

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAY 10 1998

1. NAME OF COMMITTEE (in full) <b>Effective Government Committee</b>	2. FPC IDENTIFICATION NUMBER <b>C00190876</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>507 14th Street, NW, Suite 800</b>	3. This committee qualified as a multi-candidate race DURING THIS Reporting Period on _____ (date).
CITY, STATE and ZIP CODE <b>Washington, DC 20005</b>	

## 4. TYPE OF REPORT

- |  |  |
|--|--|
| (a) <input type="checkbox"/> April 15 Quarterly Report<br><input type="checkbox"/> July 15 Quarterly Report<br><input type="checkbox"/> October 15 Quarterly Report<br><input type="checkbox"/> January 31 Year End Report<br><input type="checkbox"/> July 31 Mid Year Report (Non-Election Year Only)<br><input type="checkbox"/> Termination Report | Monthly Report Due On:<br><input type="checkbox"/> February 20 <input type="checkbox"/> June 20 <input type="checkbox"/> October 20<br><input type="checkbox"/> March 20 <input checked="" type="checkbox"/> July 20 <input type="checkbox"/> November 20<br><input type="checkbox"/> April 20 <input type="checkbox"/> August 20 <input type="checkbox"/> December 20<br><input type="checkbox"/> May 20 <input type="checkbox"/> September 20 <input type="checkbox"/> January 31<br><input type="checkbox"/> Twelfth day report preceding _____<br><small style="margin-left: 150px;">Type of Election</small><br>election on _____ in the State of _____<br><input type="checkbox"/> Thirtieth day report following the General<br>Election on _____ in the State of _____ |
|--|--|

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-To-Date
5. Covering Period <u>06/01/98</u> through <u>06/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 7,614.29
(b) Cash on Hand at Beginning of Reporting Period	\$ 2,950.02	
(c) Total Receipts (from Line 10)	\$ 35,155.61	\$ 270,245.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 38,105.63	\$ 278,059.35
7. Total Disbursements (from Line 30)	\$ 36,965.33	\$ 276,919.05
8. Cash on Hand at Close of Period (subtract Line 7 from 6(d))	\$ 1,140.30	\$ 1,140.30
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)	\$ 94,652.12	

For more info contact:  
Federal Election Comm  
999 E. Street, NW  
Washington DC 20463  
Toll Free 800-424-9530  
Local 202-218-3420

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  
**Malissa D. Feld - Treasurer**

Signature of Treasurer: *Malissa D. Feld* Date: 7/17/98

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

NAME OF COMMITTEE  
Effective Government Committee

REPORT COVERING PERIOD  
FROM 06/01/98 TO: 06/30/98

	COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A).....	\$31,500.00	\$165,250.00
ii. Unitemized .....		\$500.00
iii. Total .....	\$31,500.00	\$165,750.00
b. Political Party Committees.....		
c. Other Political Committees (such as PACs).....	\$3,000.00	\$99,500.00
d. Total Contributions.....(add a iii, b and c)	\$34,500.00	\$265,250.00
12. Transfers From Affiliated/Other Party Committees .....		
13. All Loans Received .....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)...	\$600.00	\$4,577.10
16. Refunds of Contribs Made TO Federal Cand/Political Comtee....		
17. Other Federal Receipts (Dividends, Interest, etc.) .....	\$55.61	\$417.96
18. Transfers From Nonfederal Account For Joint Activity .....		
19. Total Receipts .....	\$35,155.61	\$270,245.06
20. Total Federal Receipts .....	\$35,155.61	\$270,245.06
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule E4)		
i. Federal Share .....		
ii. Non-Federal Share .....		
b. Other Federal Operating Expenditures.....	\$33,729.81	\$224,683.53
c. Total Operating Expenditures.....(Add a i, a ii, and b)	\$33,729.81	\$224,683.53
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Fed Cand/Comtee and Other Political Comtee...	\$3,235.52	\$40,735.52
24. Independent Expenditures (Use Schedule E) .....		
25. Coordinated Expend BY Party Comtee (2 USC 441a(d)-Use Sched F)		
26. Loan Repayments Made .....		
27. Loans Made.....		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees.....		
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		\$2,500.00
d. Total Contribution Refunds .....	\$0.00	\$2,500.00
29. Other Disbursements .....		\$1,000.00
30. Total Disbursements (21c, 22, 23, 24, 25, 26, 27, 28d and 29)	\$36,965.33	\$276,919.05
31. Total Fed Disbursements (subtract line 21 a ii from line 30).	\$36,965.33	\$276,919.05
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from line 11d).....	\$34,500.00	\$265,250.00
33. Total Contribution Refunds (from line 28d).....		\$2,500.00
34. Net Contributions (other than loans) (subtract line 33 & 32)..	\$34,500.00	\$262,750.00
35. Total Federal Operating Expenditures.....(add 21 a i & 21 b).	\$33,729.81	\$224,683.53
36. Offsets to Operating Expenditures (from line 15).....	\$600.00	\$4,577.10
37. Net Operating Expenditures.....(subtract line 36 from 35)	\$33,129.81	\$220,106.43

