

# foodpac

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

FOOD MARKETING INSTITUTE POLITICAL ACTION COMMITTEE  
800 Connecticut Avenue, N.W. • Washington, D.C. 20006-2704 • (202) 452-8444

Ronald D. Pearson  
Chairman

John J. Motley III  
Treasurer

December 1, 1998

Ms. Antoinette Kitchen  
Reports Analyst  
Reports Analysis Division  
Federal Election Commission  
Washington, DC 20463

Dear Ms. Kitchen:

Enclosed is the Food Marketing Institute Political Action Committee 30 Day Post-General Election Report (10/15/98 - 11/23/98) and an amended Pre-General Report (10/01/98- 10/14/98).

The reason for this letter is to call your attention to our amended Pre-General Report (10/01/98 -10/14/98). We originally reported a \$100 unitemized receipt on Line 11 a. ii. of the Detailed Summary page from Mr. Michael Corsello; 35 Heron Road; Livingston, NJ 07035 dated October, 8 1998. Unfortunately, Mr. Corsello's check was returned to us after the end of the Pre-General reporting period of October 14, 1998 because of an account closure. You will also notice on an amended Schedule B for Line Number 21 that FoodPAC was assessed a charge of \$12.00 by Century National Bank on October 8, 1998 for the return of this check.

Therefore, the following Lines were amended on our Detailed Summary Page— Unitemized Receipts 11 a. ii.; Total Receipts 11 a. iii.; Total Receipts 19; Total Federal Receipts 20; Other Federal Operating Expenses 21 b.; Total Operating Expenditures 21 c.; Total Disbursements 30; Total Federal Disbursements 31; Total Contributions 32; Net Contributions 34; Total Federal Operating Expenditures 35; and Net Operating Expenditures 37.

If you have any further questions, please feel free to contact me.

Sincerely,



John J. Motley III  
Treasurer

Enclosures

Eric Nicoll  
Fundraising Manager

Anne McGhee Curry  
Disbursements Manager

Kary K. La Violette  
FoodPAC Coordinator

For Other Than An Authorized Committee  
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)  
**Food Marketing Institute Political Action Committee**

ADDRESS (number and street)  Check if different than previously reported  
**800 Connecticut Avenue, NW**  
 CITY, STATE and ZIP CODE  
**Washington, DC 20006**

RECEIVED  
 FEDERAL ELECTION  
 COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER **CO00 14555**

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

4. TYPE OF REPORT

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

- Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |

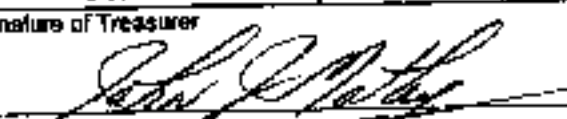
- 12-Day Pre-Election Report for the \_\_\_\_\_  
 (Type of Election)  
 election on \_\_\_\_\_ in the State of \_\_\_\_\_
- 30-Day Post-Election Report following the General Election  
 on 11/03/98 in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>10/15/98</u> through <u>11/23/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 251,454.98
(b) Cash on Hand at Beginning of Reporting Period	\$ 173,884.38	
(c) Total Receipts (from Line 18)	\$ 28,803.10	\$ 257,599.07
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 202,687.48	\$ 509,054.05
7. Total Disbursements (from Line 30)	\$ 39,555.14	\$ 345,921.71
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 163,132.34	\$ 163,132.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$	

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

Type or Print Name of Treasurer  
**John J. Motley III**

Signature of Treasurer  


Date  
11-25-98

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

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

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Food Marketing Institute Political Action Committee	FROM 10/15/98	TO 11/23/98	
	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)	18,350.00	161,064.00	11(d)
ii. Unitemized	7,270.00	71,111.56	11(f)
iii. Total (add i and ii) >	25,620.00	232,175.56	11(g)
b. Political Party Committees			11(h)
c. Other Political Committees (such as PACs)	2,500.00	16,000.00	11(i)
d. Total Contributions (add a ii, b and c) >	28,120.00	248,175.56	11(j)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	683.10	9,423.51	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	28,803.10	257,599.07	19
20. Total Federal Receipts (subtract line 18 from line 19) >	28,803.10	257,599.07	20
<b>II Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(d)
i. Federal Share			21(e)
ii. Non-Federal Share	21.00	4,599.02	21(f)
b. Other Federal Operating Expenditures			21(g)
c. Total Operating Expenditures (add a ii, b and c) >	21.00	4,599.02	21(h)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	39,534.14	340,822.69	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees			28(d)
b. Political Party Committees			28(e)
c. Other Political Committees (such as PACs)			28(f)
d. Total Contribution Refunds (add a, b and c) >			28(g)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	39,555.14	345,921.71	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	39,555.14	345,921.71	31
<b>III Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	28,120.00	248,175.56	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	28,120.00	248,175.56	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	21.00	4,599.02	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) >	21.00	4,599.02	37

