

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Condit for Congress - 1998		2. FEC IDENTIFICATION NUMBER C00247544
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 555 Capitol Mall, Suite 1425		
CITY, STATE and ZIP CODE Sacramento, CA 95814	STATE/DISTRICT CA/18	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

### 4. TYPE OF REPORT

<input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____
<input checked="" type="checkbox"/> July 15 Quarterly Report	<input type="checkbox"/> Thirtieth day report following the General Election on _____ in the State of _____
<input type="checkbox"/> October 15 Quarterly Report	<input type="checkbox"/> Termination Report
<input type="checkbox"/> January 31 Year End Report	
<input type="checkbox"/> July 31 Mid-Year Report (Non-election Year Only)	

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

### SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>05/14/98</u> through <u>06/30/98</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)) . . . . .	54,305.00	135,015.00
(b) Total Contributions Refunds (from Line 20(d)) . . . . .	1,500.00	3,685.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) . . . . .	52,805.00	131,330.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) . . . . .	31,024.80	102,020.29
(b) Total Offsets to Operating Expenditures (from Line 14) . . . . .	0.00	1,137.45
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) . . . . .	31,024.80	100,882.84
8. Cash on Hand at Close of Reporting Period (from Line 27) . . . . .	129,470.89	
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) . . . . .	2,789.79	

For further information contact:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9630  
Local 202-376-3120

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

Lance H. Olson  
Signature of Treasurer

Date

7/15/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

# DETAILED SUMMARY PAGE

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

Name of Committee (in full)	Report Covering the Period:		
Condit for Congress - 1998	From: 05/14/98	To: 06/30/98	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)	25,750.00		114(i)(I)
(ii) Unitemized	1,655.00		114(i)(II)
(iii) Total of contributions from individuals	27,405.00	51,815.00	114(i)(III)
(b) Political Party Committees	0.00	0.00	114(b)
(c) Other Political Committees (such as PACs)	26,900.00	89,200.00	114(c)
(d) The Candidate	0.00	0.00	114(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	54,305.00	135,015.00	114(e)
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00	12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate	0.00	0.00	134(a)
(b) All Other Loans	0.00	0.00	134(b)
(c) TOTAL LOANS (add 13(a) and (b))	0.00	0.00	134(c)
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	0.00	1,137.45	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	492.33	1,171.74	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	54,797.33	137,324.19	16
II. DISBURSEMENTS			
<b>17. OPERATING EXPENDITURES</b>	31,024.80	102,020.29	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	0.00	0.00	18
<b>19. LOANS REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00	19(a)
(b) Of All Other Loans	0.00	0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	0.00	19(c)
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other Than Political Committees	1,000.00	1,185.00	20(a)
(b) Political Party Committees	500.00	500.00	20(b)
(c) Other Political Committees (such as PACs)	0.00	2,000.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	1,500.00	3,685.00	20(d)
<b>21. OTHER DISBURSEMENTS</b>	3,000.00	6,119.00	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	35,524.80	111,824.29	22
III. CASH SUMMARY			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	110,198.36	23
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	54,797.33	24
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>	\$	164,995.69	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>	\$	35,524.80	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>	\$	129,470.89	27

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**Contributions From Individuals/Persons**

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
**Committee ID Number** C00247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Bozick 77330 Medicine Bow Circle Indian Wells, CA 92210	R. Baganasarium, Inc.	05/19/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Farmer	Aggregate Year-to-Date \$ 1,000.00	
J.E. Coleman 2702 Scenic Bend Modesto, CA 95355	E & J Gallo Winery	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date \$ 1,000.00	
Mrs. J.E. Coleman 2702 Scenic Bend Modesto, CA 95355	Owner	05/18/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vine Cottage Antiques	Aggregate Year-to-Date \$ 2,000.00	
Mrs. J.E. Coleman 2702 Scenic Bend Modesto, CA 95355	Owner	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vine Cottage Antiques	Aggregate Year-to-Date \$ 2,000.00	
Dan J. Costa 708 L Street Modesto, CA 95354	Davis Lay, Inc.	05/09/98	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Corporate Executive	Aggregate Year-to-Date \$ 300.00	
Thomas J. Dennis, Sr. 209 10th Street, SE Washington, DC 20003-2118	Dennis and Company	06/30/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date \$ 250.00	
Donn A. Passero M.D. 600 Coffee Road Modesto, CA 95355	Gould Medical Foundation	06/09/98	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Orthopaedic Surgeon	Aggregate Year-to-Date \$ 300.00	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			4,650.00
<b>TOTAL This Period (last page this line number only)</b> .....			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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PAGE 2 OF 5  
FOR LINE NUMBER 11(a) (i)