**SCHEDULE D**

**DEBTS AND OBLIGATIONS**  
Excluding Loans

Page 1 of 1 for  
LINE NUMBER 10  
(Use separate schedule  
for each numbered line)

Name of Committee (in Full) Effective Government Committee	Outstanding Balance Beg This Period	Amount Incurred This Period	Payment This Period	Outstanding Bal at Close of Period
<b>A. Full Name, Mailing Addr &amp; Zip of Debtor/Creditor</b> NCEC Services 507 Capitol Court Washington, DC 20002	30500.00	0.00	0.00	30500.00
<b>Nature of Debt (Purpose):</b> Consulting Services				
<b>B. Full Name, Mailing Addr &amp; Zip of Debtor/Creditor</b> Parkins Cois 607 14th Street, NW Washington, DC 20005	58303.87	5848.31	0.00	64152.18
<b>Nature of Debt (Purpose):</b> Legal/Accounting Services				
<b>C. Full Name, Mailing Addr &amp; Zip of Debtor/Creditor</b> DaveL 200 Second Street Chelsea, MA 02150	1427.49	0.00	1427.49	0.00
<b>Nature of Debt (Purpose):</b> Travel				
<b>D. Full Name, Mailing Addr &amp; Zip of Debtor/Creditor</b>				
<b>Nature of Debt (Purpose):</b>				
<b>E. Full Name, Mailing Addr &amp; Zip of Debtor/Creditor</b>				
<b>Nature of Debt (Purpose):</b>				
<b>F. Full Name, Mailing Addr &amp; Zip of Debtor/Creditor</b>				
<b>Nature of Debt (Purpose):</b>				
<b>1) SUBTOTALS This Period This Page (optional)</b>				694,552.18
<b>2) TOTAL This Period (last page this line only)</b>				694,552.18
<b>3) TOTAL OUTSTANDING LOANS from Sched C (last page only)</b>				0.00
<b>4) ADD 2) and 3) and carry forward to Summary Page (last page only)</b>				694,552.18

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

Page 1 of 3  
For Line: 11a1

Any information copied or used 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.