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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**NAME OF COMMITTEE (in full)**

Food Marketing Political Action Committee

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Mr. Jack H. Brown 21700 Barton Road Colton, CA 92324</p>	<p><b>Name of Employer</b> Stater Bros. Markets  Chairman, President &amp; CEO <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 10/30/98</p>	<p><b>Amount of Each Receipt this Period</b>  1,500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A</p>	<p>Aggregate Year-to-Date &gt; \$ 2,500.00</p>		
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Mr. Don E. Marsh 2042 St. Andrews Circle Carmel, IN 46032</p>	<p><b>Name of Employer</b> Marsh Supermarkets, Inc.  Chairman, President &amp; CEO <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 11/04/98</p>	<p><b>Amount of Each Receipt this Period</b>  500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Ms. Anne M. Curry 417 Fifth Street, NE Washington, DC 20002</p>	<p><b>Name of Employer</b> Food Marketing Institute  Sr. Government Relations Rep. <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 10/16/98</p>	<p><b>Amount of Each Receipt this Period</b>  500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A</p>	<p>Aggregate Year-to-Date &gt; \$ 1,100.00</p>		
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Mr. Robert Grotke 175 N. Harbor Drive, #3-401 Chicago, IL 60601</p>	<p><b>Name of Employer</b> Robert J. Grotke &amp; Associates  Partner <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 10/30/98</p>	<p><b>Amount of Each Receipt this Period</b>  250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A</p>	<p>Aggregate Year-to-Date &gt; \$ 750.00</p>		
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Mr. Lars E. Peterson 815D 30th Street, NW Washington, DC 20015</p>	<p><b>Name of Employer</b> Food Marketing Institute  Government Relations <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 10/16/98</p>	<p><b>Amount of Each Receipt this Period</b>  500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		
<p><b>F. Full Name, Mailing Address and ZIP Code</b> Mr. Christy Spas, Sr. 134 Jackson Drive Ellwood City, PA 15117</p>	<p><b>Name of Employer</b> Ellwood City Save-A-Lot  President <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 10/16/98</p>	<p><b>Amount of Each Receipt this Period</b>  250.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A</p>	<p>Aggregate Year-to-Date &gt; \$ 500.00</p>		
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Mr. Earl D. Holton 3258 Rogue River Road Belmont, MI 48306</p>	<p><b>Name of Employer</b> Meijer, Inc.  President <b>Occupation</b></p>	<p><b>Date (month, day, year)</b> 10/20/98</p>	<p><b>Amount of Each Receipt this Period</b>  500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A</p>	<p>Aggregate Year-to-Date &gt; \$ 1,000.00</p>		

SUBTOTAL of Receipts This Page (optional) .....

4,000.00

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

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**NAME OF COMMITTEE (In Full)**

Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. William R. MacAloney 18916 Valley Drive Villa Park, CA 92805	Jax Markets	10/20/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President & CEO	Aggregate Year-to-Date > \$ 2,500.00	
Mr. William R. MacAloney 18916 Valley Drive Villa Park, CA 92805	Jax Markets	10/20/98	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President & CEO	Aggregate Year-to-Date > \$ 2,500.00	
Mr. William R. MacAloney 18916 Valley Drive Villa Park, CA 92805	Jax Markets	10/20/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President & CEO	Aggregate Year-to-Date > \$ 2,500.00	
Mr. Peter V. Gregerson, Jr. P.O. Box 4231 Gadsden, AL 35804	Gregerson's Foods, Inc.	10/30/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President & CEO	Aggregate Year-to-Date > \$ 1,000.00	
Mr. Norman C. Mayne 2710 Far Hill Avenue Dayton, OH 45419	Dorothy Lane Market, Inc.	10/30/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President & CEO	Aggregate Year-to-Date > \$ 1,000.00	
Mr. Jeffrey A. Gletzen 1551 Enticell Drive, SE Grand Rapids, MI 49545	D & W Food Centers, Inc.	10/30/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President & CEO	Aggregate Year-to-Date > \$ 1,000.00	
Dr. Thomas S. Haggel 209 N. Main Street, #203 High Point, NC 27260	IGA, INC.	11/04/98	1,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Chairman and CEO	Aggregate Year-to-Date > \$ 2,500.00	