**Contributions From Individuals/Persons**

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**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
C00247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Aileen Gallo 1908 Maze Blvd. Modesto, CA 95358	Homemaker	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date \$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Aileen Gallo 1908 Maze Blvd. Modesto, CA 95358	Homemaker	05/18/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date \$ 2,000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ernest Gallo 1712 Maze Road Modesto, CA 95351	B & J Gallo Winery	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vintner	Aggregate Year-to-Date \$ 1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joseph B. Gallo P.O. Box 1130 Modesto, CA 95353	B & J Gallo Winery	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary C. Gallo 865 Claus Road Modesto, CA 95357	Homemaker	05/18/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary C. Gallo 865 Claus Road Modesto, CA 95357	Homemaker	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ofelia Gallo 891 S. Hopper Road Modesto, CA 95351	Housewife	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date \$ 2,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	7,000.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**Contributions From Individuals/Persons**

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**NAME OF COMMITTEE (in Full)** (05/14/98 - 06/30/98)  
 Condit for Congress - 1998 C00247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ofelia Gallo 891 S. Hopper Road Modesto, CA 95351	Housewife	05/18/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date \$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert J. Gallo P.O. Box 1136 Modesto, CA 95353	E & J Gallo Winery	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	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
Robert E. Gilbert 566 North Second Avenue Oakdale, CA 95361	A.L. Gilbert Co.	06/15/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Grain Processor	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
Kenneth Groefsema 3435 E.S. Bear Creek Dr. Merced, CA 95340	Kenneth Groefsema Ranch	06/09/98	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date \$ 250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lynn W. Johnson 689 Arcadia Drive St. Paul, MN 55118	Information Requested - No Response	05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested - No Response	Aggregate Year-to-Date \$ 2,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lynn W. Johnson 689 Arcadia Drive St. Paul, MN 55118	Information Requested - No Response	05/18/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested - No Response	Aggregate Year-to-Date \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joel S. Langesfeld 3051 Farmington Drive Atlanta, GA 30339	Information Requested - No Response	06/09/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested - No Response	Aggregate Year-to-Date \$ 500.00	

**SUBTOTAL** of Receipts This Page (optional) ..... 5,250.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**Contributions From Individuals/Persons**

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NAME OF COMMITTEE (in Full) Condit for Congress - 1998 (05/14/98 - 06/30/98) CDD247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gary Lopez 3508 Beachler Drive Modesto, CA 95356	Firehouse Travel/Gary's Field Insp.	06/09/98	450.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date \$ 555.00	
B. Full Name, Mailing Address and ZIP Code Aldo Lovotti 496 Hopkins Road Sacramento, CA 95864	Name of Employer Information Requested - No Response	Date (month, day, year) 06/15/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested - No Response	Aggregate Year-to-Date \$ 2,000.00	contribution refunded 6/25/98
C. Full Name, Mailing Address and ZIP Code Aldo Lovotti 496 Hopkins Road Sacramento, CA 95864	Name of Employer Information Requested - No Response	Date (month, day, year) 06/15/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Information Requested - No Response	Aggregate Year-to-Date \$ 2,000.00	
D. Full Name, Mailing Address and ZIP Code James C. MacMillan, M.D. 1524 McHenry Ave. Ste. 570 Modesto, CA 95350	Name of Employer Self	Date (month, day, year) 06/09/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date \$ 500.00	
E. Full Name, Mailing Address and ZIP Code M.A. Maxwell 2595 Sn Bear Creek Merced, CA 95340	Name of Employer Self (Maxwell Enterprises)	Date (month, day, year) 06/09/98	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date \$ 500.00	
F. Full Name, Mailing Address and ZIP Code Marshall Reisman 1555 East Lake Road Cazenovia, NY 13035	Name of Employer Andan, Inc.	Date (month, day, year) 05/18/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman	Aggregate Year-to-Date \$ 2,000.00	
G. Full Name, Mailing Address and ZIP Code Marshall Reisman 1555 East Lake Road Cazenovia, NY 13035	Name of Employer Andan, Inc.	Date (month, day, year) 05/18/98	Amount of Each Receipt this Period 1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Businessman	Aggregate Year-to-Date \$ 2,000.00	