**Effective Government Committee**

A. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Aitken, Wylie A. 3 Imperial Promenade, Suite 800 Santa Ana CA 92707	Wiley, Aitken	6/24/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998 General		Occupation: Partner Aggregate Year-To-Date > \$ 2,000.00	
B. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Black, Scott M. 50 Rowes Wharf No. 440 Boston MA 02110	Delphi Management	6/23/98	\$2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998 General		Occupation: President & CEO Aggregate Year-To-Date > \$ 2,500.00	
C. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Fox, Jerald W. 5216 Guildbrook Road Charlotte NC 28226	Wilson Bayes Assoc.	5/29/98	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998 General		Occupation: Accountant Aggregate Year-To-Date > \$ 5,000.00	
D. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Furman, Gail 170 Sullivan Street New York NY 10012	Self-Employed	6/4/98	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998 General		Occupation: Psychologist Aggregate Year-To-Date > \$ 5,000.00	
E. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Kaplan, Mitchell T. 2025 Grace Avenue Los Angeles CA 90068	Kaplan StahlerGumner	6/17/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998 General		Occupation: Partner Aggregate Year-To-Date > \$ 1,000.00	
F. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Klein, Herbert C. 11 Brook Ridge Court Cedar Grove NJ 07009	Hancock Weisman	6/24/98	\$2,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998 General		Occupation: Attorney Aggregate Year-To-Date > \$ 2,000.00	
G. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Kramer Dillof Tassel Duffy & Moore 233 Broadway New York NY 10279	PARTNERSHIP	6/10/98	\$3,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998 General		Occupation: Aggregate Year-To-Date > \$ 3,000.00	
SUBTOTAL of Receipts This Page (Optional).....			\$19,500.00
TOTAL This Period (last page this line number only).....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the detailed summary page

Page 2 of 3  
For Line: 11a1

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**Effective Government Committee**

A. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Duffy, Jim 233 Broadway New York NY 10279	Kramer Dillof Tassel PARTNERSHIP ALLOCATION	6/10/98	\$3,000.00 MEMO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation Partner	Aggregate Year-To-Date > \$ 3,000.00	
B. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Lee, Rotan B. 1 Sala Avenue Suite 320 Sala Cynwyd PA 19004	Self-Employed	6/26/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation Attorney	Aggregate Year-To-Date > \$ 1,000.00	
C. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Manning, John P. One Boston Place Suite 2100 Boston MA 02108	Boston Capital Part.	6/24/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation President	Aggregate Year-To-Date > \$ 1,000.00	
D. Full Name, Address, Zip Code	Name of Employer	Date	Amount
McCotter, George P.O. Box 715 Lillington NC 27546	Worldwide Travel	6/26/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation Owner	Aggregate Year-To-Date > \$ 1,000.00	
E. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Peel, Deborah C. 2905 San Gabriel Street No. 207 Austin TX 78705	Self-Employed	6/23/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation Psychiatrist	Aggregate Year-To-Date > \$ 1,000.00	
F. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Schwartz, Alan W. 1911 Satori Avenue Suite 11 Torrance CA 90501	AMS Consulting Serv.	6/24/98	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation President	Aggregate Year-To-Date > \$ 1,000.00	
G. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Werle, Matthew T. 1009 Fox Hound Court Charlotte NC 28212	Reyes for Commission	6/29/98	\$5,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation Asst. Campaign Mgr.	Aggregate Year-To-Date > \$ 5,000.00	
<b>SUBTOTAL of Receipts This Page (Optional)</b>			\$10,000.00
<b>TOTAL This Period (last page this line number only)</b>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the detailed primary page

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For line: 11a1

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**Effective Government Committee**

<p>A. Full Name, Address, Zip Code Wilson, Andrew C. 44 E. Springfield Street Boston MA 02118</p>	<p>Name of Employer Boston Duck Tours \$500 TO BE REFUNDED</p>	<p>Date 6/29/98</p>	<p>Amount \$2,000.00</p>
<p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998</p>	<p>Occupation Director</p>	<p>Aggregate Year-To-Date &gt; \$ 5,500.00</p>	
<p>B. Full Name, Address, Zip Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date &gt; \$</p>	
<p>C. Full Name, Address, Zip Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date &gt; \$</p>	
<p>D. Full Name, Address, Zip Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date &gt; \$</p>	
<p>E. Full Name, Address, Zip Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date &gt; \$</p>	
<p>F. Full Name, Address, Zip Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date &gt; \$</p>	
<p>G. Full Name, Address, Zip Code</p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date &gt; \$</p>	
<p>SUBTOTAL of Receipts This Page (Optional) .....</p>			<p>\$2,000.00</p>
<p>TOTAL This Period (last page this line number only) .....</p>			<p>\$31,500.00</p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**Effective Government Committee**