**SUBTOTAL** of Receipts This Page (optional) ..... 4,250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**NAME OF COMMITTEE (In Full)**

Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Richard R. Haggan 2433 North Shore Road Bellingham, WA 98227-8704	Haggan, Inc./Top Food & Drug	10/20/88	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President & COO	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Dale C. Hanley 1780 Old Samish Road Bellingham, WA 98226	Haggan, Inc./Top Food & Drug	10/20/88	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Sr. VP-Finance & CFO	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Fred Byram 217 Bayside Place Bellingham, WA 98225	Haggan, Inc./Top Food & Drug	10/20/88	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: VP, Administrative Services	Aggregate Year-to-Date > \$ 500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Ronald A. Kara 731 Racine Bellingham, WA 98226	Haggan, Inc./TOP Food & Drug	10/20/88	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: VP, Store Operations	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Thomas Kenney 411 Arbutus Place Bellingham, WA 98225	Haggan, Inc./TOP Food & Drug	10/20/88	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Vice President, Finance	Aggregate Year-to-Date > \$ 300.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Joseph Azzolina, Sr. 6 Borden Road Middletown, NJ 07748	Food Circus Supermarkets, Inc.	10/22/88	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President	Aggregate Year-to-Date > \$ 1,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jonathan F. Johnson 2500 E. Cary Street, #220 Richmond, VA 23223	Community Pride Food Stores	10/20/88	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President & CEO	Aggregate Year-to-Date > \$ 500.00	

**SUBTOTAL** of Receipts This Page (optional) ..... 4,800.00

**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 4 OF 4  
FOR LINE NUMBER 11a(f)

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**NAME OF COMMITTEE (in Full)**

Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Robert O. Aders 1820 Jefferson Place, NW Washington, DC 20036	Food Marketing Instit.	11/04/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: President Emeritus	Aggregate Year-to-Date > \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Ronald D. Pearson 5534 Glen Oaks Point West Des Moines, IA 50266	Hy-Vee Food Stores, Inc.	11/09/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Chairman, President & CEO	Aggregate Year-to-Date > \$ 1,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Donald E. Haggen P.O. Box 6065 Bellingham, WA 98227	Haggen Inc./TOP Food & Drug	11/17/98	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Chairman & CEO	Aggregate Year-to-Date > \$ 2,500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Jeffrey Haggen 3001 Alvarado Drive Bellingham, WA 98226	Haggen Inc./TOP Food & Drug	11/17/98	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: VP, Sales & Merchandising	Aggregate Year-to-Date > \$ 300.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mr. Andrew Gehegan 28 Cronbrook Drive Cape Elizabeth, ME 04107	Hannaford Bros. Co.	11/17/98	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): N/A	Occupation: Sr. VP & General Counsel	Aggregate Year-to-Date > \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

18,350.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11c

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**NAME OF COMMITTEE (In Full)**

Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hy-Vee, Inc. Employees PAC 5820 Westown Pkwy. West Des Moines, IA 50266	Hy-Vee, Inc.	10/20/98	2,500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Pac-to-Pac	Occupation: N/A	Aggregate Year-to-Date > \$ 2,500.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

2,500.00



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 17

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**NAME OF COMMITTEE (in Full)**

Food Marketing Political Action Committee

<b>A. Full Name, Mailing Address and ZIP Code</b> Century National Bank 1875 Eye Street, NW Washington, DC 20006	Name of Employer N/A	Date (month, day, year) 10/31/98	Amount of Each Receipt this Period 52.98
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on Account	Occupation N/A	Aggregate Year-to-Date > \$ 52.98	
<b>B. Full Name, Mailing Address and ZIP Code</b> Dean Witter Reynolds, Inc. 1775 Eye Street, NW, Suite 200 Washington, DC 20006	Name of Employer N/A	Date (month, day, year) 10/31/98	Amount of Each Receipt this Period 630.12
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Interest on Account	Occupation N/A	Aggregate Year-to-Date > \$ 630.12	
<b>C. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>D. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>E. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>F. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
<b>G. Full Name, Mailing Address and ZIP Code</b>	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) .....

683.10

**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)

Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Century National Bank 1875 Eye Street, NW Washington, DC 20006	Wire Transfer Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Service Charge	10/23/98	6.00
B. Full Name, Mailing Address and ZIP Code Dean Witter Reynolds, Inc. 1775 Eye Street, NW, Suite 200 Washington, DC 20006	Wire Transfer Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Service Charge	10/23/98	15.00
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) .....

TOTAL This Period (last page this line number only) .....