SUBTOTAL of Receipts This Page (optional) ..... 5,550.00

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

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**Contributions From Individuals/Persons**

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**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
**Committee ID Number** C00247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daniel M. Romano 2555 S. Leavitt Street Chicago, IL 60608  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self-Employed  Occupation Businessman Aggregate Year-to-Date \$ 1,000.00	05/19/98	1,000.00
Michael J. Romano III 7575 S. Kostner Avenue, Suite 100 Chicago, IL 60652  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Romano Brothers Beverage Company  Occupation Executive Aggregate Year-to-Date \$ 1,000.00	05/29/98	1,000.00
Robert E. Shipley 4340 Copper Cliff Lane Modesto, CA 95355  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Squab Producers of CA  Occupation General Manager Aggregate Year-to-Date \$ 500.00	06/15/98	500.00
Doug Stephens 1350 Main Street, P.O. Box 846 Newman, CA 95360  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Stephens Realtors  Occupation Owner Aggregate Year-to-Date \$ 300.00	06/09/98	300.00
Laura R. Tornquist 2560 E. Canal Drive Turlock, CA 95380  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Delta Brands  Occupation Salesperson Aggregate Year-to-Date \$ 300.00	06/09/98	300.00
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 \$		

<b>SUBTOTAL of Receipts This Page (optional)</b> .....	3,100.00
<b>TOTAL This Period (last page this line number only)</b> .....	25,750.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**Contributions From Other Political Committees**

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<b>NAME OF COMMITTEE (in Full)</b> Condit for Congress - 1998	(05/14/98 - 06/30/98) C00247544
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A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Allied Grape Growers PAC 3475 W. Shaw Avenue, Suite 103 Fresno, CA 93711		06/30/98	200.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 200.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
AFGE-American Fed Government Employees PAC 80 F St., N.W. Washington, DC 20001		06/01/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Amer Federal State Cty & Muni Employees PAC 1625 L Street, N.W. Washington, DC 20036		06/02/98	2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 4,500.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
American Health Care Association PAC 1201 L Street, N.W. Washington, DC 20005		06/09/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
AICPA-Amer Inst of CPA Effective Legislation 1211 Ave. of the Americas New York, NY 10036		06/09/98	1,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 1,500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Build PAC of the Nat'l Assn. of Home Builders 1201 15th Street, NW Washington, DC 20005-2800		06/15/98	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 2,500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Calif Farm Bureau Federation PAC (FarmPac) 1601 Exposition Blvd. Sacramento, CA 95815		06/09/98	800.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	9,000.00
<b>TOTAL</b> This Period (last page this line number only)	



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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**Contributions From Other Political Committees**

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<b>NAME OF COMMITTEE (in Full)</b> Condit for Congress - 1998	105/14/98 - 06/30/98 C00247544
--	-----------------------------------

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CA Healthcare Assn. PAC - Federal P.O. Box 1252 Sacramento, CA 95812-1252		06/09/98	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 150.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CALCOT Federal PAC P.O. Box 259 Bakersfield, CA 93302		06/09/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Comm. Letter Carriers Political Ed - NBLIC 100 Indiana Ave., NW Washington, DC 20001		06/15/98	2,500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 4,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Conagra Good Government Association PAC One Conagra Drive Omaha, NE 68102-5001		05/27/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 1,000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Council of Insurance Agents & Brokers PAC 701 Pennsylvania Ave., NW, Ste. 750 Washington, DC 20004		05/18/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 1,000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fireman's Fund Ins Co Emp Resp Gvmt PAC 777 San Marin Drive Novato, CA 94945		06/09/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 500.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Food Marketing Institute PAC (FOODPAC) 1750 K Street, N.W., Suite 700 Washington, DC 20006		05/26/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 1,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	6,650.00
<b>TOTAL</b> This Period (last page this line number only)	

