Office Rent June Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	06/01/99	\$211.27

SUBTOTAL of Disbursements This Page (optional)	\$1810.45
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 7
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Fowler for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month, day, year)	Amount of Each Disbursement This Period
Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Office Rent-May Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/99	\$211.27
Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Office Rent - March Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$211.27
Ortega Office Associates 4325 Sweet Gum Lane Jacksonville, FL 32210-	Office Rent-January Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/06/99	\$211.27
Petty Cash PO Box 380087 Jacksonville, FL 32205-	Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/07/99	\$100.00
Petty Cash PO Box 380087 Jacksonville, FL 32205-	Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/99	\$100.00
Petty Cash PO Box 380087 Jacksonville, FL 32205-	Office Supplies Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/99	\$100.00
Presentation Resources 1819 Kings Avenue Jacksonville, FL 32207-8787	Sound Eqpt. Rental Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/01/99	\$250.28

SUBTOTAL of Disbursements This Page (optional)	\$1184.09
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The River Club of Jacksonville, Inc. 1 Independent Square Jacksonville, FL 32202-	Dinner Sect. Navy Danzig Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/10/99	\$192.98
The River Club of Jacksonville, Inc. 1 Independent Square Jacksonville, FL 32202-	Luncheon Editor FL Times Union Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	02/10/99	\$65.82
Swisher International PO Box 2230 Jacksonville, FL 32203-	Travel to Miami-NRCC Mtg. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	01/27/99	\$396.00
US Postmaster South Jax Station Jacksonville, FL 32207-9998	Postage Stamps Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/28/99	\$132.00
US Postmaster South Jax Station Jacksonville, FL 32207-9998	Postal Box Rental-Bi-annual Fee Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	03/01/99	\$41.00
US Postmaster South Jax Station Jacksonville, FL 32207-9998	Postage Stamps Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/01/99	\$66.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	/ /	

SUBTOTAL OF Disbursements This Page (optional)	\$693.80
TOTAL This Period (last page this line number only)	\$17230.72

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full name, mailing address and zip code	Purpose of Disbursement	Date (month, day, year)	Amount of each Disbursement This Period
Bob Barr for Congress PO Box 4323 Marietta, GA 30061-	US House Dist 7 GA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Re-elect Brian Bilbray for Congress 970 Seacourt Drive Imperial Beach, CA 91931-	US House Dist 49 CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Chabot for Congress 3333 Glenmore Cincinnati, OH 45211-	US House Dist 1 Ohio Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Dickey for Congress PO Box 8766 Pine Bluff, AR 71611-	US House Dist 4 AR Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Fletcher for Congress PO Box 4703 Lexington, KY 40544-	US House Dist 6 KY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Hayes for Congress 102 Church Street North Concord, NC 28025-	US House Dist 8 NC Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Mike Hobbs for Congress 415 Bronco Circle Shady Shores, TX 76208-	Congressional Election Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/20/99	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$7000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Fowler for Congress

Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Republican Congressional Comm. Incumbent Support Fund 320 First Street SE Washington, DC 20003-	Contribution-excess campaign funds Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/18/99	\$15000.00
Bob Ney for Congress 146 A West Main Street Saint Clairsville, OH 43950-	US House Dist 18 OH Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Friends of Mike Parker PO Box Drawer 229 Brookhaven, MS 39602-	Governor's Race MS Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/20/99	\$1000.00
Quinn for Congress PO Box 2812 Blasdell, NY 14209-	US House Dist 30 NY Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Rogan for Congress PO Box 36 Montrose, CA 91021-	US House Dist 27 CA Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00
Vision for America PAC 1155 21st Street NW Suite 300 Washington, DC 20036-	Contribution Multicandidate Comm. Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	04/13/99	\$5000.00
Heather Wilson for Congress PO Box 14070 Albuquerque, NM 87191-	US House Dist 1 NM Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/05/99	\$1000.00

SUBTOTAL of Disbursements This Page (optional)	\$25000.00
TOTAL This Period (last page this line number only)	\$32000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
A.A.Q. PREPARER	7/30/99 DATE PREPARED