<p>A. Full Name, Address, Zip Code Keycorp PAC 127 Public Square Cleveland OH 44114 C00073159</p>	<p>Name of Employer  Occupation</p>	<p>Date 6/30/98</p>	<p>Amount \$3,000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998</p>	<p>Aggregate Year-To-Date &gt; \$ 3,000.00</p>		
<p>B. Full Name, Address, Zip Code</p>	<p>Name of Employer  Occupation</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Aggregate Year-To-Date &gt; \$</p>		
<p>C. Full Name, Address, Zip Code</p>	<p>Name of Employer  Occupation</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Aggregate Year-To-Date &gt; \$</p>		
<p>D. Full Name, Address, Zip Code</p>	<p>Name of Employer  Occupation</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Aggregate Year-To-Date &gt; \$</p>		
<p>E. Full Name, Address, Zip Code</p>	<p>Name of Employer  Occupation</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Aggregate Year-To-Date &gt; \$</p>		
<p>F. Full Name, Address, Zip Code</p>	<p>Name of Employer  Occupation</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Aggregate Year-To-Date &gt; \$</p>		
<p>G. Full Name, Address, Zip Code</p>	<p>Name of Employer  Occupation</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Aggregate Year-To-Date &gt; \$</p>		
<p>SUBTOTAL of Receipts This Page (Optional).....</p>			<p>\$3,000.00</p>
<p>TOTAL This Period (last page this line number only).....</p>			<p>\$3,000.00</p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

Page 1 of 1  
For Line: 15

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**Effective Government Committee**

<p><b>A. Full Name, Address, Zip Code</b> Rhode Island PAC 20 Phillips Street Providence RI 02906 C00307991</p>	<p>Name of Employer Sublet Income</p>	<p>Date 6/1/98</p>	<p>Amount \$150.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date \$ 900.00</p>	
<p><b>B. Full Name, Address, Zip Code</b> The Friends of Patrick J. Kennedy P.O. Box 1356 Providence RI 02901 C00301234</p>	<p>Name of Employer Sublet Income</p>	<p>Date 6/1/98</p>	<p>Amount \$450.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date \$ 2,700.00</p>	
<p><b>C. Full Name, Address, Zip Code</b></p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date \$</p>	
<p><b>D. Full Name, Address, Zip Code</b></p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date \$</p>	
<p><b>E. Full Name, Address, Zip Code</b></p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date \$</p>	
<p><b>F. Full Name, Address, Zip Code</b></p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date \$</p>	
<p><b>G. Full Name, Address, Zip Code</b></p>	<p>Name of Employer</p>	<p>Date</p>	<p>Amount</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):</p>	<p>Occupation</p>	<p>Aggregate Year-To-Date \$</p>	
<p><b>SUBTOTAL of Receipts This Page (Optional)</b>.....</p>			<p>\$600.00</p>
<p><b>TOTAL This Period (last page this line number only)</b>.....</p>			<p>\$600.00</p>



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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For Line: 17

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**Effective Government Committee**

A. Full Name, Address, Zip Code Citibank F.S.B. 1400 G Street, NW Washington DC 20005	Name of Employer Interest Income	Date 6/30/98	Amount \$55.61
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1998	Occupation	Aggregate Year-To-Date \$ 17.96	
B. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-To-Date \$	
C. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-To-Date \$	
D. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-To-Date \$	
E. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-To-Date \$	
F. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-To-Date \$	
G. Full Name, Address, Zip Code	Name of Employer	Date	Amount
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Occupation	Aggregate Year-To-Date \$	
<b>SUBTOTAL of Receipts This Page (Optional)</b> .....			<b>\$55.61</b>
<b>TOTAL This Period (last page this line number only)</b> .....			<b>\$55.61</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the detailed primary page

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Any information copied or used 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.