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

**Contributions From Other Political Committees**

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**NAME OF COMMITTEE (In Full)** (05/14/98 - 06/30/98)  
 Condit for Congress - 1998 C03247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Independent Insurance Agents of America PAC 412 First Street, S.E., Ste. 300 Washington, DC 20003		05/18/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 1,000.00	
Kaman Corp. Good Government Fund (Federal) 1392 Blue Hills Ave. Bloomfield, CT 06002-0001		05/29/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 1,000.00	
Land O'Lakes, Inc. Political Action Comm. P.O. Box 116 Minneapolis, MN 55440		06/30/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 500.00	
National Restaurant Association PAC 1200 Seventeenth Street, NW Washington, DC 20036-3097		05/18/98	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 500.00	
Novartis Good Government Fund 2001 Pennsylvania Avenue, NW Washington, DC 20006		05/20/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 500.00	
Pharmacia & Upjohn Legislative Support Exch. 7000 Portage Road Kalamazoo, MI 49001		06/09/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 500.00	
Realtors Political Action Committee R.P.A.C. 430 N. Michigan Ave. Chicago, IL 60611		06/15/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 2,000.00	
<b>SUBTOTAL of Receipts This Page (optional)</b>			5,000.00
<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 Summary Page

**Contributions From Other Political Committees**

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**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 **(05/14/98 - 06/30/98)**  
**Committee ID Number** C00247544

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Realtors Political Action Committee R.P.A.C. 430 N. Michigan Ave. Chicago, IL 60611		06/15/98	1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 2,000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SBC Communications, Inc. Employee Federal PAC 175 E. Houston Room 6-F-08 San Antonio, TX 78205		05/18/98	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Committee to Re-Elect Gordon Spencer P.O. Box 2510 Merced, CA 95344		06/09/98	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 150.00	"permissible funds" verification pending
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tenneco Employees Good Government Fund 701 Pennsylvania Avenue, NW, Suite 710 Washington, DC 20004		05/18/98	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Tri/Valley Growers For Responsible Govt P.O. Box 7114 San Francisco, CA 94120-7114		06/03/98	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
Union Pacific Fund for Effective Govt. PAC 600 Thirteenth Street, NW, Suite 340 Washington, DC 20005		05/29/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	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
United Egg Association EGSPAC 1303 Hightower Trail, Ste. 200 Atlanta, GA 30350		05/29/98	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date \$ 1,000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional)	4,650.00
<b>TOTAL</b> 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 5 OF 5  
FOR LINE NUMBER 11(c)

**Contributions From Other Political Committees**

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**NAME OF COMMITTEE (In Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
C00247544

<p><b>A. Full Name, Mailing Address and ZIP Code</b> WELLPAC/Wellpoint Health Networks PAC 21555 Oxnard Street Woodland Hills, CA 91367</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date \$ 1,000.00</p>	<p>Date (month, day, year) 06/08/98</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Western United Dairymen Federal PAC 1315 K Street Modesto, CA 95354</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date \$ 1,100.00</p>	<p>Date (month, day, year) 06/09/98</p>	<p>Amount of Each Receipt this Period 1,100.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Occupation</p> <p>Aggregate Year-to-Date \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional)</p>			<p>1,600.00</p>
<p><b>TOTAL</b> This Period (last page this line number only)</p>			<p>26,900.00</p>

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

Other Receipts

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NAME OF COMMITTEE (in Full) (05/14/98 - 06/30/98)  
 Condit for Congress - 1998 C00247544

<b>A. Full Name, Mailing Address and ZIP Code</b> Bank of America P.O. Box 3530 Rancho Cordova, CA 95741-3530  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/29/98	128.16
	Aggregate Year-to-Date \$		1,127.28
<b>B. Full Name, Mailing Address and ZIP Code</b> Bank of America P.O. Box 3530 Rancho Cordova, CA 95741-3530  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	05/31/98	102.18
	Aggregate Year-to-Date \$		1,127.29
<b>C. Full Name, Mailing Address and ZIP Code</b> Bank of America P.O. Box 3530 Rancho Cordova, CA 95741-3530  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/98	141.89
	Aggregate Year-to-Date \$		1,127.28
<b>D. Full Name, Mailing Address and ZIP Code</b> Bank of America P.O. Box 3530 Rancho Cordova, CA 95741-3530  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	06/30/98	99.27
	Aggregate Year-to-Date \$		1,127.28
<b>E. Full Name, Mailing Address and ZIP Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date \$		
<b>F. Full Name, Mailing Address and ZIP Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date \$		
<b>G. Full Name, Mailing Address and ZIP Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
	Aggregate Year-to-Date \$		