21.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (in Full)**

Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Citizens for Bunning 1717 Dixie Highway, Suite 180 Fort Wright, KY 41011	SENATE - KY Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/22/98	5,000.00
B. Full Name, Mailing Address and ZIP Code Chabot for Congress Committee 333 Glenmore Avenue Cincinnati, OH 45211	HOUSE OH -1 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	1,500.00
C. Full Name, Mailing Address and ZIP Code Chavez for U.S. Congress 438 S. Eastern Avenue Las Vegas, NV 89119	HOUSE NV-01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/29/98	1,000.00
D. Full Name, Mailing Address and ZIP Code Cook '86 Re-election Committee P.O. Box 25026 Washington, DC 20007	HOUSE UT -02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	2,000.00
E. Full Name, Mailing Address and ZIP Code Friends of Bud Cramer 38 Ivy Street, SE Washington, DC 20003	HOUSE AL -05 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/98	2,000.00
F. Full Name, Mailing Address and ZIP Code Fletcher for Congress '98 860 Corporate Drive, Suite 105 Lexington, KY 40503	HOUSE KY -08 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	2,000.00
G. Full Name, Mailing Address and ZIP Code Fox for Congress Committee 4461 Brookfield Corporate Drive, #200 Charlottesville, VA 20151	HOUSE PA -13 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/98	1,000.00
H. Full Name, Mailing Address and ZIP Code Greenlee for Congress 26 Garden Center, Suite 3A Broomfield, CO 80234	HOUSE CO-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/98	1,000.00
I. Full Name, Mailing Address and ZIP Code Montanans for Rick Hill 1519 Woodbine Street Alexandria, VA 22302	HOUSE MT -AL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/98	1,000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

16,500.00

**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 2 OF 3  
FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hofmeister for Congress 2611 East 46th Street, Building M Indianapolis, IN 46205	HOUSE IN-10 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Steve Kuykendall for Congress P.O. Box 16021 Alexandria, VA 22302	HOUSE 6A-36 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/98	2,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Blanche Lincoln P.O. Box 3187 Little Rock, AK 72203	SENATE AR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1998	10/22/98	2,500.00
D. Full Name, Mailing Address and ZIP Code Jean Leising for Congress P.O. Box 53 Batesville, IN 47006	HOUSE IN -08 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/98	2,000.00
E. Full Name, Mailing Address and ZIP Code Ryan for Congress P.O. Box 2778 Arlington, VA 22202	HOUSE WI-01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/22/98	2,000.00
F. Full Name, Mailing Address and ZIP Code Don Sherwood for Congress 10 Bridgeover Tunkhannock, PA 18857	HOUSE PA-10 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/98	2,000.00
G. Full Name, Mailing Address and ZIP Code Adam Smith for Congress Committee P.O. Box 25345 Federal Way, WA 98093	HOUSE WA -08 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/23/98	500.00
H. Full Name, Mailing Address and ZIP Code Terry for Congress 1107 S. 118th Street Omaha, NE 68144	HOUSE - Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/98	1,000.00
I. Full Name, Mailing Address and ZIP Code Friends of Rick White P.O. Box 8156 Kirkland, WA 98034	HOUSE WA -01 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/18/98	2,000.00

SUBTOTAL of Disbursements This Page (optional) .....

15,000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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**NAME OF COMMITTEE (In Full)**  
 Food Marketing Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BDG Design Catering 354-A West Broad Street Falls Church, VA 22046	W.J. Tauzin House LA-03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/98	1,386.00  (IN KIND)
B. Full Name, Mailing Address and ZIP Code ACE Beverage 3301 New Mexico Avenue, NW Washington, DC 20016	Purpose of Disbursement W.J. Tauzin House-LA-03 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/19/98	176.22  (IN KIND)
C. Full Name, Mailing Address and ZIP Code National Republican Senatorial Committee 425 Second Street, NE Washington, DC 20002	Purpose of Disbursement Contrib.: Nat. Rep. Sen. Committee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) N/A	10/22/98	5,000.00
D. Full Name, Mailing Address and ZIP Code Albertson's, Inc. Store #463 2461 N. Pearl Street Tacoma, WA 98406	Purpose of Disbursement Norm Dicks House-WA-D6 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/28/98	720.81  (IN KIND)
E. Full Name, Mailing Address and ZIP Code Albertson's, Inc. 2551 S. Lohman Las Cruces, NM 88011	Purpose of Disbursement Joe Skeen House-NM-02 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/02/98	751.11  (IN KIND)
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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	
<b>TOTAL</b> This Period (last page this line number only) .....	39,534.14

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 12/1/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>AF</i> PREPARER	 12/1/98 DATE PREPARED