**Effective Government Committee**

A. Full Name, Address, Zip Code	Purpose of Disbursement	Date	Amount
Aaron Rents, Inc. 5720 Gen. Washington Drive Alexandria VA 22312	Office Expense Furniture Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$203.58
B. Full Name, Address, Zip Code Inward Publications, Inc. 2030 Clarendon Blvd., Suite 401 Arlington VA 22201	Purpose of Disbursement Office Supplies Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$219.00
C. Full Name, Address, Zip Code Andrea T. Zuniga 2613 39th Street, NW Washington DC 20007	Purpose of Disbursement Salary Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$483.14
D. Full Name, Address, Zip Code AT&T 2110 Washington Blvd. Suite 400 Arlington VA 22204	Purpose of Disbursement Telephone Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$716.42
E. Full Name, Address, Zip Code Bell Atlantic Wynnex Mobile P.O. Box 64268 Silver Spring MD 21164	Purpose of Disbursement Cell Phone Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$732.98
F. Full Name, Address, Zip Code Blanca E. Langowski 7274 Hillary Street Alexandria VA 22315	Purpose of Disbursement Salary Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$275.22
G. Full Name, Address, Zip Code Blue Cross Blue Shield 550 12th Street SW Washington DC 20065	Purpose of Disbursement Insurance Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$352.00
H. Full Name, Address, Zip Code Bravo P.O. Box 15875 Wilmington DE 19856	Purpose of Disbursement Credit Card Payment Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$80.77
I. Full Name, Address, Zip Code Carroll Travel 201 Mass. Avenue, NE Washington DC 20003	Purpose of Disbursement Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/5/98	\$308.00
<b>SUBTOTAL of Disbursements This Page (Optional).....</b>			<b>\$3,371.11</b>
<b>TOTAL This Period (last page this line number only).....</b>			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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For Line: 21b

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**Effective Government Committee**

A. Full Name, Address, Zip Code	Purpose of Disbursement	Date	Amount
Carroll Travel 201 Mass. Avenue, NE Washington DC 20003	Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/22/98	\$486.00
Carroll Travel 201 Mass. Avenue, NE Washington DC 20003	Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/24/98	\$2,830.00
Carroll Travel 201 Mass. Avenue, NE Washington DC 20003	Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$519.00
CTSG 296 East 5th Street, Suite 302 Eugene OR 97401	Consulting Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$5,128.65
Davei 200 Second Street Chelsea MA 02150	Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$1,427.49
David Jones 314 9th Street, SE Washington DC 20003	Consulting Services Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/18/98	\$2,500.00
DC Cablevision 900 Michigan Avenue Washington DC 20017	Office Expense Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$61.75
Economy Office Products P.O. Box 3328 Merrifield VA 22116	Office Supplies Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$343.83
Genesis Communications 3616 Pocono Place Beltsville MD 20705	Office Expense Equipment Rental Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/10/98	\$494.03
<b>SUBTOTAL of Disbursements This Page (Optional).....</b>			<b>\$13,790.75</b>
<b>TOTAL This Period (last page this line number only).....</b>			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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For Line: 21b

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**Effective Government Committee**

A. Full Name, Address, Zip Code	Purpose of Disbursement	Date	Amount
Israel S. Klein 15 Barry Drive West Orange NJ 07052	Salary Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$415.57
B. Full Name, Address, Zip Code Jason Fastow 1629 Columbia Road, NW Washington DC 20001	Purpose of Disbursement Salary Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$1,229.14
C. Full Name, Address, Zip Code KLM Group 405 Sharrow Avenue Falls Church VA 22045	Purpose of Disbursement Printing Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$683.84
D. Full Name, Address, Zip Code Lanier Worldwide, Inc. 2150 Parklake Drive Atlanta GA 30345	Purpose of Disbursement Equipment Rental Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$172.27
E. Full Name, Address, Zip Code Lindsay Lewis 30 Wellesley Circle Glen Echo MD 20812	Purpose of Disbursement Travel Expenses Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/19/98	\$846.57
F. Full Name, Address, Zip Code Martinair, Inc. P.O. Box 485 Sandston VA 23150	Purpose of Disbursement Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/26/98	\$2,845.00
G. Full Name, Address, Zip Code Media Tel 274 Brannen Street San Francisco CA 94107	Purpose of Disbursement Fax Service Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$987.20
H. Full Name, Address, Zip Code Media Tel 274 Brannen Street San Francisco CA 94107	Purpose of Disbursement Portion In-Kinded to RIPAC, See Line 23 Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	-\$667.52
I. Full Name, Address, Zip Code Melissa D. Feld 2916 C-1 S. Buchanan Street Arlington VA 22206	Purpose of Disbursement Salary Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$1,563.69
<b>SUBTOTAL</b> of Disbursements This Page (Optional).....			\$7,975.78
<b>TOTAL</b> This Period (last page this line number only).....			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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For Line: 21b