SUBTOTAL of Receipts This Page (optional)	471.50
TOTAL This Period (last page this line number only)	471.50

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

**Operating Expenditures**

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NAME OF COMMITTEE (in Full)

(05/14/98 - 06/30/98)

Condit for Congress - 1998

CD0247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AT & T P.O. Box 48628 Phoenix, AZ 85062-8628	phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/04/98	12.57
B. Full Name, Mailing Address and ZIP Code AT & T P.O. Box 48628 Phoenix, AZ 85062-8628	phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	131.69
C. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679-0001	Purpose of Disbursement see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/98	1,028.48.
D. Full Name, Mailing Address and ZIP Code United Airlines Washington, DC	Purpose of Disbursement travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/98	1,000.00 (memo)
E. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679-0001	Purpose of Disbursement meals Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/98	140.73
F. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679-0001	Purpose of Disbursement meals Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/98	292.34
G. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679-0001	Purpose of Disbursement travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/98	16.98
H. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679-0001	Purpose of Disbursement gifts for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/98	73.35
I. Full Name, Mailing Address and ZIP Code American Express Suite 0001 Chicago, IL 60679-0001	Purpose of Disbursement fees Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/98	300.00
SUBTOTAL of Disbursements This Page (optional)			1,936.14
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

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FOR LINE NUMBER	
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**Operating Expenditures**

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**NAME OF COMMITTEE (in Full)**

(05/14/98 - 06/30/98)

Condit for Congress - 1998

CC0247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Ballonery, Inc. 1346 E. Harding Way Stockton, CA 95205	fundraiser expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	1,546.74
B. Full Name, Mailing Address and ZIP Code Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	Purpose of Disbursement see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	641.90
C. Full Name, Mailing Address and ZIP Code Paper Direct New Jersey	Purpose of Disbursement fundraiser expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	266.90 (memo)
D. Full Name, Mailing Address and ZIP Code 98 Cent Store Modesto, CA	Purpose of Disbursement fundraiser expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	101.02 (memo)
E. Full Name, Mailing Address and ZIP Code Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	Purpose of Disbursement see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	1,548.49
F. Full Name, Mailing Address and ZIP Code IJ Radicchio Washington, DC	Purpose of Disbursement reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	1,071.21 (memo)
G. Full Name, Mailing Address and ZIP Code Pasta Mia Washington, DC	Purpose of Disbursement meals Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	254.30 (memo)
H. Full Name, Mailing Address and ZIP Code Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	Purpose of Disbursement printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	125.00
I. Full Name, Mailing Address and ZIP Code Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	Purpose of Disbursement phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	21.95

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

3,884.06

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Operating Expenditures**

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**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
 C00247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	donations Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	60.00
B. Full Name, Mailing Address and ZIP Code Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	Purpose of Disbursement see below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	859.55
C. Full Name, Mailing Address and ZIP Code Marriott Hotel Washington, DC	Purpose of Disbursement travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	859.55 (memo)
D. Full Name, Mailing Address and ZIP Code Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	Purpose of Disbursement shipping Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	22.75
E. Full Name, Mailing Address and ZIP Code Camera Center 1220 J Street Modesto, CA 95354	Purpose of Disbursement gifts for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/04/98	118.65
F. Full Name, Mailing Address and ZIP Code Camera Center 1220 J Street Modesto, CA 95354	Purpose of Disbursement gifts for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	25.50
G. Full Name, Mailing Address and ZIP Code Gary Condit Longworth House Office Bldg. Room 1529 Washington, DC 20515	Purpose of Disbursement reimbursement meals/travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/27/98	189.19
H. Full Name, Mailing Address and ZIP Code Gary Condit Longworth House Office Bldg. Room 1529 Washington, DC 20515	Purpose of Disbursement travel reimbursements Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/98	135.36
I. Full Name, Mailing Address and ZIP Code Helen Condit 1813 Myrtlewood drive Ceres, CA 95307	Purpose of Disbursement catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/98	450.75
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....			1,861.75
<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	PAGE	OF
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Operating Expenditures

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NAME OF COMMITTEE (in Full)	(05/14/98 - 06/30/98)
Condit for Congress - 1998	C00247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donna Dami 1116-6 Cedar creek Modesto, CA 95355	fundraising consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/14/98	400.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donna Dami 1116-6 Cedar creek Modesto, CA 95355	fundraising consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/12/98	400.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Donna Dami 1116-6 Cedar creek Modesto, CA 95355	mileage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	409.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gina C. Dayton 1215B Penderview Lane, #1723 Fairfax, VA 22033	supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/01/98	109.70
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Diablo Grande P.O. Box 655 Patterson, CA 95363	catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	1,428.72
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Diablo Grande P.O. Box 655 Patterson, CA 95363	fundraising expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	4,030.77
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Diablo Grande P.O. Box 655 Patterson, CA 95363	catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	1,708.82
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Gowans Printing Company 1310 H St. Modesto, CA 95354	printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	783.84
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ker-Vue P.R.O. P.O. Box 2837 Merced, CA 95344	photography Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	325.00

SUBTOTAL of Disbursements This Page (optional)	9,595.85
TOTAL This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Operating Expenditures**

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
**Committee ID Number** C00247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Loomis Modesto Florist 1111 J Street Modesto, CA 95354	flowers for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/98	80.53
Loomis Modesto Florist 1111 J Street Modesto, CA 95354	gifts for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	120.79
MID Modesto Irrigation District 1231 Eleventh St./POB 5355 Modesto, CA 95352-5355	utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	42.32
Merced County Fair 900 Martin Luther King, Jr. Way Merced, CA 95340	booth Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/10/98	220.00
Merced Mariposa CLC 557 West Main Merced, CA 95340	advertisement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/23/98	500.00
Mitchell Plaza Mini Storage 3032 Dale Court Ceres, CA 95307	rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/29/98	160.00
Mitchell Plaza Mini Storage 3032 Dale Court Ceres, CA 95307	rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/29/98	160.00
Modesto A's Baseball Club, Inc. P.O. Box 883 Modesto, CA 95353	civic donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	1,750.00
Modesto Welding P.O. Box 4547 Modesto, CA 95352	fundraiser expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/98	414.44
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....			<b>3,448.08</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	PAGE	OF
	6	7
FOR LINE NUMBER		
17		

**Operating Expenditures**

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NAME OF COMMITTEE (in Full) (05/14/98 - 06/30/98)  
 Condit for Congress - 1998 C00247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Modesto Welding P.O. Box 4547 Modesto, CA 95352	fundraiser expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/04/98	68.00
Modesto Welding P.O. Box 4547 Modesto, CA 95352	fundraiser expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	64.65
Murillo Nursery 3230 E. Service Rd. Ceres, CA 95307	gifts for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/19/98	16.64
Murillo Nursery 3230 E. Service Rd. Ceres, CA 95307	gifts for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/04/98	32.21
Murillo Nursery 3230 E. Service Rd. Ceres, CA 95307	gifts for constituents Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	45.20
Olson Hagel Leidigh Waters & Fishburn LLP 555 Capitol Mall, Ste. 1425 Sacramento, CA 95814	legal services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/98	1,416.50
Olson Hagel Leidigh Waters & Fishburn LLP 555 Capitol Mall, Ste. 1425 Sacramento, CA 95814	legal expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/15/98	188.77
PG & E P.O. Box 997300 Sacramento, CA 95899-7300	utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	42.27
Pacific Bell Payment Center Sacramento, CA 95887-0001	phones Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/04/98	45.34

SUBTOTAL of Disbursements This Page (optional)	1,919.58
TOTAL This Period (last page this line number only)	