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**Effective Government Committee**

A. Full Name, Address, Zip Code	Purpose of Disbursement	Date	Amount
PayChex P.O. Box 2950 Merrifield VA 22116	Payroll Services Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$57.43
PayChex P.O. Box 2950 Merrifield VA 22116	Payroll Taxes Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$3,188.26
QMS Messenger Service P.O. Box 27378 Washington DC 20038	Courier Service Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$204.61
Scott A. Sherman 1042 Tanglewood Circle Belvidere IL 61008	Salary Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$184.70
SKOL, G.P. P.O. Box 15178 Washington DC 20003	Rent Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$845.14
Sprint Spectrum 1200 18th Street, NW Washington DC 20036	Telephone Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/10/98	\$277.70
Tiffany Wolf 12 - 3rd Street, SE Washington DC 20003	Salary Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/30/98	\$1,162.67
United Airlines Sterling VA 20164	Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/5/98	\$703.00
United Airlines Sterling VA 20164	Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/16/98	\$836.00
<b>SUBTOTAL</b> of Disbursements This Page (Optional) .....			\$7,459.51
<b>TOTAL</b> This Period (last page this line number only) .....			

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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For Line: 21b

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**Effective Government Committee**

A. Full Name, Address, Zip Code United Airlines Sterling VA 20164	Purpose of Disbursement Travel Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1400	Date 6/22/98	Amount \$467.00
B. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
C. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
D. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
E. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
F. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
G. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
H. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
I. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
<b>SUBTOTAL</b> of Disbursements This Page (Optional).....			<b>\$467.00</b>
<b>TOTAL</b> This Period (last page this line number only).....			<b>\$33,729.61</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**Effective Government Committee**

A. Full Name, Address, Zip Code	Purpose of Disbursement	Date	Amount
Nahn for Congress 8553 Wilshire Blvd. No. 220 Beverly Hills CA 90211 CD0324707	Contribution CA-36 Disburse For: <input type="checkbox"/> Pri <input checked="" type="checkbox"/> Gen Other: 1998	6/18/98	\$1,000.00
B. Full Name, Address, Zip Code INBA 910 Sylvan Avenue Englewood Cliffs NJ 07632 CD0329245	Purpose of Disbursement Travel for Tom Allen for Congress (ME-1) Disburse For: <input type="checkbox"/> Pri <input checked="" type="checkbox"/> Gen Other: 1998	6/16/98	\$568.00 IN-KIND
C. Full Name, Address, Zip Code Media Tel 274 Brannan Street San Francisco CA 94107 CD0307901	Purpose of Disbursement Fax Service In-Kind to Rhode Island PAC Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other: 1998	6/29/98	\$667.52 IN-KIND
D. Full Name, Address, Zip Code Sherman for Congress 555 South Flower Street Suite 4510 Los Angeles CA 90071 CD0308742	Purpose of Disbursement Contribution CA-24 Disburse For: <input type="checkbox"/> Pri <input checked="" type="checkbox"/> Gen Other: 1998	6/18/98	\$1,000.00
E. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
F. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
G. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
H. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
I. Full Name, Address, Zip Code	Purpose of Disbursement Disburse For: <input type="checkbox"/> Pri <input type="checkbox"/> Gen Other:	Date	Amount
SUBTOTAL of Disbursements This Page (Optional).....			\$3,235.52
TOTAL This Period (last page this line number only).....			\$3,235.52

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>7-18-98</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jm H</i> PREPARER	<i>7-15-98</i> DATE PREPARED