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

**Operating Expenditures**

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
**Committee ID Number** C00247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pacific Bell Payment Center Sacramento, CA 95887-0001	phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	56.41
B. Full Name, Mailing Address and ZIP Code Smart & Final 801 9th Street Modesto, CA 95354	Purpose of Disbursement supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/29/98	19.94
C. Full Name, Mailing Address and ZIP Code Smart & Final 801 9th Street Modesto, CA 95354	Purpose of Disbursement supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/98	105.64
D. Full Name, Mailing Address and ZIP Code U.S. Postmaster Modesto, CA	Purpose of Disbursement box rental Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	52.00
E. Full Name, Mailing Address and ZIP Code U.S. Postmaster Modesto, CA	Purpose of Disbursement postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/25/98	160.00
F. Full Name, Mailing Address and ZIP Code Fred Vasquez 1905 Enslin Avenue Modesto, CA 95350	Purpose of Disbursement signs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	05/20/98	168.85
G. Full Name, Mailing Address and ZIP Code Fred Vasquez 1905 Enslin Avenue Modesto, CA 95350	Purpose of Disbursement signs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/30/98	168.00
H. Full Name, Mailing Address and ZIP Code Warden's 1401 J Street Modesto, CA 95354	Purpose of Disbursement supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/04/98	32.12
I. Full Name, Mailing Address and ZIP Code The Wise Hodgdon Group 44 Canal Center Plaza, Suite 400 Alexandria, VA 22314	Purpose of Disbursement fundraising consulting, expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/17/98	5,630.55
<b>SUBTOTAL of Disbursements This Page (optional)</b>			6,593.51
<b>TOTAL This Period (last page this line number only)</b>			29,238.99

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
20 (a)		

Refunds of Contributions To Individuals/Persons

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

**NAME OF COMMITTEE (in Full)** Condit for Congress - 1998 (05/14/98 - 06/30/98)  
**Committee ID** C00247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Aldo Lovotti 496 Hopkins Road Sacramento, CA 95864	refund of contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/25/98	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

<b>SUBTOTAL</b> of Disbursements This Page (optional)	1,000.00
<b>TOTAL</b> This Period (last page this line number only)	1,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
20 (b)		

Refunds of Contributions To Political Party Committees

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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

<b>NAME OF COMMITTEE (In Full)</b> Condit for Congress - 1998	(05/14/98 - 06/30/98)
C00247544	

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Lorillard Public Affairs Committee 1 Park Avenue New York, NY 10016	refund of contribution	05/15/98	500.00
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
SUBTOTAL of Disbursements This Page (optional)			500.00
TOTAL This Period (last page this line number only)			500.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	1
FOR LINE NUMBER		
21		

Other 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 purpose, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

(05/14/98 - 06/30/98)

Condit for Congress - 1998

C00247544

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baessler for Senate 401 West Main Street, Suite 319 Lexington, KY 40507	Contribution to Scotty Baessler US Senate, Kentucky Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/25/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Hahn for Congress 8665 Wilshire Boulevard, #220 Beverly Hills, CA 90211	Purpose of Disbursement Contribution to Janice Hahn CD-36, California Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/25/98	1,000.00
C. Full Name, Mailing Address and ZIP Code Friends of Blanche Lincoln 1616 West 3rd Street Little Rock, AK 72201	Purpose of Disbursement Contribution to Blanche Lincoln US Senate, Arkansas Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/25/98	1,000.00
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)	3,000.00
TOTAL This Period (last page this line number only)	3,000.00

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

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

Name of Committee (in Full) (05/14/98 - 06/30/98)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
Condit for Congress - 1998 C00247544				
<b>A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> American Express Suite 0601 Chicago, IL 60679-0001	1,169.21	0.00	1,169.21	0.00
<b>Nature of Debt (Purpose):</b> travel reimbursements				
<b>B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Bankcard Center P.O. Box 53121 Phoenix, AZ 85072-3121	2,906.52	2,250.55	2,906.52	2,250.55
<b>Nature of Debt (Purpose):</b> meals, travel and fundraising expenses				
<b>C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Gowans Printing Company 1319 W St. Modesto, CA 95354	783.84	0.00	783.84	0.00
<b>Nature of Debt (Purpose):</b> printing				
<b>D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> Jericho Promotions Modesto, CA	0.00	539.24	0.00	539.24
<b>Nature of Debt (Purpose):</b> Golf bags and golf balls				
<b>E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b> The Wise Hodgdon Group 44 Canal Center Plaza, Suite 400 Alexandria, VA 22314	5,830.55	0.00	5,830.55	0.00
<b>Nature of Debt (Purpose):</b> fundraising consultant				
<b>F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor</b>				
<b>Nature of Debt (Purpose):</b>				
1) SUBTOTALS This Period This Page (optional) . . . . .				2,789.79
2) TOTAL This Period (last page in this file only) . . . . .				2,789.79
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) . . . . .				0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				2,789.79



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 7-15-98
<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>JMU</i> PREPARER	7-21-98 DATE PREPARED